Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program
Technical Assistance Coordinating Center’s

Webinar
“Evaluating Systems Integration: Essential Components”
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Kathy Reschke: Thank you so much Doris. It’s great to be with everyone today. On behalf of the MIECHV Technical Assistance Coordinating Center I want to welcome you to the final webinar in our series on Systems Integration. I hope you’ve received your registrant packet in preparation for today’s webinar and are looking forward to today’s presentation.

My name is Kathy Reschke. I’m the eLearning Coordinator for the TACC and I’m going to be your facilitator today.

As most of you know the TACC is funded by HRSA and staffed through ZERO TO THREE and our partners Chapin Hall, AMCHP and WRMA. The TACC provides different levels of support to...
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MIECHV grantees including these webinars using the ZERO TO THREE and partner staff along with many expert consultants and in coordination with other TA providers.

Just a quick logistical item before we get started on our topic today, because we’re using a phone line rather than your computer for audio all of you are automatically muted which means you can hear the presenters but they can’t hear you.

However, we do want to know what’s on your mind. So to share your comments or questions you’ll use the control panel that’s located to the right of your screen. At the top of your panel is an orange arrow. Click the Arrow button to show or hide the panel.

At the bottom of the panel is an open text field where you can type your questions. I’m going to be monitoring the question box throughout the webinar and I’ll respond to your question or comment or I’ll pass it along to the presenters during our Q&A period toward the end.

To start off today’s presentation we’re joined by Tammy Brown, the HRSA Project Officer for Region 8. Tammy, thank you so much for joining us today.

Tammy Brown: Good afternoon and welcome to today’s webinar hosted by the MIECHV Technical Assistance Coordinating Center. The topic of today’s session is Evaluating Systems Integration Essential Components. And we are privileged to have four outstanding speakers that have initiated innovative strategies to evaluate their systems integration efforts and to have a DOHVE TA Specialist offering their expertise on the call.

A key goal of MIECHV is to increase interagency collaboration and integration of home visiting within an early childhood comprehensive system and with other community systems. States have responded to this by bringing together community and connecting with different stakeholders to

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create a shared agenda for a more coordinated system that supports the implementation of evidence-based home visiting.

Dr. Willis quoted in the first of this webinar series that we are increasingly strong by the sum of all of our parts working together. While building coordinated systems can be a challenge at times, these shared and common agendas have resulted in increased quality and accountability, improved efficiencies, strengthened relationships, enhance sustainability and increased access to and more seamless service systems for families.

The following are several great examples of a MIECHV Program’s building integrated systems. Montana’s integration with the child welfare system, Boston’s collaboration with homeless services; North Dakota’s integration with tribal communities and in all states the focus on coordinated or centralized recruitment and referral systems within local communities and across states.

The next step in this process is to think about how do we evaluate this work?

Systems integration is complex and multiple layers and making decisions about how to move forward can be a difficult one. On the other hand evaluating integration outcomes provide further documentation of success and it also provides a baseline for system’s strengthening.

Some of these MIECHV evaluation efforts are less formal while other states have a vetted systems evaluation component and an overall comprehensive evaluation plan. For example Massachusetts which will be features in the July Newsletter as a follow-up to this webinar.
Broadly speaking the MIECHV goals require you to focus on the five domains of ECCS, early care and education; social emotional development and mental health, health and medical home, parenting education and family support services.

The alignment of the six MIECHV benchmark areas with ECCS offers many opportunities for developing mutually beneficial evaluation strategies making this a win-win for stakeholders and partners.

The TACC gathered a great deal of information through the registration process and thanks to all of you who responded to the registration questions.

When asked the question, are you planning to evaluate some element of your systems integration effort over the next 12 months, 83% of you responded with yes. This data tells us that the webinar is timely and that MIECHV is truly supporting a focus on integration. We hope the presentation will provide you with some ideas and inspiration for your evaluation.

When asked the question, have you evaluated system integration elements, 34% of you responded with yes. We hope that you will also share some of your ideas during the discussion.

Thank you for joining today's webinar. And now I will turn it over to Petra who will introduce today's presentations and speakers.

Petra Smith: Thank you Tammy and thank you for joining us today for our TACC webinar. My name is Petra Smith. And I'm a Technical Assistance Specialist with the MIECHV TACC.

We have an exciting and interactive webinar planned for today. As Tammy mentioned the next step in systems building is evaluating this effort. As you have approached systems evaluation you...
may have pondered questions like how do we define our system? And what are tangible indicators to measure?

So for example perhaps trust, membership or roles or perhaps the exchange of resources and a strength of relationship or how - or you might have asked how can the evaluation result integrate with other evaluation plans.

You may have explored tools and methods of evaluation. For example you may have looked at using social network analysis based on network theory where nodes and lines represent partners and the strength of your relationships with these partners.

And finally you may have thought about ways to apply evaluation results to achieve better outcomes for families and for your community.

We will discuss these and other systems evaluation questions during today’s webinar in three sections. The first section provides an overview of the TACC Systems Integration webinar series over the past four months. The second section provides an overview of evaluating systems integration. The third section describes how three states have approached their evaluations. And then we have an opportunity to engage you in an interactive discussion.

During the webinar we encourage your active participation by asking questions, making comments and also offering suggestions or ideas that you have by sharing them in the question box.

At this point I’m happy to welcome our presenters. Dr. Danielle Varda is an Assistant Professor with the University of Colorado, Denver School of Public Affairs. Amy Fine is a Senior Fellow with the Center for the Study of Social Policy. Holly Hilton-Dennis is the MIECHV Assistant

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Amy Fine: Good afternoon. I'm really happy to be here today. My job is to provide an overview of the series and to put the pieces together to remind us why we’re talking about systems integration and MIECHV.

Let’s go to the next slide.

Here’s a - this is a quick snapshot of the series. And I just wanted to kind of give you the overview of what we are - where we are in that series. We started with a - began with an overview of building comprehensive integrated early childhood systems and we asked the question why, why would we do that and what are early childhood integrated systems.

And then we moved to a series of webinars on three issues and related systems that are very important to our home visiting families.

And then today we’re going to cap it all off with evaluating systems integration. So that's the series in a nutshell.
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So now I want to go back to the - take us back, so assume it’s the beginning of this series. And we started with that - questions I - as I noted early. We started with a question of why systems integration and MIECHV? And then a follow up question of what do we mean by systems anyway?

And I think the really simple and kind of straightforward answer to why systems integration and MIECHV is that integrated programs really can’t do it all. The stronger the system the more effective the Home Visiting Program can be. And strong systems support our families and support our programs as well.

And I just say as an aside that this is true of - for systems focused on a specific issue or specific approach whether its housing or a home visiting approach to, you know, kind of an integrated system vertically. And also to comprehensive integrated early childhood systems that go across sectors and across disciplines.

So, you know, and one other thing I wanted to mention is that really it’s not just by chance at the federal and the state levels that we are - there’s a central partnership between MIECHV and ECCS. They really support each other. And the stronger the pieces within a system the better we serve families and the stronger the system itself, putting all those pieces together the better we serve families. So there’s a really great connection between the two.

And then we actually asked the question of what do we really mean by an early childhood system? And what - the main point that I made in that very first session was there really is no one agreed upon definition of a system let alone an early childhood system.
But I pulled out three definitions which are not as sophisticated to ones that you'll hear from Danielle Varda as we really look at systems in a very systematic - in a very - from an evaluator's perspective.

But I think there are three big points I wanted to make here. The first is the concept of a system, the definition of a system is a group of interacting, interrelated, interdependent elements.

And the point here is that it's complex. Systems are complex. There are a lot of moving parts. And the whole is greater than the sum of the parts.

