Tools to leverage cross-sector systems that enhance language acquisition and kindergarten readiness for children who are DHH

EHDI Conference

March 17, 2024

National **MCH** Workforce
Development Center
Advancing Health Transformation

Please share brief hellos at your table including your name, state, & role.

Learning Objectives

- **Gain exposure** to systems thinking, implementation science, and change management approaches.

- **Increase ability** to use implementation drivers & stages, whole systems maps, the 5 Rs, and appreciative inquiry to build strong cross-sector systems.

- **Apply** one or more new tools to a state's EHDI program context.

Image Source: Vecteezy

Empty the Cup

- **Find a partner** and talk about:
  - What are you carrying into the space today from home?
  - What's one hope you have about today's session?
  - What's one hesitation you have about today's session?

Image Source: Adobe Stock

Systems Overview

What is a system?

A collection of *parts* that interact with each other to form an *interdependent whole*

Examples of systems:

A **watch** is a system made up of gears & materials that work together to tell time

Examples of systems:

A **_watch_** is a system made up of gears & materials that work together to tell time

A **_family_** or **_household_** is a system that works together to navigate the world

Examples of systems:

A **watch** is a system made up of gears & materials that work together to tell time

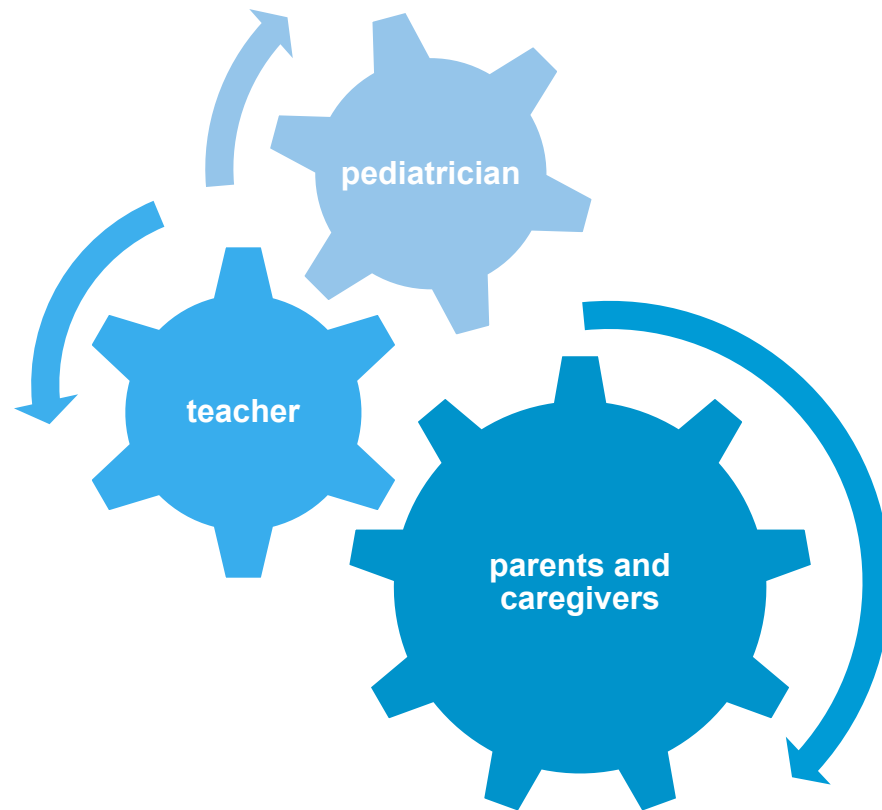A **family** or **household** is a system that works together to navigate the world

A **state health department** is a system that organizes resources, activities, & people to promote health & wellbeing

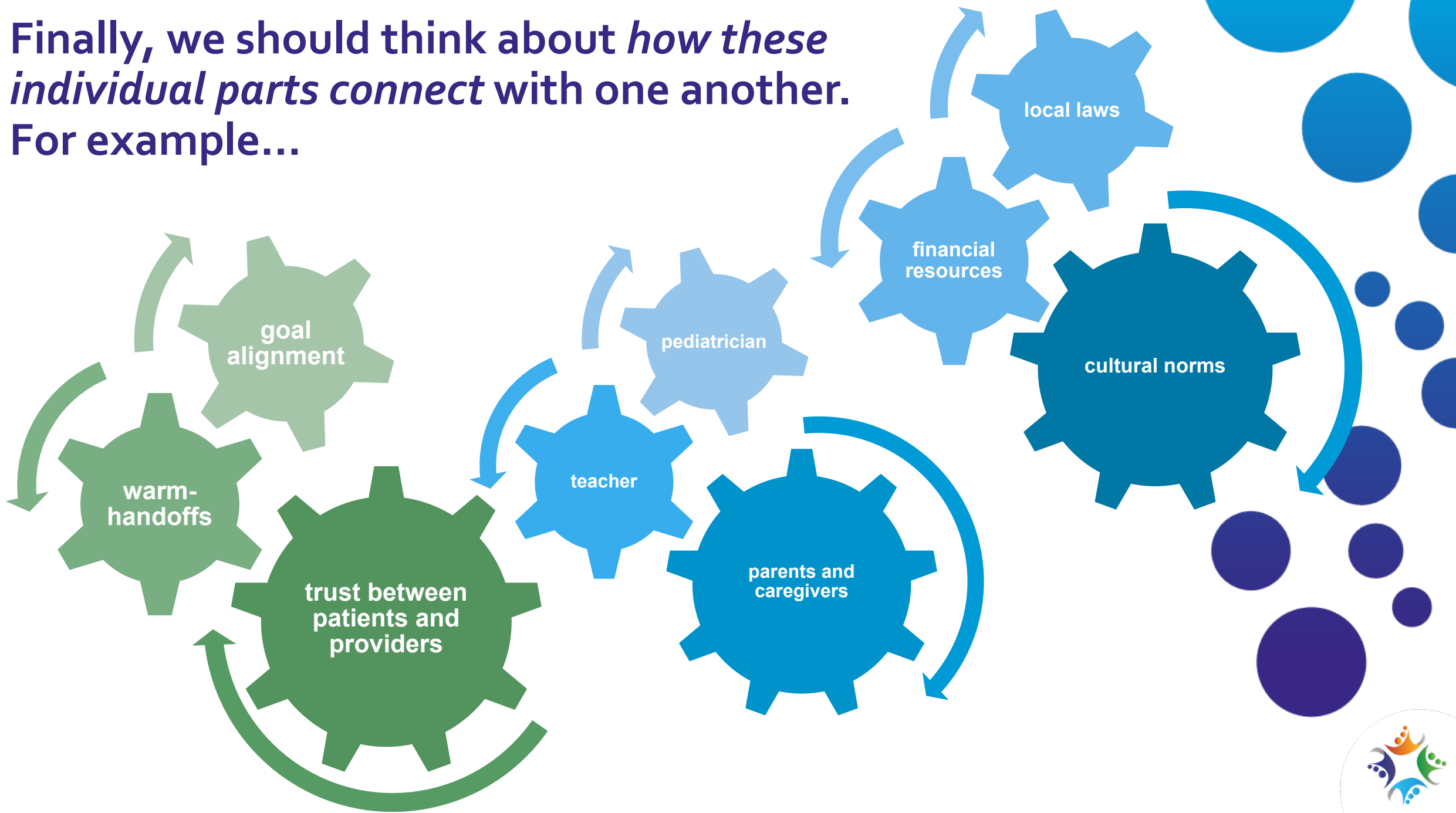# What does the system look like that supports children with special health care needs?

