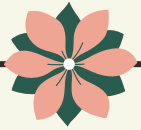




Healthy Start Family Spirit

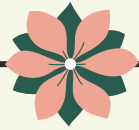
MARCH '22

Agenda



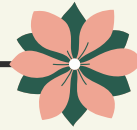
Housekeeping

Calendar
Reflective Supervision



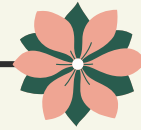
Postpartum Mental Health

Guest Speakers Danielle
and Madeline to present



Updates

Forms
Healthy Start



CQI

Goals and objectives

Calendar



- April 25&26 Quarterly Meeting (Virtual / Required)
- May 4th Monthly Webinar (Required)
- June 1st Monthly Webinar (Required)
- July 6th Monthly Webinar (Required)





Reflective Supervision

<https://www.surveymonkey.com/r/56RJRYH>



Quality Assurance Visits

Look to schedule to your Quality Assurance Visit With Amanda L or Amanda R

- These visits can be either in person or virtual
- First year New hires need to complete 2 Visits



Postpartum Mental Health

Presented by
Danielle Gartner & Madeline Nash





Updated Forms

ITC Website: <https://www.itcmi.org/>

Departments > Maternal and Early
Childhood Services > Resource
Library > Program Forms

Forms Password: homevisiting



The screenshot shows the homepage of the Inter-Tribal Council of Michigan, Inc. The header includes the organization's logo, name, and tagline, along with a search bar. A dark navigation bar contains links for Home, About Us, Member Tribes, Departments, Newsroom, and Contact Us. Below the navigation bar is a large video player showing a group of people collaborating around a laptop, with the caption "Coming together was the beginning". To the left of the video is a "MEMBER TRIBES" section listing the Little River Band of Ottawa Indians, Bay Mills Indian Community, Grand Traverse Band of Ottawa and Chippewa Indians, and Hannahville Potawatomi Indian Community. To the right is a "Mission Statement" section with three numbered points: 1. To act as a forum for member tribes; 2. To advocate for member tribes in the development of programs and policies which will improve the economy, education, and quality of life for Michigan's Native Americans; and 3. To provide technical assistance to member tribes, assisting in the



Database Updates



Healthy Start Updates

-Budget Spend down by 3/31/22



THV GOALS & OBJECTIVES



GOAL 1:

Support the development of strong emotional and mental health among AI/AN children and families.



Goal 1, Objective 1a: By 9/29/2023, increase the number of partner sites from one to six that provide mental health support using a documented standardized process responding to positive EPDS/PHQ Screening.

Status: Ongoing

- 45 day progress referral tickler
- Social Support Visit Structure Training
- Family Spirit Strengths (Pilot)

Goal 1, Objective 1b. By 9/29/2023, at least 85% of program participants with an identified mental health need or risk will receive a high quality in-home supportive intervention-mothers and babies curriculum, one on one counseling, delivery specific lesson

Status: Ongoing

- *Question: Anyone using mothers and babies curriculum? Any Train the trainers ?*
- Family Spirit lessons determined by family and home visitor

GOAL 2:

Strengthen capacity of existing network of services for a comprehensive, high quality early childhood system.



Goal 2, Objective 2a: by 9/29/2020, then annually, each tribal partner implementation site will co-sponsor at least one early childhood professional development event in collaboration with at least two other programs

Status: Ongoing

- Please make sure to detail this in your quarterly report. The event and who you partnered with. (*We understand this may not happen until later in the year.*)
- Send Amanda Rinna copy of flyer.

Goal 2, Objective 2B: By 9/29/2020, complete a comprehensive program policies and procedure manual including elements and processes designed to ensure fidelity of implementation and standardization across all program sites, including quality assurance measures.

Status: Ongoing

- This is a top priority for ITC to complete this year.

Goal 2 Objective 2C: By 9/29/2021, each tribal partner implementation site will identify and make progress towards improved cross program collaboration such as joint case conferencing, data integration/sharing, or coordinated wrap around services.

Status: Ongoing

- *Do you have data sharing agreements with tribal Head Start Programs?*
- *Any other collaborative efforts?*

GOAL 3:

Ensure that services are implemented in a way that is grounded in the cultural way of life of the communities served.



Objective 3A, By 9/29/2020, enhance the projects capacity to provide culturally responsive services by establishing a systematic program support protocol featuring general cultural information as part of the new staff program orientation.

Status: Met

- Family Spirit Curriculum Training
- Gikinawaabi Curriculum training
- Embedded during Meetings.

OBJECTIVE 3B: BY 9/29/2020, ENHANCE THE PROJECTS CAPACITY TO PROVIDE CULTURALLY RESPONSIVE SERVICES BY PROVIDING ONE ANNUAL IN-DEPTH HOME VISITOR TRAINING.

- planning YELLOW SHAWL trainings with BETH MOODY (2 in-person, 2 virtual)
- Does anyone have suggestions or requests for the type of training you would like us to provide this year?