The second definition I've pulled out is the functionally related group of elements. And the point here is that the parts come together not just to be holding hands but to actually do something and to do something more than we could do as individual pieces.

And then finally my very favorite definition which is an aspirational definition of a system is a condition of harmonious orderly interaction. And I think we all aspire to that.

But the real point here is that the reason that we want to have integrated cross systems is that we can achieve more and more harmonious orderly interaction for the children and families in our communities.

So how do we get there?

This is a graphic that we used in our January February webinar that shows a regression from individual Home Visiting Programs to an integrated home visiting system to a linkage between home visiting systems and other services and systems. And finally a community-based integrated early childhood system that has multiple parts and multiple systems coming together.
So if we go to the next slide, here’s the same array in cross section where you’re going from individual programs to multi-sector systems. The point I want to make here is that moving from programs to systems is more than just scaling up to larger programs or larger systems. It actually reflects a change in perspective on what’s needed if we’re going to affect and sustain change for young children and families.

So for example if you’re just starting up as an individual Home Visiting Program the questions you might ask might be something like how do I get my program up and running or how do I fill the slots.

As you start to move to a home visiting system and putting the pieces together across models, across Home Visiting Programs you’ll get to a question like how do we link families to the right programs to get the best results at the individual and the population level.

And then as you start to move toward linking with other service systems you might start to ask questions like how do we connect with other service systems to better support our families.

And finally this larger version of multiple systems coming together is really a whole another set of questions that have to do with how do we develop shared values, strategies and results. How do we integrate across systems to improve results for our community as a whole?

And eventually we asked the question, what’s missing? It’s not just putting the pieces together that are already there but what’s missing that we had to fill in?

So I think it’s really important to kind of think about how you move from individual programs to systems. And my sense is that over the last few years you really moved. And the MIECHV The MIECHV TACC is funded under contract #HHSH250201100023C, US Department of Health and Human Services, Health Resources and Services Administration.
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community has moved from that very important first step of how do I get my program up and running to better integration with - as a home visiting - as home visiting systems and then now this year in particular linkage with other service sectors and systems.

I don’t have the numbers right now but my guess is that we’re not quite all there for the integrated multi-sector systems but that’s a great piece to be thinking about in the next year or two, about how do we move from linkage with other service systems to a truly integrated early childhood system at the local and the state level.

So at this point I’m really curious about where you all think you are when you think about those four different kind of levels or layers of systems integration.

So we’re going to do a little poll. This is stretching my technological skills but let’s try the next slide where we’re going to do a little poll. And ask you to answer where do you think you are on these four possibilities, the individual Home Visiting Program, home visiting systems? Have you accomplished that? Are you at linkage with other service systems or you think you’re at the level of really community-based integrate early childhood system as - or part of those systems in your own work?

We’ll wait a second, couple seconds and then I think we’ll have actually the results, just take time now just to check it off if you can’t.

Have results yet?

Oops. Okay, here we go. So it looks like about - interesting and it’s where I thought you would be that about half of you are at the point of saying you are part of linkage with other services and systems and about a 12% of you, a little - 12% are at the community based working on...
community-based integrated early childhood systems. I think that's really exciting. I think, you know, we've moved a long way from when we first started where most of us were doing just really the basics of putting our programs together.

So we'll be looking at - it'll be interesting to look at that over time, over the next year or so.

But let's go onto the next slide. So in our early session we also talked about - we asked a couple more questions and I'll go through these fairly quickly. We raised a question of what do we mean by comprehensive early childhood systems at the local level? And what makes this system effective?

And again there's no single answer of what an early childhood system looks like but there's four big building blocks that I think we've identified in our work at the Center for the Study of Social Policy and other work that I've done around early childhood systems and they are focus on population and place, shared goals and results, aligned and enhanced services and support, and capacity building as systems change. Those four pieces really go together to help quite effective early childhood comprehensive systems.

Going onto the rest of the webinar series we went from that initial kind of framing of the issue of systems integration to looking - drilling down on three crucial sets of issues faced by many home visiting families, behavioral health, housing - sorry, behavioral health, housing and intimate partner violence.

And each of the webinars had a set of objectives that were quite similar. They weren't stated exactly the same but basically for each of those webinars we made sure that folks could understand and we gave information to understand the need or the issue among home visiting families.
Then we explored some resources and challenges and barriers both for the families and for the agencies who are trying to address those issues.

And then finally which I really loved is some really concrete examples of integration for home visiting and other service systems. So we gave some examples each time.

And if you look across them going to the next slide, if you look across at what was that frame and when we had those examples of where was there effective integration, as I looked at it there’s kind of - there are three components to that, what made the change happen. In each of these sites what that - we gave examples for there was capacity building for the staff and for the agencies that are and for the program so information, training support from the sister service system so we really understood the issue.

The second is then they began to enhance services for the participant, access to traditional resources, online materials, etcetera.

And then I think this is a really important piece. The third building block is actually making systems change. So that it wasn’t just a one-off but actually integrated into a system so you had MOUs, you had applications, funding applications that changed what was required and then adopting new policies for instance, a universal screening so new policies that actually put into place a system to institutionalize it.

So let’s go to the next slide because now we’re at today’s session in which we’re going to talk about evaluating systems integration.
And my headline for this session is that it’s an opportunity to wrap up and to ramp up because we’re going to learn about systems evaluation components, tools and measures. We’re going to explore examples of systems evaluation from three states.

And what I’m really, really, really excited about all of this but particularly interesting is to identify systems evaluation sign options that can further strengthen our integration. So it’s really an opportunity both to understand it, to wrap up and to ramp up what we’re doing going forward.

I have one more resource that I wanted to share with you. And that is some work that I’m doing for the Center for the study of Social Policy and the Children’s Services Council upon which county that are “Supporting” an initiative called Early Childhood Link, a learning and innovation network for communities.

Our focus is on building early childhood systems and we are - we have just ramped up from three starter communities that we’ve been working with over the last year or two, nine communities that are quite far along in building these comprehensive early childhood systems at the community or county or city level.

And we’re very, very interested, all of those communities are very interested in evaluating the impact of systems.

So we want to hear from you. We want to hear about your work. Please contact us. I gave you two different ways to get in touch with us.

And we would love to hear more about how you’re going about this work and how we might work together.
Danielle Varda: Hi. Thank you Amy and thank you to everyone, today I’m happy to be here.

I’m just going to give a brief overview of evaluating systems integration. As we all know this is something that is, you know, we hear about in almost any evaluation now especially when we’re thinking about these kinds of topics.

And I’m going to start just with a simple question, what is a system.

And, you know, systems thinking was cutting edge in the 1960s and kind of considered dated in the 80s but it’s really come back in recent years. And I noticed a recent list - comments on a listserv, the Evalu Talk Listserv. It’s just been something that’s come up quite a bit.

One thing we know is the field of systems is not unified or coherent. But it has many roots and branches.

And so for this reason it’s really interpreted differently in different disciplines. We have a general idea of what a system does, that is it examines all processes and context to see how they interact with each other to produce different and often unforeseen consequences.

But really there’s no agreed upon definition but I think that we can kind of agree that it does have a couple - systems do have a couple of parts. One includes its elements which we often are thinking about parts of a whole. The links between the parts and the processes that hold them together and its boundaries so what’s inside and what’s outside that system.
What makes a system evaluation different from a traditional evaluation? Well, here we’re used to seeing what we probably all use in our evaluations which are these linear logic models with relatively clear inputs and outputs, outcomes and assumptions.

However, systems do not easily lend themselves to this kind of model. So rather they’re often much more complex, circular and what we - what can be defined as an input or outcome or output is sometimes itself interchangeable and uncertain so it’s not as straightforward.