The components or parts of this system might include *people* like…

The parts of this system aren't just made up of people. We should also consider *the other components* like…

local laws

financial resources

pediatrician

cultural norms

teacher
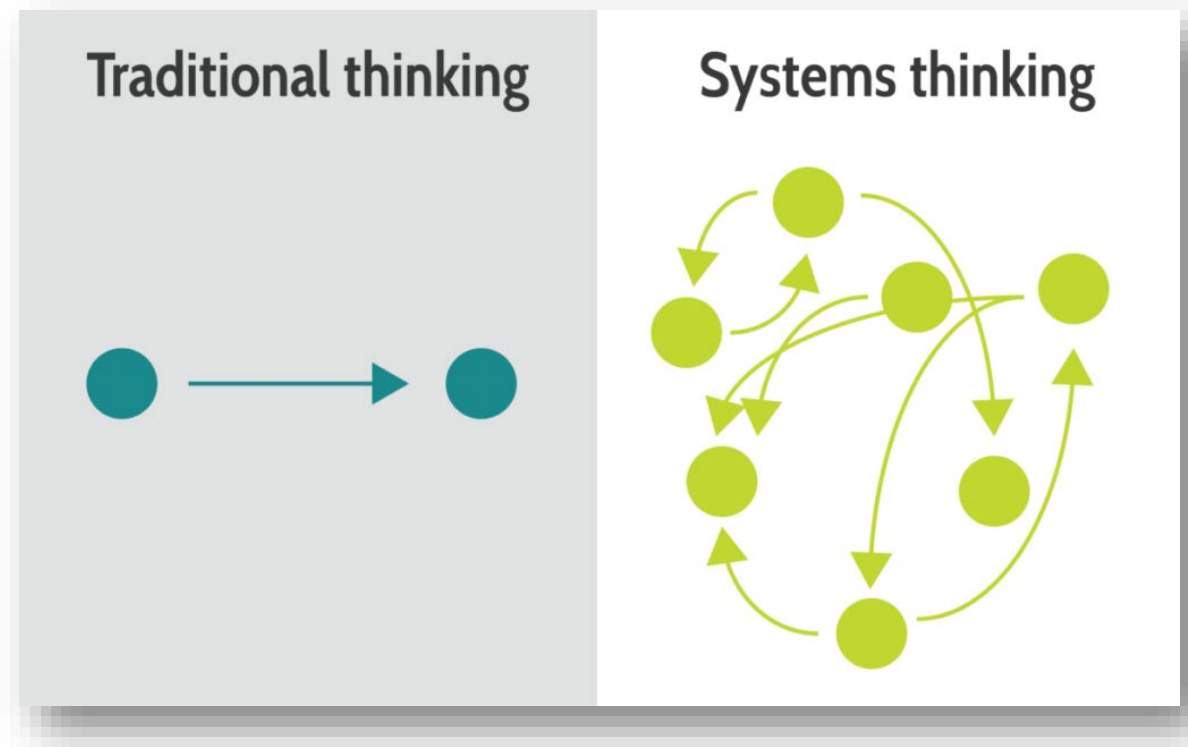
parents and caregivers

Finally, we should think about *how these individual parts connect* with one another. For example…

Why use systems thinking?

No matter what your challenge is, it is affected by a system of interconnected elements

Why use systems thinking?

We want to expand the way you see "the system" you work in to help you identify and leverage powerful opportunities for systems strengthening

How does understanding systems help us respond to complex health problems?

The Iceberg Model for Systems Thinking

**A simple framework
to unravel complexity
and discover root causes
and opportunities to
impact change**

The Iceberg Model for Systems Thinking

Events

What's happening?

- Headlines in a newspaper
- Anecdotes
- Fires to put out

i.e., a hospital or labor and delivery unit closes, funding gets cut, individual cases and diagnoses, etc.

The Iceberg Model for Systems Thinking

Events

Patterns/Trends

What's been happening?
- Past trends over time
- Anticipated future trends
- By race? By geography? By population?

i.e., the wealth gap, inequities in maternal and infant mortality rates, etc.

The Iceberg Model for Systems Thinking

Events

Patterns/Trends

Systems Structures

What structures generate the patterns and trends?
- Rules, norms, policies
- System forces at play
- Relationships between parts

i.e., policies and programs that limit or deny access to services or otherwise cause harm

The Iceberg Model for Systems Thinking

Events

Patterns/Trends

Systems Structures

Mental Models

What drives individual and organizational action or inaction?
- Assumptions, beliefs, and values based on experience, training, etc.
- Our internal, simplified rules about how the world works
- Reflect norms, biases, gaps in experience or understanding

i.e., internalized racism, stereotypes, perceptions of individual power

What is systems strengthening?

System strengthening is the work we do to strengthen systems shaping outcomes we're funded/ dedicated to improve. This involves...

See the 'big picture' MCH ecosystem

Understand where we are, where we want to go, & barriers (i.e., systems structure flaws & problematic mental models)

Develop shared mental models

To prioritize action and sustain change

Facilitate learning systems

Recognize changes and interconnectedness of system parts; act, test, learn, & adapt

Strategize across programs/systems

To align actions, resources, & data and shift structures, policies, & mental models

Support individuals in the system

Explore how individuals think about their role in the system & what they need to be successful

Champion shared decision-making

Be a part of and/or lead collaborative decision-making efforts

Strengthen relationships & connections

Across parts of the system

Build & support coaliations

Ensure you have the right partners/perspectives for a needed initiative

Authentically engage communities

Build trust and shift power to communities & people with lived experiences

Reflections & Questions

Image Source: Vecteezy

In-room stretch break

The 5 R's

The 5 R's

RESULTS

ROLES

RESOURCES

RULES

RELATIONSHIPS

5 R's is a framework used to unpack and understand a system and identify critical contributors that will lead to (or challenge) success

Essential Question:

What are the <u>results</u>, <u>roles</u>, <u>resources</u>, <u>rules</u> and <u>relationships</u> related to enhancing language acquisition and kindergarten readiness for children who are DHH in your state's EHDI system?

(We'll tackle Relationships in a bit...)

5 R's Example

What can we do to strengthen systems to advance birth equity? What's already going well? What do we need to be aware of and focus on to increase our impact?

Image source: The Othering & Belonging Institute

Results: What does birth equity look like?

"Families are able to live and thrive, free of fear, terror, anxiety, and toxic stress, no matter who they are and what their skin color is because the broken system currently around them has been dismantled and rebuilt with integrity and humanity at the center. Joy, opportunity, health, and safety are bursting in each child, family, and community."

Response themes: Birth equity looks like...

- Parity in health outcomes, especially perinatal health outcomes, for all

- Actual access to healthcare, namely affordability, accessibility, acceptability, and respect for personal choice

- A system rooted in reproductive justice

- Listening to diverse patient lived experiences; Families feeling deeply respected, supported, connected, and valued throughout their pregnancy experiences

- Data transparency and accountability, including data on health outcomes and patient experiences among healthcare facilities

Roles: Who are the key actors that affect or are affected by these results?

Response themes: Key actors

- Individuals, families and communities, especially those with systemically marginalized identities
- Policymakers, legislators, staffers, and advocates
- Employers, corporations, funders, and economic actors
- National non-profits and progressive organizations with more flexibility than governmental agencies to innovate
- Community-based organizations
- Health care systems, hospitals, health care providers, and insurance companies
- Schools, daycares, and other industries primarily occupied by women/birthing people
- Entertainment, journalism, and communications industries that create and maintain societal narratives

Resources: What types of resources are important to help advance birth equity

"Another resource [we need] is community. We need the time, space, and leisure (all of which require money) to be able to gather to support each other, learn from each other, and bond with each other. Our shared knowledge and resources currently exist in silos as we all try to make it on our own. However, in community, with all of this knowledge and resources we have inherently compounding on each other, we can thrive."