Objective 3C, By 9/29/2020, enhance the projects capacity to provide culturally responsive services by sponsoring a supportive cultural activity at each in-person program gathering.

Status: Met

- We do a good job at meeting this objective

GOAL 4:

Promote improved health status
among AI/AN children and families
in the project communities



Goal 4 Objective 4A: By 9/29/2023, increase the 6 month breastfeeding duration rate from 50% to 60%

Status: Ongoing

- We need to take a look at where we stand with this. It has typically been a strength of program.
- Breastfeeding Presentations (ITC)
- Breastfeeding Training (HV) *Certified lactation consultant?*

OBJECTIVE 4B: BY 9/29/2023, ACHIEVE A 20% INCREASE IN THE PERCENTAGE OF PARTICIPATING FAMILIES WHO RECEIVE AT LEAST ONE OF THE IDENTIFIED HEALTHY LIVING PROGRAM ELEMENTS AND/OR FS LESSONS (SCRIPT, NURTURE, OPIOID OR CANCER LESSONS).

Status: Ongoing

- ITC (Christy Thrasher) to provide training on OPIOID Modules in 2022
- Family Spirit Nurture
- ITC plans to revisit Cancer lessons in the near future.

CQI 2022
“Language & Literacy”

CONTINUED

Our CQI project

- Improving consistency in encouraging reading and other literacy activities during home visits
- Identifying a way to document efforts accurately in our data system
- Increasing the percentage of visits where early language and literacy is discussed with families from 23% to 35%



Final Results 2021

STUDY Stage

What did the data tell you? What did you learn?

The data collected informed that at baseline homevisitors were discussing language and literacy during visit 23% of the time. After implementing the “Do stage” which involved training around language and literacy we did see a 7% increase to 30% of visits having language and literacy discussed. However this did not meet the 12% increase goal of 35% of visits.

What surprised you?

Looking deeper at the data, one interesting factor that was noted had to do with looking at the breakdown of % of visits in relationship to client type. All client types saw an increase however, what we found was that visits documented under the child had a baseline of 30% and saw an increase to 37%. Prenatal clients had the lowest percentage increase (7% at baseline to 8.5%) of L&L discussed, which made sense to us considering pregnant clients may not have other children already in the home and typically more education around health and wellness is delivered during the prenatal period.

A look at what's next.... 2022

ACT Stage

Please check the box that applies:

- ☒ Adapt the change & test again
- ☐ Scale up the change & test again
- ☐ Adopt the change for your program
- ☐ Abandon the change & test a new change

Please explain your next step

- 1: Have a conversation with the Home Visitors to ask about any barriers during this cycle.**
- 2: Discuss how we can address these barriers (if possible)**
- 3. Test Again.**

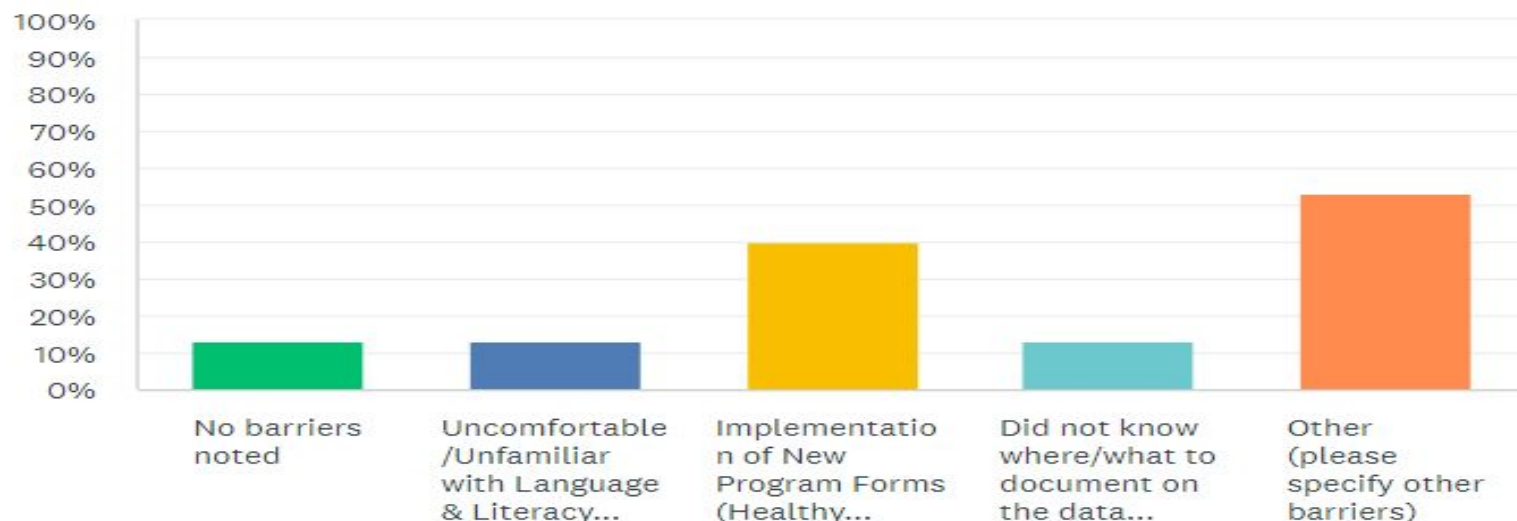
Did you team develop any resources to support this PDSA cycle? ☐ Yes ☐ No

If yes, what did your team develop?