But we do need new concepts and tools to think about systems evaluation so I’m just going to present here real briefly. I do - I look at systems from a network perspective. And I’ll talk about that later in our example from Colorado.

But we really do need new ways to evaluate systems. In this case I talk about partnerships and interrelationships. There’s a current assumption often that when we are building out partnerships and relationships in systems that more is better and we call that counting nodes. Often it’s implied that the more partnerships we have, the more people at the table, somehow that system is better but there’s alternative assumptions that less can be more.

So for example in these pictures I like to use at the bottom which are network maps, I’ll just go through them real briefly. But imagine that that’s you embedded in your own kind of social sub-network there in the bottom left picture.

And you’re very closely connected to a lot of people like you but you’re also connected across boundaries to all these other social sub-networks that have connections to folks that are unlike you. So we call those our weak ties, the strength of weak ties. And those bring us a lot of advantages.
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But that in our work lives can be really overwhelming and when trying to coordinate a system it can be too much to manage such a complex system. So we need to try to find ways to simplify that and break it down.

So in the center picture you’ll see now having the same connection to the sub-groups so giving yourself those advantages but reducing a lot of the redundancy.

So therefore you are freeing yourself up time to create new relationships with other subgroups and therefore bringing those advantages that you would get by connecting to lots of others but doing it in a more strategic way.

So what’s important about evaluation and systems thinking is that we need a way to kind of break down these complex pieces and think about them in not just a strategic way and evidence-based data driven way, but a more simplistic way.

So being involved with systems work doesn’t mean making complexity out of everything. It could mean simplifying things so that you’re getting the advantage of all of those systems connections.

So what are systems outcomes?

So this is also not an easy answer and this is just one perspective that I have. Often folks are trying to connect and build systems for example building partnerships for systems building by convening stakeholders, going through needs assessment, leveraging resources, and that redline kind of shows that we almost always jump straight to children and family outcomes or some kind of population outcome that somehow says because we’re building partnerships now we have this population or client outcome.
But it’s really important to not miss the intermediary outcomes and these are what I consider and measure as the systems outcomes which are things like perceptions of value and trust, authenticity of the process that’s happening, perceptions of goals and outcomes and processes.

So notice I didn’t say the actual goals and outcomes but the perceptions of them. Measures of things like coordination, efficiency and redundancy a lot of times that within community context and among organization.

So all of these things are quite complex and it’s not - it’s as important to be measuring this piece of the system as it is to see if we are connected to those population and client outcomes.

So in the work that I think all of us are doing our ultimate question is how can I use this information to manage this system?

So that’s why we engage in evaluations so that we can get information and improve those processes.

So some people hesitate about using systems evaluation. And it’s important to touch on those. Often time there’s confusion about how we combine different systems’ ideas into a workable evaluation or policy framework. There could be uncertainty about the methods and tools available to operationalize systems.

And concern that the results of these kinds of evaluations may not be seen as sufficiently robust. So because systems are sometimes a little bit - because they are so complex it’s often difficult to use standard traditional methodologies so we do use other alternatives.
There’s also some discomfort maybe over our limits on control over problems and solutions. And systems evaluations can bring that forth.

And so that can make us sometimes hesitant to actually use an evaluation that brings up more uncertainty than answers at the end.

I like to actually look towards a book called *Systems Thinking and Action*. It’s the work of Williams and Hummelbrunner. And they have written this book that gives some framework, a framework for systems evaluation.

I like to think of it as these three dimensions and they vary - in a detailed way go through the book and talk about these three areas. Interrelationships, how things are connected and with what consequence; the perspectives within a system so more than making sense of how boxes and arrows fit together but how you look at the picture; and then the boundaries of those systems that basically make the whole thing manageable.

So when we’re about to encroach on a systems evaluation if we can kind of box our questions into these three areas we tend to be able to capture a lot of what otherwise could be very hard to get our hands around.

Save a little time, the next three slides actually go through these three dimensions. But these are also in this book that I mentioned. And it’s a really handy book and these are straight from the book. So I’m just going to briefly mention that within each of these areas there are a number of areas to consider. Things like dynamic aspects, sensitivity of interrelationships and things like that.
And a number of questions that are posed within that book they can - we can ask to help us explore that area of that system. So for interrelationship things like what are the major and structure of interrelationships, the process and consequences and why do they matter.

For perspectives again there are some things to consider like how we might see different situations in different ways and why that might be important.

And then again a number of questions that we could ask so if you are interested in engaging in systems evaluation you may want to pose questions like these in order to kind of help you capture all the different dimensions.

I’m not going to read through them. So that I can move forward a little bit.

Boundaries is the same thing. The important piece about boundaries that I’ve really found in our work is that figuring out who’s in and who’s out of your system in our case, a network, is for us hands down the hardest part of our work. Founding systems, figuring out who should be a part of them and then how do we include them in the evaluation is always difficult. It could in some ways marginalize or even encroach on practical aspects of being able to include those that are in or out.

But there’s also a number of questions in the book that help us ask things that will prompt an evaluation and kind of steer us through that.

But to go forward with the systems evaluation there’s just a number of different methods. It’s almost kind of fun to think about all these different ways we can collect information and learn about these environments that we’re in that a little different from our typical maybe just survey or interviews.
So some examples of systems methodologies might include social network analysis. Things like systems dynamic which is more of a modeling computer stimulation work, assumption-based modeling, complex adaptive systems but call a loop diagram. And even other qualitative and survey methodologies. Nothing’s really prohibitive. And really there’s just a whole suite of mixed methods that we can put together to make this work really meet the needs of each community and each individual system that will be different from the next one.

And finally there are limitations of systems evaluation. So we need to keep those in mind. It’s fun to think about systems. It’s neat to try to get at the ins and outs of them.

But it could be possible that we might be imposing a fixed and enduring description of a program, organization or process when there could be really a real dynamic process happening. So in other words there’s a tendency to portray things like programs, organizations or processes as static and fixed structures rather than evolving systems that change over time.

And in that way it’s easier to kind of get a project done and maybe not consider how it’s changing over time.

We also sometimes reduce complexity to make it easier to process people and that sometimes forces people into boxes that at best only partly represent the situation and could completely misrepresent their real needs if we aren’t mindful of that.

And finally ignoring participant’s perspectives, perceptions and understanding focusing only on an analyst perspective and conceptualization could be a real limitation.
And I know in our work, you know, we can tell people all about their networks but the true interpretation of that network comes from the community members and the practitioners who are living and breathing that every day.

So I know as an evaluator I always rely on them to tell me what we’ve gotten - what we got right, what we did wrong and maybe where we can all learn together. So it’s really important to get that feedback.

And then just finally, you know, why systems evaluation for MIECHV. Well from everything I’ve heard this is my first webinar with this group. But I think that this has been covered.

But, you know, we do know that there are many books and articles that have argued for the need to take on systems methodology, methods, frameworks, so and as the world becomes more globalized and increasingly complex this is even more of a need now than ever.

So for evaluators, policymakers and those who commission evaluations it’s obvious that the need to - the need for approaches drawn from the systems field is widely recognized.

And therefore there’s the proposed need for an evaluation framework that fits into a developmental evaluation approach that could presumably fit together with other types of evaluation, theories and models is what - where we really are today. There’s no one way is the right way. But really a combination of all of these things that we know and growing with it the kind of systems perspective is where we’re at.

And of course embedding home visiting within a larger strengthened system does all kinds of great things like improve sustainability. We think it yields linkages, helps divide or helps systems
cross the data divide, aligns with the united and coordinated vision, creates the right conditions for collected problems and of course helps us to reach families.