Response themes: Key resources

- Advocacy and leadership training/opportunities for communities and families

- Meaningful and transparent data sharing

- Strategic, long-term funding and financial resources

- Shared mental model and commitment to advance birth equity

- Advances in health care delivery systems and designs, including the perinatal care workforce

- Collaboration and mentorship among those working to innovate and advance birth equity

- Space and time to be in community with each other

Rules: What rules shape birth equity and your approaches to improving outcomes?

Response themes: Implicit and explicit "rules" in the birth equity system

- Mental models of white supremacy and structural racism

- Funding and grant cycles not supportive of innovation and birth equity

- *Rules we need:*

  - Centering the expertise of BIPOC women and birthing people

  - Flexible, human-centered approaches

  - Support for community-led solutions

  - Strategic trust-based collaborations

Key Takeaway

The 5 Rs can be used to strengthen the system for children who are DHH by:

- Gathering **diverse perspectives** to develop a holistic understanding of the big picture system

- Assessing what about the current system is working or not working to begin **identifying gaps and opportunities for systems strengthening**
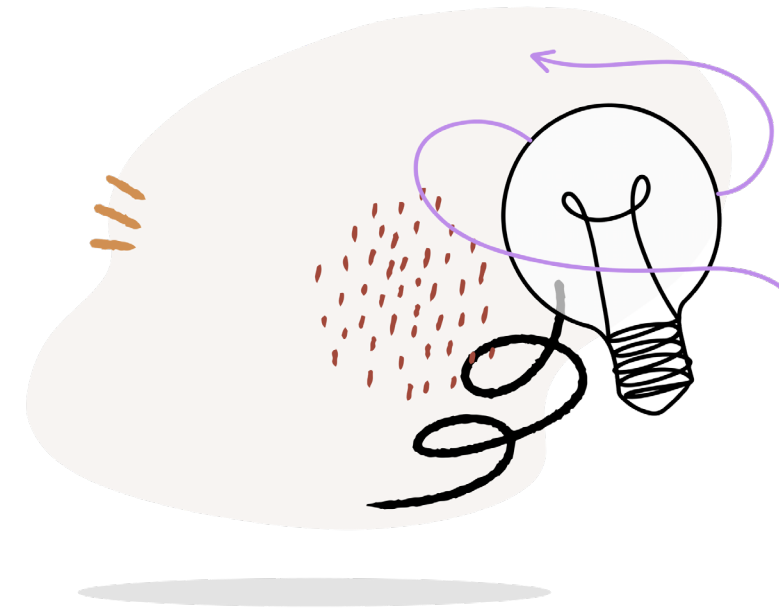
"When a flower doesn't bloom you fix the environment in which it grows, not the flower"
– Alexander Den Heijer

To improve language acquisition and kindergarten readiness...

1. <u>Results</u>: What would a high-functioning EDHI system look like?
(Think big)

2. <u>Role:</u> Who has a role in your EHDI system?
(Think broad)

3. <u>Resources:</u> What's available to you to support your work? (Think beyond money)

4. <u>Rules</u>: What rules apply to your work? (Formal & informal)

Individual Sticky Responses

Gallery Walk

Break

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Reflections

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5th R: Relationships

What are the most important <u>relationships</u> related to enhancing language acquisition and kindergarten readiness for children who are DHH in your state's EHDI system?

Relationships: What key relationships must we focus on to improve birth equity?

"Our birth worker and MCH workforce needs to be fiercely and creatively protected from burnout and attrition at all levels of the system and in all types of organizations. We can't afford to lose these purpose-driven leaders, providers, and change-makers."

Response themes: Key relationships

- Hospitals/health care facilities and communities/community-based organizations need to collaborate to support thriving families

- Policymakers and funders need to partner with/listen to community-based organizations as experts in their communities

- Health care providers in training need improved education on their role in achieving birth equity

- Businesses, funding organizations, and policymakers need to collaborate to accelerate policy and systems change

5th R: Relationships

Who does what?

Name YOUR role in supporting language acquisition and kindergarten readiness... ... and, in that role, what discrete responsibilities do you undertake or help with?

5th R: Relationships

Who do you partner with (to what end)?

Who do you partner with about what, to support language acquisition and kindergarten readiness?

- …to help you meet your responsibilities
- … AND to help others meet theirs when they need your help?

5th R: Relationships

Who else intersects with these kids (and for what)?

Who else intersects with kids struggling with language acquisition and kindergarten readiness?

Might there be some benefit of partnering with them?

Tools for Navigating Change

Whole Systems Maps

Appreciative Inquiry

Implementation Frameworks

Whole System Mapping

Whole System Mapping
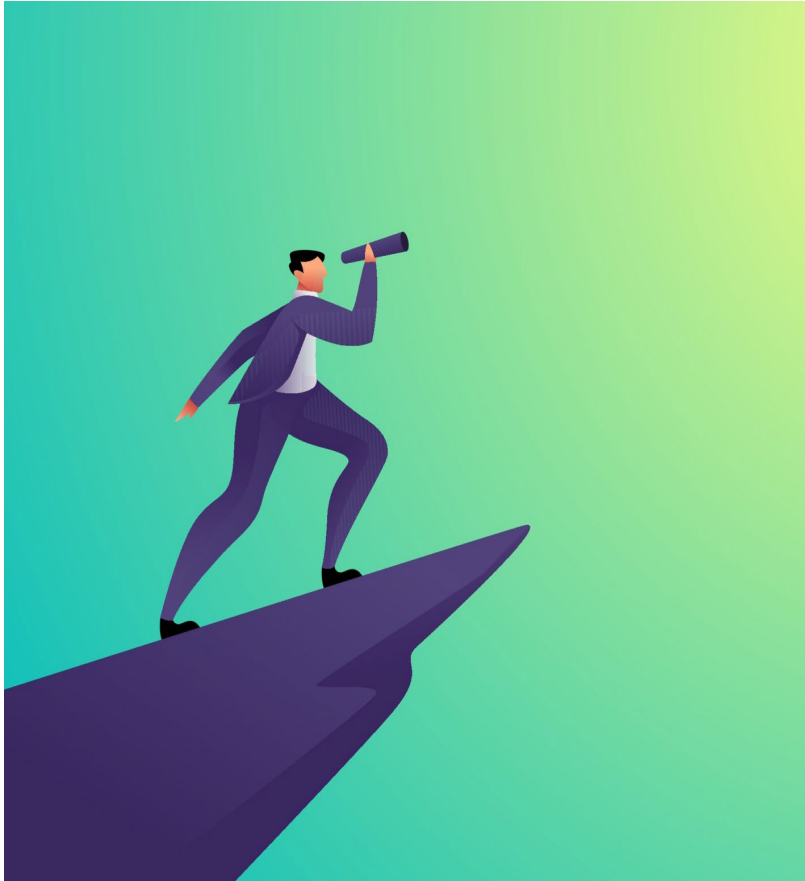
A set of questions to elicit a high-level view of the system

Can also help your team to identify

- If groups of collaborators are missing from your work – and why

- Opportunities for your work to improve gaps

- Potential duplication of services and/or partnership opportunities to streamline services

Image Source: Vecteezy

What Is A Whole System Map?