Thank you everyone who submitted responses to survey.

During the 2021 language & literacy CQI cycle, what barriers (if any), influenced you having discussions about language and literacy during visits? Check all that apply.

Answered: 15 Skipped: 0



ANSWER CHOICES	RESPONSES
No barriers noted	13.33% 2
Uncomfortable/Unfamiliar with Language & Literacy discussion/activities	13.33% 2
Implementation of New Program Forms (Healthy Start Forms) took priority.	40.00% 6
Did not know where/what to document on the data system	13.33% 2
Other (please specify other barriers)	Responses 53.33% 8

During the 2021 language & literacy CQI cycle, what barriers (if any), influenced you having discussions about language and literacy during visits? Check all that apply.

Answered: 15 Skipped: 0

(8) Other, Please specify other barriers:

1. (NEW HV) Being new, I vaguely remember the training and I remember being very overwhelmed with everything and most of it going over my head at that time. I am definitely interested in learning more now.
2. (NEW HV) I went through FS orientation in July and must have missed information and instructions on this focus initiative. I did note in the database when I shared a book or discussed early literacy, but was unaware of the June training and did not learn of the details of the CQI.
3. (COVID) COVID was a huge barrier for me personally as I had COVID twice in three months and alot of families have had COVID as well. With that being said, families had other things that took priority over language and literacy (needing help with bills, needing help making doctor appointments, stressing about COVID and kids missing school, etc.
4. (Database Documentation) I did discuss literacy and highly encouraged early reading importance with families but was unable to locate in database beside the area to check that literature was handed out.
5. (Database Documentation) I always talked about literacy and encourages early reading importance even in the womb. Never could find where to document.
6. (Database Documentation) I would often forget to document it since it was a "write in" in the data system; it might be easier if it was a pre-written check box that we just had to check off (a small thing but would be a good reminder)
7. Forgetting to add in literacy to the forms if we even briefly discuss it. Trying to complete requirements for both HS/FS/MIHP
8. Too many other things to cover. If it happened to come up during the discussion or lesson I had planned then I documented it. But the paperwork often took precedence.

How can we address these barriers (if possible)? Check all that apply.

Answered: 15 Skipped: 0



ANSWER CHOICES		RESPONSES	
▼	No suggestion to address barriers	33.33%	5
▼	Provide more Training on Early Childhood Development	6.67%	1
▼	Provide more Training on database documentation	26.67%	4
▼	Additional Training around language and literacy program materials/tools	26.67%	4
▼	Other (please tell us how we can address barriers)	Responses 33.33%	5
Total Respondents: 15			

How can we address these barriers (if possible)? Check all that apply.

Answered: 15 Skipped: 0

(5) Other, Please tell us how we can address.

1. Add a certain space on the visit note specifically in reference to literacy addressed
2. All of the above would definitely be helpful for me. I would love more training on early childhood development and language and literacy program materials. I can pretty much figure out how to document it in the database, but I could use more training on the database in general.
3. Maybe offer a follow-up to a CQI training later in the cycle for those who missed it the first time around
4. with two programs and two forms/agendas that have to be met it is very difficult to get everything covered especially when clients do not keep visits monthly. We are only set up to do monthly visits and am not sure clients would be interested in doing them more frequently. MIHP and Healthy Start have become very different programs with very different agendas which is making it increasingly difficult to cover everything that is needed to be covered and paperwork that needs to be completed.
5. Add checkbox on program forms Handouts or tip sheets we can give to parents at each age (or highlight ones from ASQ activity sheets that are relevant to literacy)

Do you have any other suggestions that would help make this years CQI cycle "retesting language and literacy" more successful?

Answered: 12 Skipped: 3

1. Consistent reminders to add it in, as well as reminders to add not only to infants but also caregivers
2. would like to learn more about the information that was presented
3. making it a box in the forms under the education topics instead of having to free hand it in would help catch those that are missed due to error.
4. I talk about literacy almost every visit but sometimes forget to chart it.
5. Provide more books ? Native American children books would be nice. Provide leapfrog learning interactive games for children.
6. I think that it is discussed more often then probably charted d/t it not being a check box option and being a write in option. I think I talk with families about the importance of reading during several FS topics and I don't know if this is captured. For instance we talk about it at different age related time points, during routine lessons etc. and I just forget to write it in.
7. Provide more Native American children's book
8. Specific examples of what counts as talking about language and literacy - can it just be little things or a whole discussion about it?

NEXT CQI Team Meeting

March 9th @ 10:00-11:00 am

If you are not part of the CQI team and would like to be please let Amanda Rinna know 😊

We will be finishing updating PDSA tool with final plans for this years CQI project .