And that’s all I’m going to really say today about just for an overview of system evaluation. What's next is really kind of the more interesting part of this webinar. We’re going to hear from three different state grantees about their own work on evaluating systems.

First we’ll hear from Holly Hilton-Dennis from Indiana. I'll actually give our example from Colorado. And then Erica Schmitz and Erika Lichter will both speak on the project that’s happening in Maine.

So I’ll go ahead and turn it over to Holly at this point.

Holly Hilton-Dennis: Hello everyone. Thanks very much to the TACC Team for having me. My name is Holly Hilton-Dennis. I am the Home Visiting Program Coordinator at the Indiana State Department of Health.

And today I’m going to give a broad overview of Indiana's Interagency Collaboration Evaluation that is currently in progress.

First, I wanted to provide a little background on why Indiana chose to evaluate interagency evaluation. When the initial MIECHV FOA came out, the Department of Child Services and the Indiana State Department of Health were both interested in applying for the MIECHV Grant.

The Department of Child Services administers Healthy Families Indiana or HFI which serves every county in Indiana, the Maternal and Child Health Leadership at the Indiana State Department of Health at the time were interested in bringing the first Nurse Family Partnership...
site to Indiana. Since MIECHV was tied to Title V funding which is located within the State Health Department in Indiana and the Department of Child Services houses the Statewide Healthy Families Program the Governor named both agencies as co-leads.

With this funding Indiana chose to fund one new NFP site and ten existing HFI sites based on highest risk counties and zip codes identified through the required needs assessment.

So now I’ll fast forward to 2011. In addition to the Formula MIECHV Grant, Indiana was awarded the Competitive MIECHV Expansion Grant which as most of you know has an external evaluation requirement.

Indiana contracted with Indiana University School of Education Evaluators, Dr. Jeffrey Anderson and Dr. Allison Holland. I want to take this opportunity to give them full credit for the research protocol design which they wrote and tweaked multiple times prior to HRSA’s approval.

The Interagency Evaluation is part of Study Number One. Within Study Number One IU developed four research questions that address collaboration at the state, program, community and site level. The study is designed to identify barriers and contributors to collaboration at all those various levels.

The evaluation is mixed method design with both quantitative and qualitative measures. The document analysis will include grant proposals, Evaluation Advisory Board Minutes and used between sites and community agencies, HFI Program Advisory Minutes, Minutes from NFP Planning Meetings and other joint projects developed and documented in relation to the Indiana MIECHV Program.
All identified interviewees will be asked to complete the interagency collaboration activity scale by a - via SurveyMonkey. The results will be incorporated into the qualitative analysis.

The interview was adapted from the MIHOPE State Administrator Baseline and 12 month interview. The study sample for the semi-structured interviews includes identified administrative stakeholders at the state, program agency and program site levels as well as representatives from outside community agencies that initiate and/or receive referrals from NFP and HFI.

The baseline interviewees were selected based on involvement at the inception of the MIECHV Project.

IU will also be administering - administering two electronic surveys related to referral coordination. The first survey will be given to home visitors. This survey will be used to identify the community providers they refer clients to most often. Community providers identified by the home visitors will also be surveyed in order to study the progression toward the coordinated referral system.

As I mentioned in the previous slide the interview was adapted from the MIHOPE State Administrator Baseline and 12 month interview. The interview is composed of the subheading subjects listed on this slide.

Indiana’s MIECHV Evaluation Advisory Board identified 19 stakeholders for interviews. Of the 19, 16 interviews were completed by the IU Team. The results are currently being analyzed.

I will be happy to share the entire interview question document via email but it was too large to incorporate into this presentation.
Unfortunately, I don’t have any study results to share with you today as IU has just completed the interview transcriptions. I will however share some lessons learned courtesy of my Evaluation Team. Identifying a pilot interviewee was helpful to them in testing the interview process. And they did make some adjustments after the first interview.

IU first proposed using an emerging study design in order to be able to revise the participant list and research questions based on initial findings.

If you have some flexibility in your design it makes sense for qualitative research to build upon findings. But due to the nature of the project, IRB approvals and the HRSA approval process we were not able to do this.

And this is an obvious one, qualitative research is very time consuming. If we were able to plan ahead and secure HRSA and IRB approval more quickly we would have been able to get a true baseline instead of asking questions retroactively.

We are using NVivo Software to coordinate and integrate the document and interview data as well as to examine qualitative data using participant attributes from surveys. This will make coding easier, more fluid and less time consuming.

So I hope that this has been helpful to those of you considering implementing an Interagency Collaboration Study and I am more than happy to connect you to Indiana’s Evaluation Team and any of the documents I mentioned in this presentation.

And a special thanks to my partners at the Department of Child Services. I enjoy working with them very much and I know some of them are on the webinar today.
Erica Schmitz: Thank you and hi everyone. I'm Erica Schmitz. And I facilitate Maine's MIECHV Systems Collaboration Efforts.

In a moment you'll hear from Erika Lichter. She’s the Evaluator for Maine’s MIECHV Program.

We wanted to start off with a little of background on who’s involved in Maine’s collaboration work and what we’ve been doing so far.

So prior to the MIECHV funding Maine already had an established network of home-based perinatal and early childhood services but not necessarily a coordinated or integrated system per se. We have two programs that are administered by the state and are offered to families in every community statewide, Maine Families Home Visiting which is our MIECHV funded program and Public Health Nursing which provides home-based maternal and child health nursing services.

In some of the more densely populated areas of the state PHN contracts with local agencies that are collectively referred to as Community Health Nursing grantees. They're listed here as a separate program but they represent a broad array of agencies that are contracted to deliver PHN services.

So Daniella Varda mentioned boundaries earlier. And those top three are the ones we refer to as state administered services. And that’s where we needed to start.

But in some pockets across the state not in every community, we also have locally administered home-based programming by Early Head Start providers. Ultimately our goal is to improve
coordination among all four of these types of service providers. However to begin our first task has been to focus internally on a state level building a coordinated system of statewide, state administered home-based services starting with Maine Families, Public Health Nursing and other contracted agencies.

Our work so far has focused on rural clarification and defining home visiting and Public Health Nursing as two distinct disciplines that together fit together to serve a continuum of needs in Maine’s maternal and child health population.

With roles defined the programs are working together to reduce duplication, coordinate referral pathways, serve more families with services that are tailored to their specific needs as well as collaborate to jointly serve Maine’s highest need families, in other words to form a whole that’s greater than its parts.

As for how to evaluate our success in achieving that vision, that is Erika Lichter’s role.

Erika Lichter: Thanks Erica. Hi everyone. I’m Erika Lichter. I’m on the faculty at the University of Southern Maine. And I’m the Evaluator of Maine’s MIECHV Program.

And the goal of the evaluation of Maine’s collaboration efforts is to learn more about how the Collaboration Meetings that Erica Schmitz described are changing collaboration between the four major types of home-based services.

So today I’m going to share what we have done in our evaluation so far. So our Evaluation Team in collaboration with our CQI (Continuous Quality Improvement) Team work together to develop a tool specifically for our MIECHV Project. So we started with a review of the literature to determine
the factors that prior researchers demonstrate are important for meaningful collaboration and some of that included Dr. Varda’s work.

So I highlighted some of these articles and tools we reviewed here. We also received feedback from program staff on current challenges to effective collaboration across programs including feedback from the early Collaboration Meetings facilitated by Erica Schmitz.

We developed a survey which was reviewed by our CQI Team and further assigned to ensure that we were addressing the key areas of interest. And in the survey each program was asked to rate the three other programs on several different domains.