- Table with a set of questions in columns
    - These questions do not always have to be the same
    - The questions should be driven by what you are trying to understand about the system
        - *Who delivers services for kids who are DHH in our state?*
        - *What do we want to define as "services for kids who are DHH ?"*
        - *Etc.*

- In each row, there is a different partner organization listed with the information about their organization

Steps for Whole System Mapping

1. Set boundaries for the system you want to map

2. Identify types of information you want to include and develop the questions

3. Use a survey/row of table to gather info from all organizations/ service providers

4. Combine into a single visual table

5. Analyze the results _together_ – what do you notice? Gaps, duplication, improvement opportunities?

6. Plan next steps

Example – Housing for families with children

Organization Name	What service is provided?	Where is the service?	Who receives the service?	How are they connected to the service?	How many people are served each year? Please describe the population
Housing Org A	Vouchers to support rent payment on a sliding scale	Statewide	Individuals over age 18 with an income less than 200% of the FPL	Can directly contact agency or receive a referral from other organization	28,000 – report with demographics of those served available
The Housing Group	Work with families to obtain low interest mortgages and support down payments	Tri-county area	Families with 1 or more children under the age of 18	Must reach out to the agency directly	28
Temporary Housing Solutions	Provide temporary housing to individuals and families	Three major metro areas in the state	Individuals and families	Connected through partner organizations	750
Housing Coalition Group	Affordable Housing Coalition made up of Neighborhood Associations and citizen advocacy groups to promote local government investment in building affordable housing for low wealth families	County A	No direct service – conduct education, outreach, and advocacy	Do share information about agencies that support affordable housing in County A	476,853 (County A population)

Example – Pediatric primary care supports for families

Organization Name	What service is provided?	Where is the service?	Who receives the Service?	How are they connected to the service?	How many people are served each year? Please describe the population
Reach Out and Read	Primary care clinicians to help families build language and literacy into everyday moments, starting at birth	Nearly all NC counties	Children from birth to age 5	Child wellness visits	Materials distributed during 735,000 well child checkups across NC each year
HealthySteps	Pediatric primary care team provides families with care coordination, referrals, and parenting guidance between visits, specific to their needs	3 NC counties	Children from birth to age 3	Pediatric/family medicine & federally qualified health centers	22,000+ children in areas with persistent inequities for families of color or with low incomes
Others?					

Equity Considerations

- Consider who is being asked to provide information about their organization as part of your whole system mapping
    - Is this an inclusive list?
    - How will you know if you are missing a group or population?

- Do the questions collect information that would identify opportunities to achieve more equitable outcomes?
    - Do they describe who is being served? Where services are available? Do they describe outcomes for different populatio

Considerations/Next Steps

1. How might you use a whole systems map in your work?

2. Sketch out a "starter" Whole System Map for one aspect of your work

    - What happens? For whom? When? What triggers? Who delivers? Who funds? Outputs? Likely to improve or exacerbate inequities?

APPRECIATIVE INQUIRY

Taking A Positive Approach To Change

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Appreciative Inquiry (AI)

Definition: **A change management approach and tool that focuses on how to build on existing strengths and how to engage stakeholders to create change.**

- "Search for the best in people, their organizations, and the world around them"

- Support and build on what is already working

- Inquire, Imagine, and Innovate (vs. negate, criticize, diagnose)

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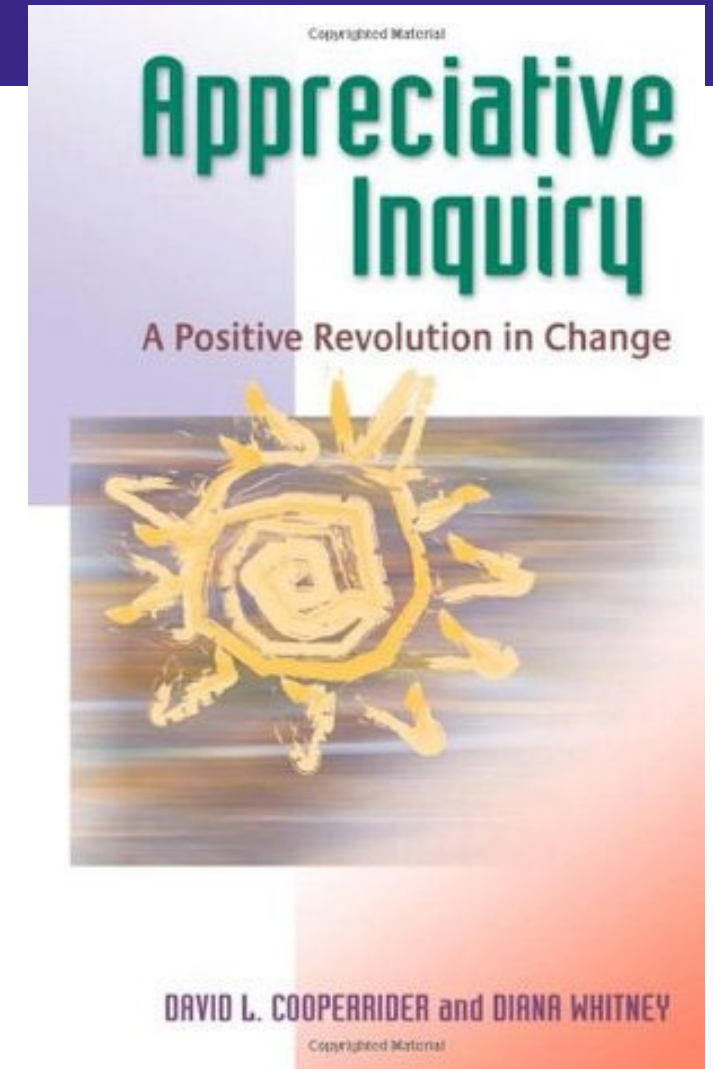
Underlying Assumptions

- Human systems grow in the direction in which they persistently ask questions

- When individuals share personal perspectives, powerful bonds form

- Dreams and wishes are powerful engagers and draw out creative energy

- If we do more of the things that are working well already, outcomes will improve

- Action follows attention

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Problem Solving vs Appreciative Inquiry

Problem Solving

- Identify a ***problem***

- Analyze causes, set performance measures

- Discuss ways to address the problem and meet measures

- Plan actions

Appreciative Inquiry

- Identify ***successes***, recognize what is working

- Envision what might be; dream and wish

- Discuss ways to support success and achieve dreams

- Plan actions

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When Should You Use Appreciative Inquiry?

- When the problem is complex
- When the problem keeps coming back
- When the attempted fixes make things worse
- When there is no clear path forward

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Benefits of Using Appreciative Inquiry

- Builds relationships across a group
- Encourages a sense of pride and belonging by starting focusing on strengths and achievements
- Encourages people to express commitments and ambitions without self-limiting
- Sets a high level for groups that need inspiration
- Creates space for people to engage with each other and rewards that engagement by highlighting individual dreams and strengths throughout
- Builds on the full range of thinking and communication styles
- Ensures that those most impacted are involved in developing plans and solutions

DEFINE

The **DEFINE** step precedes the main four steps.
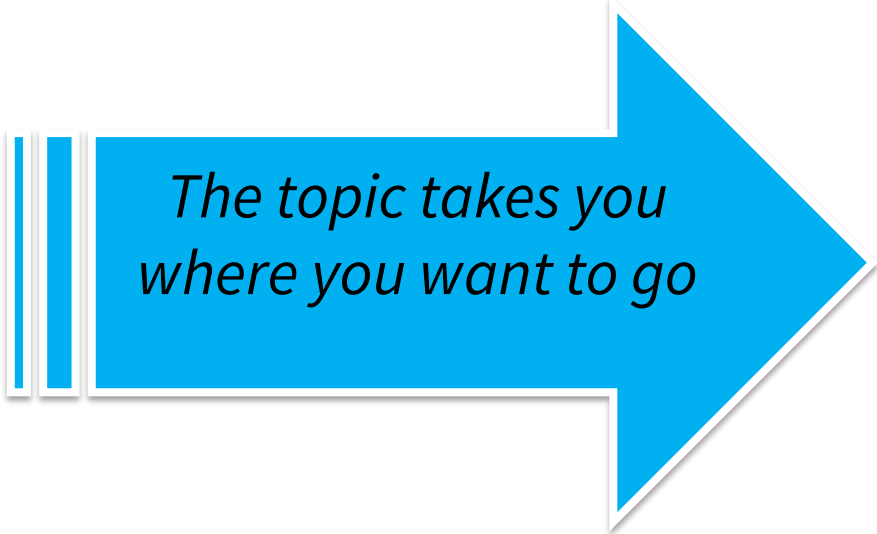It provides a frame for the discussions that follow.