And on the next slide shows the domains that we included on our instrument. So the first we called Resource Sharing. And this is - included things such as sharing of reports, funds, evaluation resources, etcetera, mostly tangible resources.

The next domain was Communication and Information sharing and this was assessed at both the program and personal level. So examples of communication at the program level including holding inter-program meetings, obtaining information on shared clients, participating in Case Conferences and reviews.

And communication and information sharing at the personal level included things like whether or not someone was personally acquainted with someone from another program and whether they had personally met with someone from another program.

The third domain we called mutual agreement and coordination. And this included things like having formal and informal agreements, sending and receiving referrals as well as joint decision making around outreach to providers, recruitment of families and training.
And finally we measure what we refer to as the beliefs, perceptions and relationships. And this included questions about staff personal perspectives on the other program including how much they trusted the other program to make appropriate referrals, follow-up on referrals and provide high quality service as well as their perceptions of redundancy.

And we also asked participants to rate their overall level of collaboration with each of the other programs using a single item on a scale of 1 to 5.

So on the next slide is a portion of the survey. This is just to give you a sense of what the participants were asked to do. So this is a part of the beliefs, perceptions and relationships section.

As you can see on the left are some of the items asked in this section. And you can see how participants were asked to rate the extent they agreed with each item for each program on the survey.

And they were instructed not to answer the questions for their own program, just for the other program. So essentially they were asked each - to answer each question three times. And this was administered through a paper and pencil survey.

So after the survey was developed and refined it was sent to the supervisors of the four types of home-based early childhood providers in Maine. A total of 33 supervisors received a survey and we had an 88% response rate. A 100% - we were pleased that 100% of the response rate - the supervisors from Maine Families, Public Health Nursing and Community Health Nursing returned the survey along with 64% of the Early Head Start providers.
For analyses we examined the individual questions as well as created scores on each of the domains.

And I’m not going to go into that in detail. We’ll talk a little bit more about that after.

So as you can imagine the survey yielded a lot of information and a lot of numbers so we developed a visual means to display the data based on prior research.

So the next slide shows the collaboration maps that were created for each of the domains measured in the survey. The circles actually represent the different programs.

We have not identified them in this presentation except for Maine Families which is labeled by MF and this is because we haven’t shared the results with everyone yet.

So the arrows represent the average scores. The arrows range in thickness and color. So darker color and thicker arrows represent higher scores in the domain.

So as you can see these maps allow us to quickly assess the overall level of collaboration in a specific domain and across program payers.

So on the next slide is a collaboration map for - from one of the domains, the Beliefs, Perception and Relationships domain. So these questions were asked on a 5-point Likert scale and the overall average rating on this scale was about 3.7 so close to a 4 or agree which is a pretty high level of high rating. You can see overall this had a pretty high score in this domain.

On the next slide we have collaboration maps for all of the different domains. I guess those circles didn’t really show up.
But seeing them side-by-side allows us to see the areas where the supervisors rated the highest levels of collaboration.

Erica Schmitz: And I especially love this slide because it shows us simply at a glance where our strengths are and where to focus our efforts. It shows us that on an interpersonal level we already have relatively strong positive relationships and trust between supervisors as well as general positive feelings about each other’s program.

It also shows that on a formal inter-program level we have some work to do. There’s concerns that we’re on the right track with our efforts to improve formal roles clarification, referral coordination and collaborative practice guidelines.

If we succeed when a follow-up survey is conducted we should expect to see thicker arrows for domains such as Resource Sharing, Program Level Information Sharing and Mutual Agreements and Coordination Activity.

And hopefully we’ll also see that strengthening those program level relationships won’t negatively impact the interpersonal relationships that were already so strong in the beginning.

Erika Lichter: Thanks Erica. So just to summarize the survey and how we displayed the data allow us to look at collaboration from multiple perspectives. So we can look at it overall, by domain as well as for specific questions and see how collaboration varies across the domains and programs.

We believe the survey provided us with some useful information but we did learn some lessons along the way which is on the next slide.
So for example we believe there was some confusion about collaborator’s affiliation. So for example a Maine Families Program Supervisor may know she works with a Public Health Nurse but she may not know whether that nurse is employed by the State Public Health Nursing Program or one of the grantees from the Community Healthy Nursing Agency.

And also some programs have fewer supervisors serving larger areas of the state. So as a result a lot of the collaboration work happens by frontline staff and some of the supervisors may not be aware of it all.

So to gather more information and address some of these challenges we administered a shortened and somewhat simplified version of the survey to staff in the spring of 2014. These data are currently being analyzed. The survey was done over the web rather than paper and pencil which allowed us to add dropdown menus and skip patterns to clarify program affiliation and service area.

We’re also planning on conducting interviews with supervisors to gather additional information that will supplement what we learn from the survey. And a follow-up survey is also planned. It’ll be conducted to allow us to compare results over time.

Erica Schmitz: And one thing that’s been so great about this process is that we have had a feedback loop throughout between the evaluation and the collaboration work with the evaluation results informing our work in the field and the Evaluation Team being so open to feedback from the collaboration process in order to refine the tools that are used for the evaluation. It’s been a true team effort.
And these slides reflect the hard work of many individuals on the MIECHV Evaluation Team and our state CQI Team. Thank you so much.

And next you’ll be hearing from Danielle Varda regarding data informed systems improvement efforts in Colorado.

Danielle Varda: Hi. So I’m going to go ahead and present today a piece of the MIECHV Evaluation that focused on some of the systems building work that we’re doing throughout the communities.

So a little bit on the project background, so in partnership with the Colorado Department of Public Health and Environment and the Colorado Department of Human Services the partner team which resides here at the University of Colorado-Denver in the School of Public Affairs has worked together with the Early Childhood Councils within the MIECHV communities to assess systems relationships.

So CDPHE, the Colorado Department of Public Health and Environment, is actually the MIECHV Evaluation Team. And so we’re just working with them on this one piece of it where we are working closely in communities to look at the different programs and the relationships that and networks that have been built up among them so that -within each of the Early Childhood Councils.

So for our methods we actually utilized the quality improvement methodology that included four steps primarily focused on a social network analysis approach.

So while it’s typical for a social network analysis to focus on describing the community back to the audience and showing some descriptive nature of that network we instead started with this four
step process which in step one asks communities to identify their ideal networks. We then administer a survey in step two to get a measure of the network.

What this does is it allows us to identify the gap between what the networks actually look like and what the community identified as the goals of what - where they want to be.

So and what this does is allows us to create an action plan for getting from where we are to where we want to be.

To do this we utilize mixed methods including stakeholder meetings, surveys and a participatory approach that continues to include a feedback loop with the communities.

So just a little bit more about that four step process, the first step we called identifying the ideal network. So in January of 2013 we invited stakeholders in early learning, family support and parent education, socio-emotional and mental health and health all as part of the early Childhood Council to come together to identify stakeholders and do an exercise like you see in the picture here where they actually use thumbtacks and these foam boards and rubber bands to create what to them would be given all of the constraints of a community the ideal system that would best implement these Home Visiting Programs.

We then go back to the office and code these networks so the picture on the right there of the network map show their network kind of coded so we have a little bit of data about them.

Then in step two we use a survey called the Partner Survey which is a program to analyze, record and track networks to enhance relationships. It's a quantitative methodology focusing on the relationships between and among organizations which allows us to measure and map
relationships and flows between the organizations. This is a tool we have here at this - in our school.

Within that survey we asked respondents to answer questions about themselves, to report outcomes and resources that they contributed, to talk about relationships with their partners including their home visiting relationships, perceptions of trust and value among the partners.

And we included some questions from a tool called the Process Quality Working Together Tool which is one that the communities had been using for years prior to this evaluation so this way we were able to look at some data as well over time about the quality of the process of their work together.

In step three what we did were - was we were able to identify the gap between the actual and ideal by looking at their ideal network. Looking at the data that we got from the data collection and the Partner Tool and from that we were able to find gaps and create some action steps.

So as a result each community has the actual Partner Tool which has the raw data available in it for them so that they can create their own visualizations and do their own descriptive work.

We also did a report for each community which summarized all of the partner data as well as - which included their ideal networks. Chapter 3 of that report specifically were county specific recommendations so there we really - that's where we really used the data to inform the practice.

We have these little things, little boxes throughout the report that has a question mark that are the quality improvement questions to consider.
So we want to - it’s important to us that each piece of data inform an action step, inform practice.
So every time data is reported we then pause to ask questions that the groups can ask about their communities - to their communities to try to create some action steps.

On the next slide is an example of the county specific recommendations. So what we’ve done here is actually just show you at a glance what they look like.

So within each recommendation we have data. We include the questions to consider and then the recommended action steps.

We know as evaluators that we need the communities and their feedback and their input to really get these recommendations right.

So all we’re doing here is offering our best advice. And then we go through these with the communities and ask them to reflect on these. And some they’ve already addressed. Some is not really relevant to their community and we didn’t really get it right.

But every now and then we get what I call a hit which is where they basically say yes, this is something we really need to work on. We can link the data that we just collected to that action step. And we even have some guiding questions that may help us move forward.

Finally in step four we do use the data to inform practice so we do go through that process.

The partner data’s primary purpose was to give them - give each community data back so that they could strengthen their systems but not to compare them to one another. And that was really important in the evaluation that we stressed to them that we’re not comparing them across sites.
but rather comparing them to their own personal goals about how they want to build up that system.

So just a couple of examples from the data on the next few slides, this one shows - so we asked folks who answered the surveys from throughout each community to tell us about their relationships in all of these different domains that relate to child and family outcome.

Home visitation here you can see on the far right, showed the fewest number of connections even some isolates. But what was really important in this finding was that many of the folks that we worked with in the communities told us when we started or when we did the ideal networks that they wanted to build up these relationships around their Home Visiting Program because nothing was happening in their community because it was such a system that was not well developed.

Well what was neat about this finding, this simple map shows that there’s lots of different connections that are already happening. We actually can pull out each of those relationships. We call it the dyadic level so every two partnerships and try to understand what - and they reported exactly what’s happening within those relationships.

So it gave each community a lot of detail about all the relationships that already are happening from those that were just very infrequent, meaning folks just kind of knew about each other to those that describes themselves as very integrated and having very integrated programs.

So there’s a lot of information here to look at what’s happening and how can we replicate those practices.

On the next slide it shows a little bit about the way that members of these systems trust and value one another. So in this kind of relationship, measures of relationship, perceptions of what’s
happening among the partnership is almost as important as anything else that’s actually happening.

So for example if there’s high trust and members perceive high trust among one another that’s pretty much a good outcome whether we know that high trust is actually occurring or not.

But let me direct you here to the bottom picture with a circle around it. There we actually asked some folks to - we asked everyone in the survey to rate each other on these three dimensions of value, power and influence, levels involvement and resource contribution.

The blue bar shows all members average perceptions of value of one another.

The red bar showed all members value - perception of value towards the Early Childhood Council as an organization.

And the green bar showed that Early Childhood Council’s perception of value towards all the other members.

So what we found here and the reason I brought this one as an example is the green bar that’s circled there in the last section on resource contribution shows that the ECC’s perception of all members in that network was actually quite low, lower in fact than any other’s perception of one another.

For us - for the ECC they were kind of surprised that their own perception was so low of their members. And they were a little reluctant to share this with the community.
But in the end we all realized that this was a great spot for an action step. This coordinator was saying within the system I’m not really seeing where to get resources from my partners which is one of the reasons that they’re all here. In subsequent data we actually have a resource inventory. Everybody reported what resources they can contribute to the system.

And so therefore the coordinator could go to that and begin to do some strategic thinking and creates an action plan around how to better leverage resources among the system partners.

And finally there’s a lot of call in Colorado for standardizing systems measures across sites. This is something that we just don’t - it’s very hard to do in a system. I talked earlier about how each community is different. We don’t compare them across.

However when the state is saying we’re trying to look for standardized systems measures, we’re trying to help them think that through.

So what we’re doing is we’re using this QI methodology to try to come up with some way to kind of look at some standard kind of measure across the different sites.

And this is just an example of how we’re conceptualizing this and just working on it. But basically we’re taking a number of dimensions within the system. Looking at their ideal or standardized scores or sorry, their ideal scores, a standardized score. Looking at their actual partner measures for those dimensions and then looking at the difference so how far are they from their ideal scores.

And in that way we’re able to kind of get a sense of how far each community is from their ideal goal of where they’d like to be.
And so therefore we can talk about communities in terms of having - being closer to their ideal and farther from their ideal. But again while creating a standardized score we’re still not comparing one against each other. We just truly believe that each community has its own backstory. Its own details that we really cannot understand fully and so it wouldn’t be really fair to measure and standardize across all the sites.

And finally there are of course limitations to using network analysis to evaluate systems. There’s a real big gap between having these data and an ability to really understand and apply them.

Network data are complex and new. And a lot of cultural and historical barriers to translating the data into practice exists.

And we’re seeing that here in Colorado. Systems building and measurement is a lot of work. And folks sometimes are reluctant to participate in this kind of evaluation so it takes a real commitment and a lot of resources to do this kind of evaluation.

And then of course standardizing across sites is possible but it will take some time to implement and some work.

And finally what’s next for us, we are doing a time two and each site is helping us revise the survey trying to get it to really match their needs and to only ask the questions that we really need to ask.

But we’re engaging in something called Systems Building Storytelling where we’re helping. We realize that to bridge that gap between data and practice we need to find some way that really speaks to the communities. The preferred method of describing systems in systems building we found is storytelling.
So what we are trying to do is work with each community to start with a story. However backfill in that story, weave the data into the story so that basically they're able to each talk about their communities and what’s happening around these home visitation systems by telling stories but being able to use all the different pieces of data from the evaluation to support it and provide evidence for that story.

We’re hoping that in practice they can use this for sustainability. For example being able to have a complete narrative of their story with data that they could use on grant writing applications for the future, also for dissemination for their partners, stakeholders and other funders to describe what’s happening.

We know in Colorado the legislature is often asking why some of these groups are - how some of these groups are effective.

And we’re hoping that by creating an evidence-based story that they will be able to have a lot of credibility and talk about what’s happening.

And of course we’re coordinating with the state team to integrate all of the MIECHV data into these stories. So this - I mentioned this is just one part of the larger MIECHV Evaluation through the Health Department. And we’re hoping that eventually we can coordinate and make sure that all the technical assistance and evaluation is happening and when - as Amy would say harmonious fashion.

And that’s it from Colorado. Next Susan Zaid from DOHVE is going to discuss some of the resources that they have there.
Susan Zaid: Thank you. Hi. I'm Susan Zaid. And I'm the Deputy Director of the DOHVE Team. I'm also the liaison to MIECHV grantees in Regions I and II.

And as many of you know DOHVE which is funded by the Administration for Children and Families in collaboration with HRSA provides TA to grantees around the areas of evaluation. We also work with grantees to develop their CQI plans and build capacity for successful implementation of their CQI plans and to support MIECHV grantees in the selection or refinement of their MIS Systems to assist with data collection and management.

We also continue to work with grantees as they submit their benchmark data for annual federal reporting.