The frame should be AFFIRMING.

- Frame the work as a positive statement.

- Agree on the wording before you begin the first dialog.

Define: Choosing an AI Topic

- Reframe the problem in the **affirmative**
- Flip the problem in a positive direction
- Define what is **desirable**
- What is it you want more of related to XX..??
- Cultivate **genuine curiosity**
- "I want to know more about this topic"

The topic takes you where you want to go

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Define: Example

Problem Solving

Reduce a "bad" thing
Address a problem

"Identify and manage lost luggage promptly"

Appreciative Inquiry

Increase a "good" thing
Name a successful future state

"Maximize the passenger's arrival experience"

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Define: Your Challenge/Problem

Your Turn

DEFINE your challenge using an affirmative statement.

Example: Reduce Acute Rheumatic Fever and Rheumatic Heart Disease among children in American Samoa.

Affirmative statement: All children in American Samoa are healthy and thriving.

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DISCOVER

In the **DISCOVER** stage, people talk about what is working with regard to the affirmative goal.

- Engage **EVERYONE** in the system in dialog about what is working in specific areas

- Ask, listen, share

- Appreciate what is

- Uncover new perspectives; find overlap

Discover: Sample Interview

So tell me what is working from your perspective on our teen involvement

Not sure. I am having more success with the younger kids than the older ones

OK, say more about working with the younger kids

I just get so excited working with them, I'm so energized by the work they are doing

Tell me about them

You can see the behavior changes spreading—I have this one school in…

… great story, I didn't even know we worked there. Why is it so effective?

Partly because of the school partners…the parent outreach is outstanding

Discover: Guidance

- Organize by **PAIRS** or **TRIOS**
- Find people with whom you don't work closely, if possible
- Take turns in the "interviewer" role
- Give plenty of time for in-depth answers and follow-up questions

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Discover: Interviewer Instructions

INSTRUCTIONS FOR INTERVIEWERS:

- Ask open-ended questions... require the interviewee to say more than "yes" or "no".

- Show curiosity by asking for details or explanation.

- Don't "pull focus" by responding with a story of your own.

SAMPLE QUESTIONS TO ASK:

- What are you most passionate about in your work?

- What is going well from your perspective? What accounts for these successes?

- Is there a specific group for whom your program works especially well? Why?

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DREAM

DREAM is a broad conversation about the specifics of the future we desire. These are the kinds of questions to explore:

- What do we want? What can we imagine?
- What is the world calling us to become?

- The goal of this discussion is to:
- Describe our desired future state in DETAIL
- Articulate what we WISH for

Dream: Process

- Generate ideas in larger groups (four to six is ideal).

- Organize around specific themes if appropriate for your group or topic.

- Stay laser focused on the **future state**...don't have to worry about what's practical or likely.

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Dream: Process

- Everyone *Listen*: probe, be curious, get to specifics
- Everyone *Share*: collect dreams or wishes from everyone in the group

You can build on each other's dreams:

- Use improv rules, say "Yes, and…"
- Recast GAP statements into WISHES
- Rephrase "But we don't have _____…" into "I wish I had…"

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Dream: Sample Interview

My dream is that we catch every single kid before three months.

Wow, yeah– and track it forward!

We'd need a whole new system for people like me in the capitol to talk with partners. Do you share that dream?

Yes. And my dream is that all the data is transparent, and partners can see it

Mine too, I manage that data! But my system isn't web-enabled…

So to rephrase that as a wish… "I wish the data system were web-enabled"?

DESIGN

DESIGN is the practical, immediate stage of the process. *It asks these questions:*

- How can we use what we have right now to build a path to our Dream?
- What can we design right now, to help us achieve the Dream in the future?

Focus on the outcomes of the previous discussions. *The goal is to find action steps that:*

1. Support, grow, amplify or expand things that work.
2. Use resources we have now to create something we need in the future.
3. Build capacity now to do work we want to do in the future.

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Design: Process

1. The first design goal is to build on what exists and amplify strengths. Use your whole system map.

2. The second design goal is to build capacity that will enable key elements of the "Dream" future state.

This conversation is about what can be done *now* and in the *immediate future*. *Here are some tips:*

- Use a capacity checklist as a guide*

- Co-construct the new design

- Plug in design and planning tools

Design: Sample Interview

How can we communicate the success we're having in these neighborhoods?

I wonder if my media person can help with that. Could we add her to the grant?

Going back to that policy wish… can we re-write your work plans?

I can draft a plan. What if we also added it to the evaluation plan for the other regions?

DELIVER

The **DELIVER** stage is all about putting learning into practice.

In this stage, commit to processes that will result in sustainable effort. In this stage you are planning to adapt over time.

Expect changes in the context, changes in your own capacity as you learn and develop, and changes in the people.

- **Key Question**: How do we affirm the capabilities of the whole system and each person in it?

- **Sustainability**: Put plans in place that will drive/extend our progress toward the future state over time
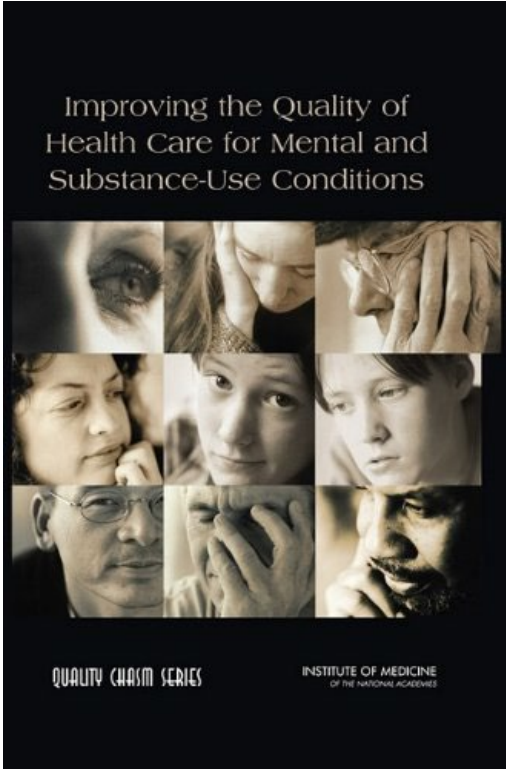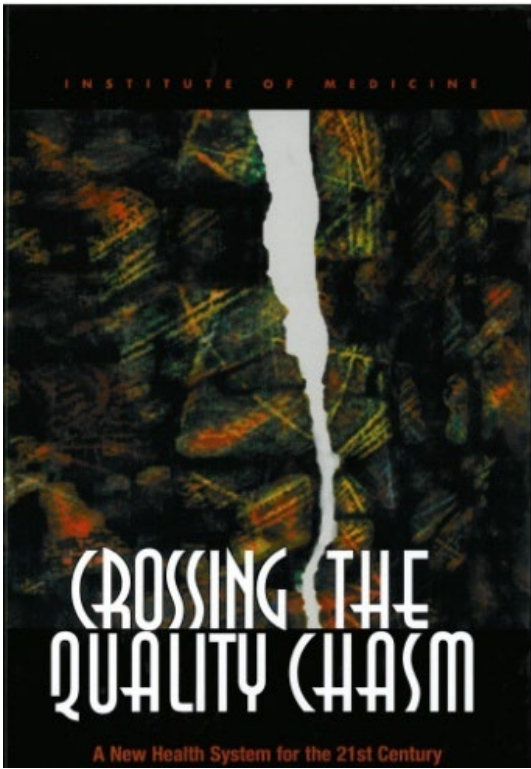
- Also known as "***Destiny***"

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Implementation Frameworks

"The ideas embodied in innovative social programs are not self-executing."

Petersilia, J. (1990). Conditions that permit intensive supervision. Crime and Delinquency 36(1), 126–145, p. 129).

The Care That "Could Be" vs. the Care That "Is"
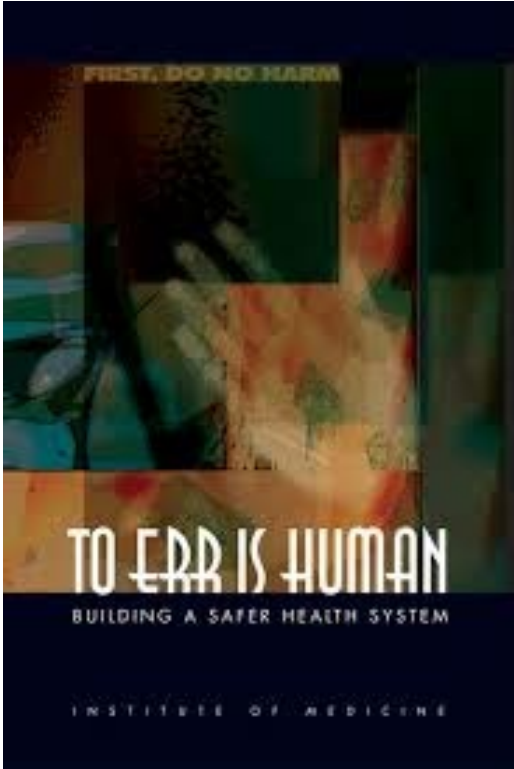
What Gets in the Way?

Implementation Science

"The science of putting ideas into action"

Meyers, D.C., Katz, J., Chien, V., Wandersman, A., Scaccia, J.P., & Wright, A.. (2012). Practical Implementation Science: Developing and Piloting the Quality Implementation Tool. American Journal of Community Psychology, 50(3-4), pp481-496. p 481
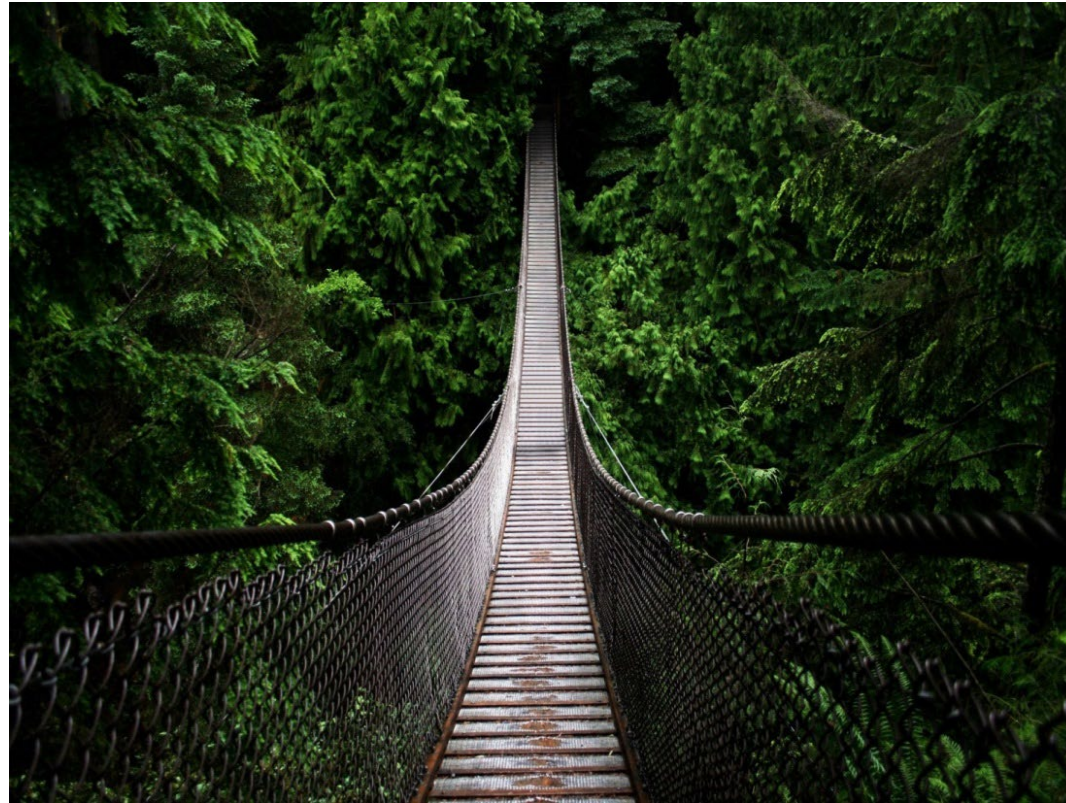
Systemic Implementation

Implementation Strategies
are approaches to influence the implementation process in order to achieve desired changes in practice.
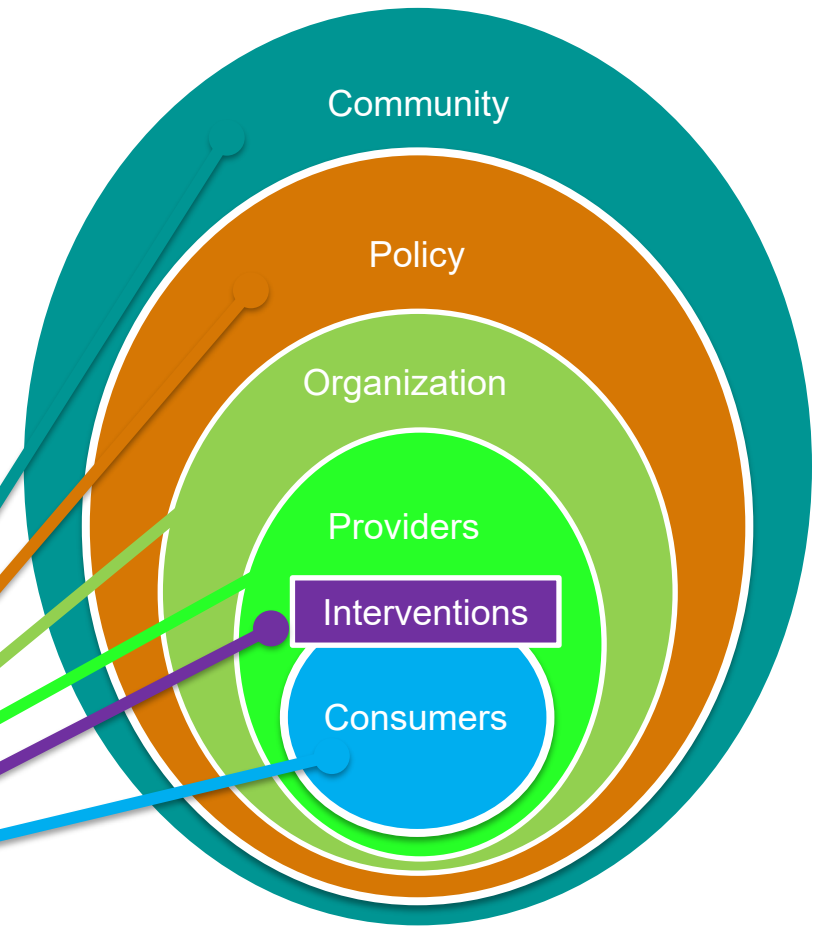
Examples:
Build a coalition
Provide new funding
Modify incentives
Educate through peers
Small tests of change
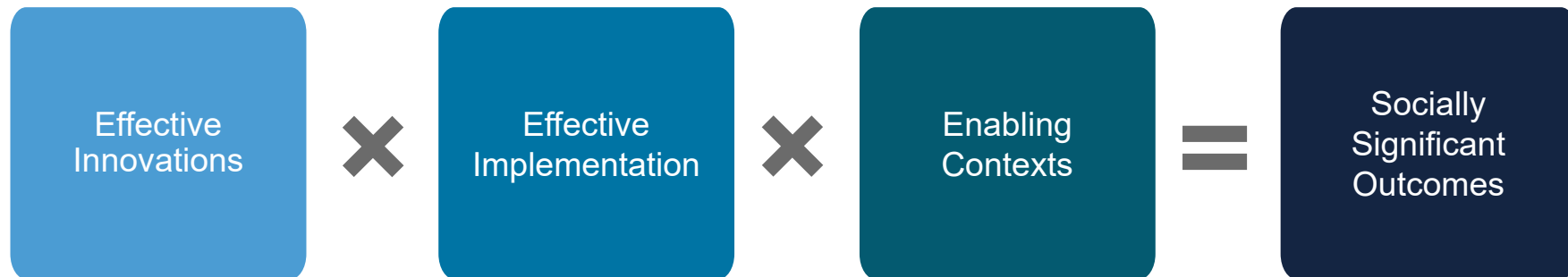Consumer Engagement