The DOHVE resource page listed on this slide includes - it includes a link to access other resource documents and webinars. I also wanted to take this opportunity to let you know about another resource that is currently under development.

As you already know grantees engage in rigorous - a rigorous process to develop their evaluation plans that were approved by HHS. DOHVE is in the process of creating a summary document that synthesizes this information from the approved MIECHV Evaluation Plans into one document such as including things like the research hypotheses, study design, tools, analysis plan and so on.

And this document is currently under development and we hope to have it released at the end of the year.

So for those of you currently engaged in systems evaluation you’ll be able to identify other MIECHV grantees who are also engaged in systems evaluations, see what their resource

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The State Maternal, Infant, and Early Childhood Home Visiting Program is administered by HRSA, in collaboration with the Administration for Children and Families.
questions are, what they've designed - what their designs are and what tools they've used and so on.

And we've heard some excellent examples of evaluations of systems integration here so this document will help you all see some specific details of these evaluation designs as well as others.

Kathy Reschke: Thanks so much Susan. And thanks to each of our speakers, so much knowledge and concrete examples, strategies, tactics for evaluating systems integration.

As always we want to allow some time for you to pick their brains. They - you may have questions that were sparked when you heard something that one of our speakers said.

So we are going to have about 20 minutes, 15 or 20 minutes to answer questions. For this Q&A segment we’re going to be drawing from questions that you submitted during registration but also you have the opportunity to ask some questions that may have come up during the presentation so if you would - if you think of something, enter it into the question box and we will incorporate that into our Q&A time.

While you're doing that we're going to start with one of the questions that was submitted during the registration process.

So Amy I would especially like to address this first one to you. Has anyone successfully tied systems integration outcomes to family and child outcomes? I wondered if you’d address that for us.
Amy Fine: Sure. I think that’s a fabulous question. And it really gets to the heart of why we would want to do systems evaluation. I mean again what I had said earlier about the bottom line is, are we actually making a difference for kids and families?

And I think it’s really important to build this body of knowledge. When I think about this I have several examples that come to my mind that are not technically systems evaluations but I think can contribute.

And so let me just mention those. I’d be interested in other’s response as well.

The ones that come to my mind are just - I’ll just name three or four of them. But one of them is the Original Collective Impact Study that was - conducted by John Kania and Kramer and was in the Social - Stanford Social Innovation Review.

And really what they did is they looked at successful community wide initiatives and then worked backwards to say what are the key elements of those initiatives.

And one of the things they really found is a very collective system approach. So again it’s not systems evaluation per se but it’s taking the evidence of improved outcomes and then working backwards. Some of those elements are really collective and systemic.

Another good resource to think - you know to have us think through that question is the whole framework of results-based accountability which is - was developed by Mark Friedman. And that’s been used. That framework’s been used successfully in communities and states across the country and also internationally to improve outcomes in a very systematic way by focusing on shared results.
And it’s a really great tool. Mark has a book called which I love the name, *Trying Hard Is Not Good Enough*. And the approach is really to start to look at what are the outcomes as we do our work.

And one of the questions that’s asked of all these agencies is not only what did you do but did it make a difference for kids and families. I think that’s a good question to ask.

Two more quick examples, the West Side Infant Family Network in LA is a nice - a lovely project that is very - it’s succinct set of data looking at improved maternal and infant mental health outcomes.

And it was - it is a, I think really instructive to us because they used three long-standing agencies in a community and brought them together in kind of a tiered set of services and support with very positive outcomes. You can find them on the web.

And one other quick example was the Opportunity Knocks Project in Middleton, Connecticut. Also small enough for us to understand but a tiered set of services and support that really had a huge impact on the number of expulsions from pre-K for children for behavioral problems.

And again it was working across existing agencies and bringing those pieces together.

So those are the kind - some - a few ideas that I have about how we could start to pull together this literature.

And Erica, I don’t know. Do you have some additional ideas about how to - about answering that question?
Erica Schmitz: Amy I agree with you. I think that it’s a really important question and something that we would definitely like to do and we’ve not yet done it.

And in our analytical model we’re hoping to try to look at how systems integration is related to so indirectly and through service delivery. So whether through these collaborations and integration families are getting the services that they need and that in turn is related to outcomes.

So we’re hoping to combine our survey with some other measures of systems integration such as referrals to other agencies and then use of services by families who are referred to those services. And both of these measures are captured in our home visiting electronic records system.

But we haven’t gotten there yet and I would also be interested in trying to find more literature on it. If people have other examples it’d be great to hear from them.

Kathy Reschke: Does anyone - any of our other speakers want to respond to that question?

Susan Zaid: Well this is Susan. And I think Amy and Erica did a great job responding to the question already. I think the only other thing that I would add is just to stress the importance of specifying the theory of change that clearly articulates the alignment of activities that are critical to systems change and how those activities might serve as moderators to specific participant outcomes.

And (Erica) talked about drawing those linkages between service delivery and outcomes and, you know, systems evaluation looks at broader changes in the system as it relates to supporting the program and those can have some moderating effects on participant outcomes.
And Danielle during her presentation talked about those intermediary outcomes that are helpful to capture.

Kathy Reschke: Well thank you. I think that we do have a question that’s come in in the question box. I think I’m going to send that on so that our speakers can see it and give it some thought because it seems like it’s a pretty challenging question.

So I would like them to be able to give a little bit of thought to it maybe before they respond.

So before I have a chance to do that I’m going to ask another question that did come in during the registration process and I think all three of our speakers when talking about state examples mentioned a mixed approach, a mixed methods approach. And this question hits at that issue as well.

The attendee says our planned approach to measuring integration is qualitative and subjective, i.e. perceived; any suggestions for more objective quantitative measures of systems integration?

I wondered Erica perhaps you could deal with this one.

Erica Schmitz: I think I mentioned a couple that we’re going to use in terms of data that are collected in our electronic record system that our home visitors use which is things like actual referrals to other agencies as well as then not just - it gets at what Danielle was saying, not just counting who they’re referring to but then whether families are actually then getting connected and using those services and sometimes that’s an assessment of how well that collaboration is working is are families getting connected to the services that they need.

So that’s one other measure that we’re going to be using.
Danielle Varda: I guess I can add, I’ll try to add a little bit to that. This is Danielle. You know I guess I don’t know if I’ll answer this the way that the person asking wanted me to.

But I guess my thought is that, you know, we often get asked that, you know, well is like collecting information about networks qualitative? Is that subjective? Is that a perception?

And, you know, I really own the fact that a lot of what happens in this kind of work is all about perception and subjectivity. And really measuring, I would say measuring relationships is kind of weird. Here we are talking about, you know, how we interact. And what’s happening between, you know, really when two people get together and something happens and then we want to display charts and graphs and run statistics on that. And it just sometimes feels kind of strange.

So I think that when we say, you know, we’re measuring perceptions and subjectivity it’s okay in this way. And I think that there’s really no other way to make something that’s kind of weird like measuring relationships really believable unless we do add the context and the subjectivity and perception around it that qualitative research does bring.

But of course we can always use a more quantitative approach and get those kinds of - we can try to get information about those kinds of perceptions by using something like a survey approach that can quantify the methodology.

So linking it to things like data that’s collected, not from survey research or secondary data is kind of a - one of those things where we have to really work at that as an analyst to make those things work together.
But I guess my response is really that it’s okay to look at it from this perspective, maybe add some kind of quantitative approach to it that includes a survey methodology adding more hard numbers behind those kinds of things. And just make sure that as you develop those kinds of scales and measures that there is good reliability and understanding behind them that have real valid constructs that people will believe in.

I don’t know if there’s any other responses from other speakers.