Determinants of Change
are factors that are believed or have been found to affect the results of implementation endeavors.

Examples:
Community Resources
Policy and incentives
Organizational climate
Provider perceptions
Intervention complexity
Client Characteristics

Community
Policy
Organization
Providers
Interventions
Consumers

Implementation Formula

Effective Innovations ✕ Effective Implementation ✕ Enabling Contexts = Socially Significant Outcomes

Fixsen, D., Blase, K., & Sims, B. (2012). Implementation: Improving Outcomes for Adolescents with Disabilities. Invited presentation, Institute of Education Sciences, U.S. Department of Education.

Share at Your Table

- Consider interventions or innovations that you might implement to increase language acquisition and kindergarten readiness among DHH children.
  - How will you know if you are missing a group or population?

- Do the interventions or innovations maximize opportunities to achieve more equitable outcomes?
  - Do they describe who is being served? Where services are available? Are they culturally relevant for different populations?
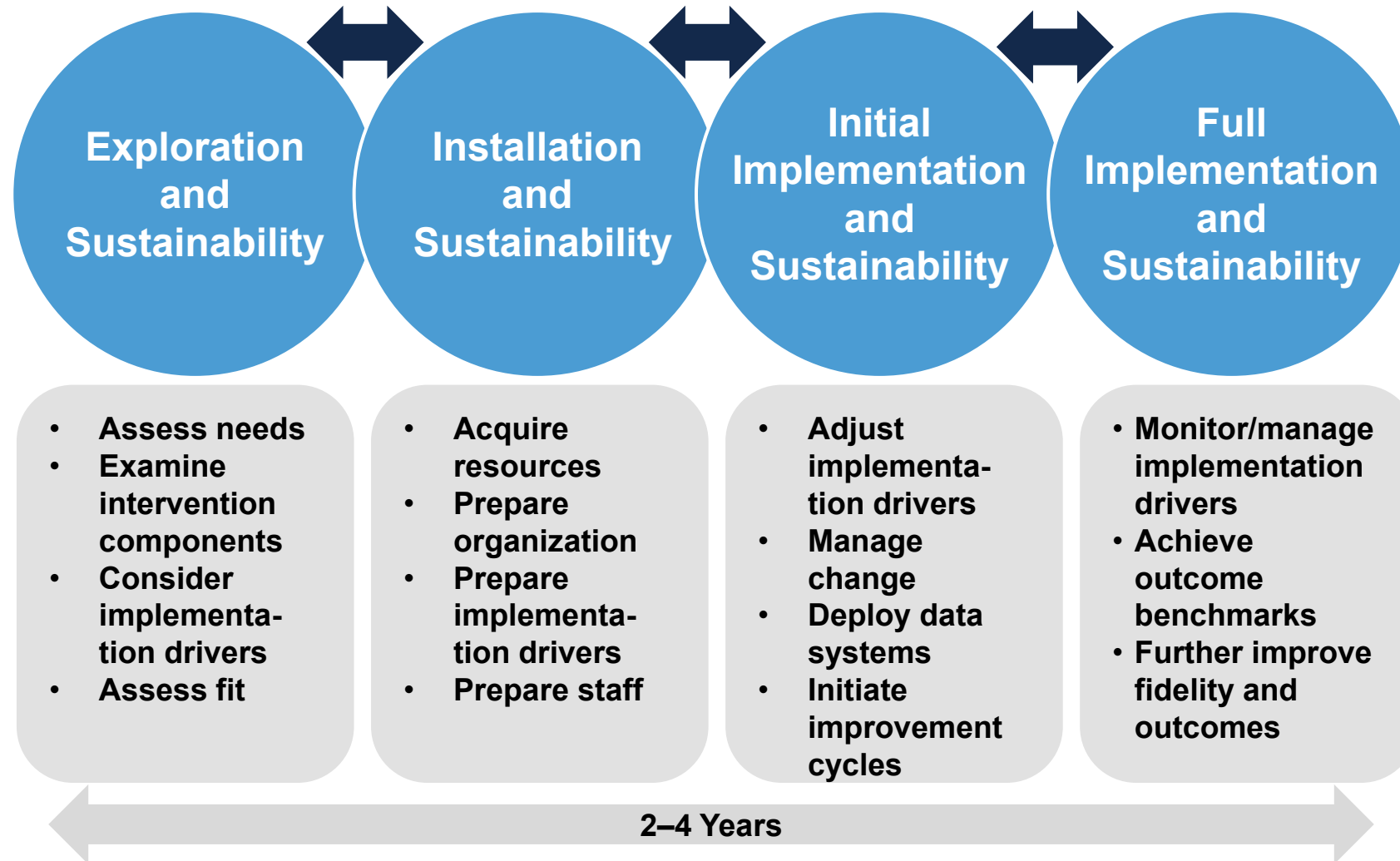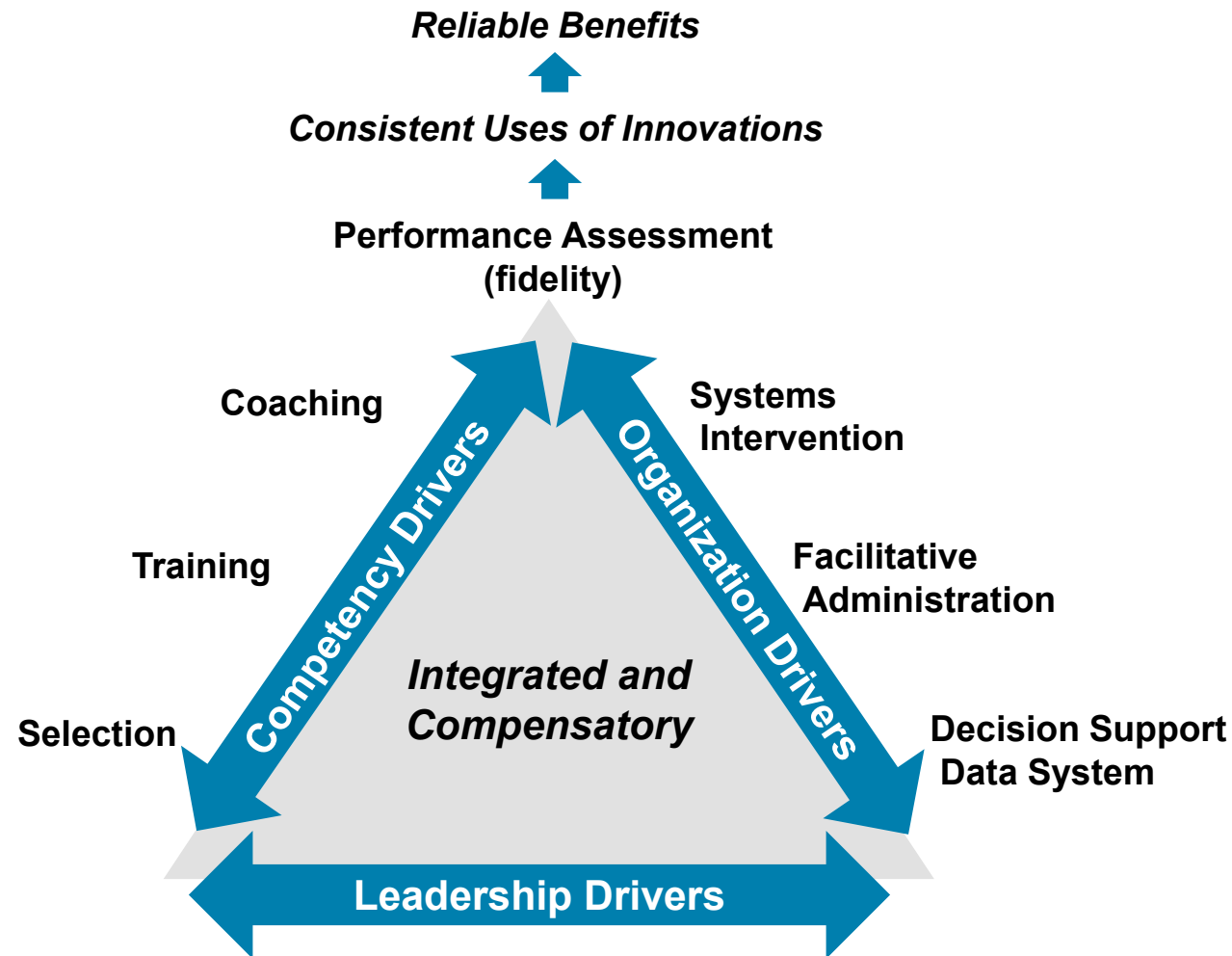
Usable Interventions
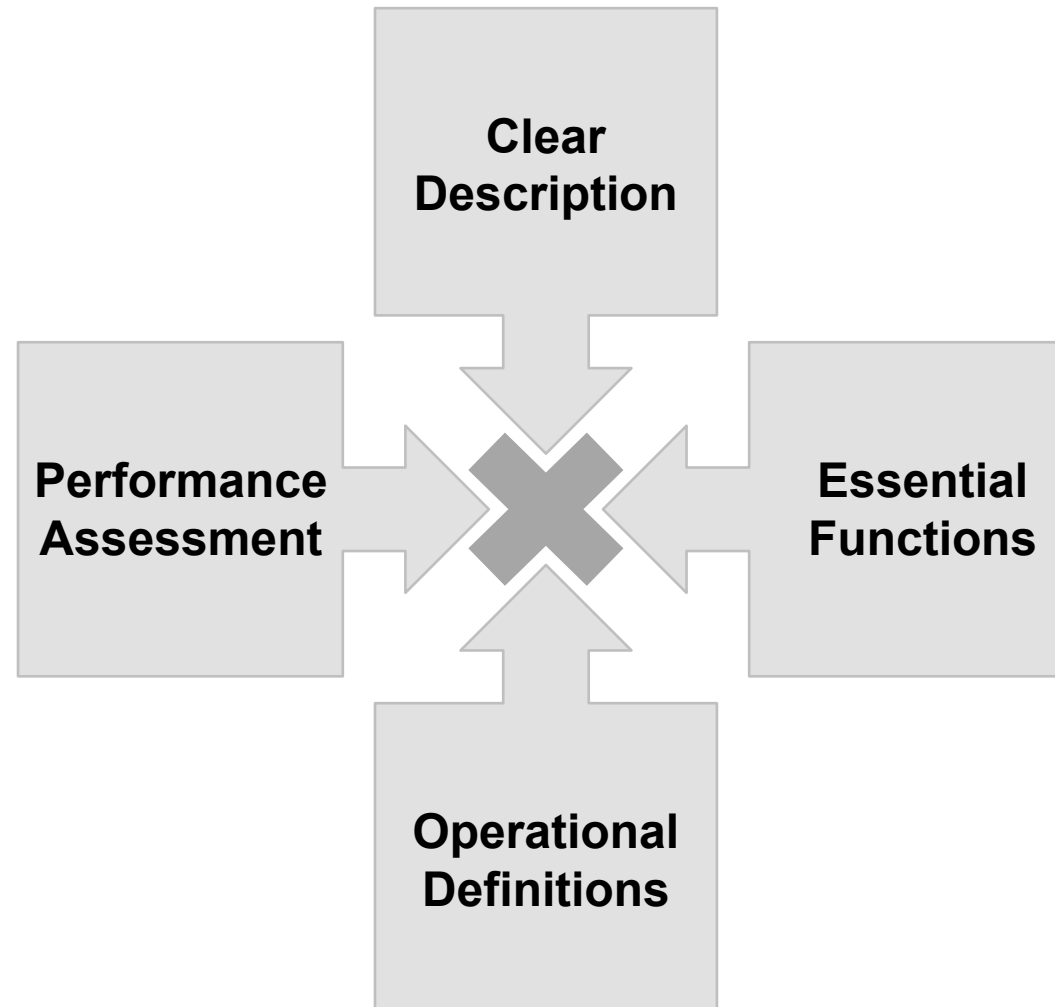
Source: Fixsen, D. L., Blase, K. A., Metz, A., & Van Dyke, M. (2013). Statewide implementation of evidence-based programs. *Exceptional Children (Special Issue), 79*(2), 213-230.

Active Implementation Framework: Implementation Stages

Exploration and Sustainability

- Assess needs
- Examine intervention components
- Consider implementation drivers
- Assess fit

Installation and Sustainability

- Acquire resources
- Prepare organization
- Prepare implementation drivers
- Prepare staff

Initial Implementation and Sustainability

- Adjust implementation drivers
- Manage change
- Deploy data systems
- Initiate improvement cycles

Full Implementation and Sustainability

- Monitor/manage implementation drivers
- Achieve outcome benchmarks
- Further improve fidelity and outcomes

2–4 Years

Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005). Implementation research: A synthesis of the literature. University of South Florida, National Implementation Research Network.

Active Implementation Frameworks: Implementation Drivers

Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M., & Wallace, F. (2005). Implementation research: A synthesis of the literature. University of South Florida, National Implementation Research Network.

Reflections

THANK YOU

Send questions/comments to: Amy Mullenix
Amy_Mullenix@unc.edu

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Advancing Health Transformation

Resources: Websites

- **MCH Workforce Development Center:** https://mchwdc.unc.edu/

- **MCH Navigator Systems Integration Trainings:** https://www.mchnavigator.org/transformation/systems-integration.php

- **The Systems Thinker:** https://thesystemsthinker.com

- **Influencing Complex Systems Change:** https://changeelemental.org/influencing-complex-systems-change/