Kathy Reschke: If not we will go onto the question that Benjamin asked. He asks any recommendation for the tension created by the dual responsibilities for a robust system integration and enrollment to scale?

So let me say that one more time in case you didn’t hear it, any recommendations for the tension that’s created by the dual responsibilities between a robust system integration and enrollment to scale?

And if that’s something that you would like to see or would like to give a little more thought to it’s also possible that we could wait and have that be addressed in our newsletter article.

So I’ll open it up to our presenters and see if anyone wants to take a stab at it now or if you’d prefer to give that some more thought.

Danielle Varda: This is Danielle. And I have to admit. I’m not sure I understand the question. I’m not sure - I don’t understand the second part of the scaling question.

So I would prefer to wait to try to maybe get some clarity at least and make sure we answer, unless someone else understands but to answer appropriately.

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The State Maternal, Infant, and Early Childhood Home Visiting Program is administered by HRSA, in collaboration with the Administration for Children and Families.
Amy Fine: Well this is Amy. And I may be interpreting it wrong so Benjamin write in again and tell us if we...

(Crosstalk)

Danielle Varda: Yes.

Amy Fine: ...got it right. To me I don't think it is an either or. I think if we pay attention to systems integration not as a separate piece that doesn't have anything to do with going to scale but as a way to get to scale, maybe that's the framing that we actually need.

I mean I know I’ve seen in - well I’ll give an example, Help Me Grow in Connecticut when it first started. It's actually a centralized referral and linkage entity.

And one of the things that they do in addition to having this online referral and linkage hub is that they bring communities together. They bring the community service providers together in regions across the state. And as I understand how that works is that integration of bringing people together on joint problem solving actually gets services to people, more services to people in a more timely way.

So kind of thinking about it, I'm interested in that position because from my perspective I see it, the systems integration as enhancing going to scale versus detracting from it.

Kathy Reschke: Thank you Amy. And Benjamin if we didn't quite answer your question, go ahead and take another stab at it in the question box if you’d like.
Petra Smith: Kathy.

Kathy Reschke: Yes, go ahead.

Petra Smith: All right, so that - this is Petra. I think I want to just kind of tag onto what Amy just mentioned. I think it is, you know, doing the systems integration is a way of leveraging your resources.

So, you know, determining, you know, what your relationships look like with the various systems component and what those system components might have to offer in terms of how you enroll or upscale your program. So, you know, evaluating, you know, what kind of pieces that you need for your enrollment to scale. Perhaps there is, you know, training or professional development components and then looking back at the strength of your relationship to organizations that might be able to offer those components and then strengthening and connecting those relationships becomes important too.

So to me it's a matter of leveraging and determining which pieces need to be leveraged in order to achieve certain outcomes in terms of scale up and processing your system.

Kathy Reschke: Thank you Petra for adding that, hope that does help.

Oh okay, so Benjamin did respond. Let's see. There's a great deal of pressure to get to enrollment on the grants. And it's been suggested that it's all about enrollment for the reauthorization grants. This seems to keep people focused on the individual program level from Amy's slides that is, programs feeling focused on their program to reach the required enrollment and having little time for system integration work.
Amy would you like to respond to that clarification or anyone else?

Amy Fine: Sure. You know I think it’s a really interesting dilemma that what - you know obviously that’s the impact. How the impact is felt at least at - for some of the programs.

And I think taking it - it’s great to raise it because again I think the way of looking at it is to figure out well is there - if I join with others or if there’s for instance a common shared set of results, then that might be a different way of helping to enhance your enrollment.

But it really does take some stepping back and thinking is there a way that the systems integration is going - that we can go about systems integration that will help get me to my programmatic goals of full enrollment in addition to helping more women, children, families in our communities get the services they need.

And I think it’s maybe stepping back to say what’s the handle or what’s the lever that will help put both of those pieces together.

And it sounds like and again it really depends on where you are in your development because I know certainly if we asked about this the very first year that it was funded, I suspect that the results of our survey would have been very different. It would have been, you know, I would say 80% to 90% would be on that level of program - meeting the program requirements.

So I think in part it depends on your development and then the context in your communities or in your state that either allows systems integration to or is framing systems integration in a way that helps the individual pieces go forward or whether it is somehow it’s configured in a way that isn’t working as well for you.
But I suspect there are other states and communities around the country that could be assisting in this kind of helping people think through that barrier.

Kathy Reschke: Thanks Amy. Is there anyone else who wanted to respond to that really quickly? We're quickly running out of time so.

Erica Schmitz: This is Erica Schmitz. And I just wanted to say that in Maine something that’s been very helpful as far as that balancing that effort between the program itself and the collaboration work is that for Program Managers on a local level we do with the grant support part of their time for outreach efforts and to participate in Collaboration Meetings.

So that’s really important. It kind of becomes an expected part of their job. That does indeed feed into building a stronger program and increasing enrollment and increasing those referrals.

The other piece I just want to make a plug and I am a facilitator. But make a plug for that role of a facilitator that’s external to the program that is assisting and supporting in that work that it’s not the burden of the Program Managers themselves to be convening all these meetings but it’s really important to have a facilitator to do that work.

Kathy Reschke: Thank you Erica. Petra I think this is about the end of our time for Q&A. That went so fast. I wondered if you wanted to say a few words to close out our session.

Petra Smith: I would like to thank you, Kathy. I would like to thank our presentation team for an interesting and timely and very informative webinar today. You know as I reflect on the webinar I am reminded that home visiting and early child - the home visiting and early childhood world is rapidly changing and we’ve become increasingly interconnected over the past three years.
System integration provides resources and support for leaders and increases the scope and scale of impact we have individually and collectively as some of you mentioned today.

You know and as we seek to develop this leadership capacity to influence the change and understand the nature of systems integration and changes in them it is increasingly important aspect of evaluation. As Holly indicated today we should seek to understand the networks within each context, perspectives and situation.

One such context that comes to mind when I think about that is the context of bonding and bridging. It’s a term usually commonly used in social capital literature. So bonding describes connections in a more tightly knit group. Bridging signifies connections to more diverse partners.

So bonding indicates a sense of trust, close relationships and integration and bridging indicates access perhaps to new resources and opportunities with nontraditional innovation.

So perhaps some of the relationships need to be built so to aid with that scale up that Benjamin was talking about.

And then the extent and success to which bonding or bridging occurs in a system often can be traced back to the application of a data driven process where purposeful efforts are used to evaluate what relationships need to be strengthened for integration and what relationships need to be built to generate new ideas.

So as you develop your framework for evaluation we want to encourage you to reach out to HRSA resources, for example the TACC or DOHVE or also your peers in other states.
In closing I would like to thank you, the audience, for your diligent work in building your systems, for your efforts to evaluate the results and your desire to use integration outcomes to strengthen your systems connection and of course for your participation in today’s webinar.

Kathy will provide some final housekeeping items. Please Kathy go ahead.

Kathy Reschke: Thanks everyone. I know we are right on the end of our time but I wanted to quickly mention in our upcoming webinar in July, we don’t have one in June but in July we are going to be providing a webinar in collaboration with DOHVE who will be returning with us.

And it’s Case Studies and Supporting Quality Data Collection at Local Sites so I know that that’s near and dear to all of you.

And then also just a quick reminder about the newsletter, excuse me. If you don’t subscribe, do because coming up will be some follow-up Q&A and follow-up articles and additional resources on systems integration evaluation.

And then of course you’ll be getting - speaking of evaluation, you’ll be getting a feedback form. And we do use that information to help improve the webinars as well as TA in general.

So thank you so much everyone. Thank you to our speakers, to Petra and the other TACC staff. Thank you all for attending and for all that you do on behalf of children and families. Have a great day.