

CASE STUDY**Prioritizing Family Engagement in Louisiana****For Improved Early Childhood Collaboration****Louisiana Early Childhood Collaboration (ECC) Team Members:**

Representatives from the Title V Maternal and Child Health (MCH) Program; Maternal, Infant and Early Home Visiting (MIECHV) Program; and Early Childhood Comprehensive Systems (ECCS) IMPACT Program.

Background:

The Bureau of Family Health within the Louisiana Department of Health, Office of Public Health, is Louisiana's Title V administrative agency. The Bureau of Family Health has several programs, including the ECCS IMPACT Program and the MIECHV Family Support and Coaching Program. Historically, teams worked largely in silos. However, over the last few years, programs started coordinating with each other in an intentional way and identifying potential areas where their visions align. One aspirational, shared vision for all three programs and their networks of partners has been to develop a comprehensive early childhood system in Louisiana that will enable all families to receive all supports they need, when they need them. This vision would allow families to experience a “no wrong door” entry into a coordinated system of early childhood services that is tailored to their unique needs. “No wrong door” means that all families can link to necessary services and supports, in the order they choose to access them, including supports not directly related to the health care system.

The Louisiana Title V program has had a long history of family engagement with the Children and Youth with Special Health Care Needs programs. However, family engagement was not consistently an integral part of MCH-focused efforts. Beginning with the 2016–2020 MCH Title V Block Grant cycle, the Bureau of Family Health developed a dedicated workgroup and State Performance Measure to improve family and community engagement efforts across all programs. The Louisiana ECC team used this technical assistance (TA) opportunity to implement AMCHP's Roadmap for Early Childhood Systems Coordination to enhance these family engagement efforts and move toward building a family-centered early childhood system.



Journey to Accelerate Improvements in Early Childhood Outcomes through Enhanced Collaboration

The following were the steps taken to improve collaboration among Louisiana's Title V, MIECHV, and ECCS programs to build a family-centered approach to partnership.

Deciding on a shared destination (priority).

Before convening the first in-person meeting, the Louisiana team used a list of existing collaborative early childhood focus areas to identify their top priority. They prioritized creating a "no wrong door" framework, by which families enter a Louisiana system of early childhood services when the family feels it is a priority and a need. The team later realized, however, that their shared overall early childhood systems' vision was based on the team's own assumptions rather than the lived experience of families.

After acknowledging that their individual assumptions were flawed, the team decided to narrow the scope of their project so that the focus became listening to families' voices. They then revised the shared priority to be: ***"Valuing family partnership is a culture for the organization, demonstrated through policy, investment, concrete processes, education, and evaluation."***

Identifying and mapping the early childhood system actors.

During the first TA meeting, the Louisiana team conducted a key stakeholder mapping of the broader early childhood system in Louisiana using the FSG actor mapping method. This activity helped team members realize that some of the common language and terms they used meant something different to each team member. This activity also prompted the team to discuss whether it made sense to put every early childhood organization on the system actor map or just those organizations the team believed would be immediately ready to partner together to affect change. This discussion was transformational for the team.

Some underlying struggles included an internal debate about how they would be able to alter what the team had already tried to do before with minimal success. After mapping all the early childhood actors, a team member astutely observed that the map and the myriad of jumbled strands showing different types of connections reflects the extremely complicated system that families must navigate to access services and supports. From this observation, the team reaffirmed its commitment to ensure families' needs and priorities drive the team's work.

Assessing the internal and external conditions for systems change.

As stated previously, the Louisiana team agreed to focus on a "no wrong door" framework and to prioritize families' needs in their early childhood work. The "Water of Systems Change" action learning exercise provided two points of clarity for the team. First, that an initial scope of work needed to focus on improving the team's processes for early childhood systems collaboration. Second, that the "no wrong door" framework was their ultimate shared vision and that the team must figure out how to come together to determine the action steps for accomplishing this vision.

Looking at the systems conditions that were preventing progress toward the shared priority, the team agreed they needed to better understand what families need and what systems of care would look like if they were to work *for* families. Families themselves needed to define these needs. The team identified several broad questions and themes, as follows:

- Systems must be designed with and for the families they serve
- The needs of *all* families must be understood, including families that the Bureau of Family Health is not currently serving
- Partnerships with families at all levels of systems change is needed, from the point of service design and program evaluation to policy development and implementation

The team worked hard to clarify their revised focus for the rest of the TA opportunity and plan their next steps.

Fueling up for Action Planning.

Immediately following the first TA meeting, the Louisiana team decided to complete the “Waters of Systems Change” exercise a second time and then finalized their shared priority aim as:

Create an organizational culture that values family partnership that is evidenced by policy, investment, concrete processes, education, and evaluation.

The team intentionally framed the priority as “family partnership” rather than “family engagement” because systems change will require moving beyond one-sided family engagement activities, such as focus groups and surveys. Systems change will also require shared decision-making that involves families and collaborating in a mutually beneficial way.



To gain a better understanding of current policies, practices, attitudes, and beliefs in the Bureau of Family Health around family partnership, the team collaborated with the existing Title V Family Engagement workgroup to develop and disseminate a Family Partnership Readiness survey to key decision-makers and staff in the Bureau of Family Health. The survey included questions about prioritizing family partnership, investing in and creating a culture of family partnership, changing policies, and ensuring accountability through evaluation. The team also mapped the survey questions to the three levels of the “Waters of Systems Change” model to identify areas of focus for the next action planning session.

The survey results revealed broad support for and understanding of the value of family partnership. However, significant barriers to implementing meaningful family partnerships agency-wide include the lack of a unified definition, formal infrastructure, policies, and processes.

Where the Rubber Meets the Road—Action Planning for Next Steps.

The Louisiana team’s action plan for accomplishments within 6 months of the second TA meeting focused on setting the foundation for building a culture of family partnership within the Bureau of Family Health. Key steps in the action plan included:

- Merging existing Title V and Health Equity family and community engagement workgroups and strategic plans
- Recruiting additional workgroup members
- Conducting environmental scans of family partnership definitions, resources, leading models and best practices, performance measures, and evaluation tools
- Defining family partnership and identifying grounding framework(s).

Maintaining the Collaborative Momentum.

Since drafting the action plan, the Louisiana team:

- *Held a meeting with the Bureau of Family Health leadership and key decision-makers to review the results of the family partnership survey in the context “Water of Systems Change” framework.* AMCHP staff provided a brief overview of the “Waters of Systems Change” model and facilitated a discussion on next steps for the Bureau of Family Health to move their family partnership work from a state of readiness to a state of meaningful action.
- *Supported the development of a family-partnership-focused Title V Priority Need and State Performance Measure.* The 2020 Title V Needs Assessment highlighted the need to improve family and community engagement at all levels of systems change, regardless of the population of focus. The needs assessment also showed that a robust collaborative effort is needed to build the Bureau of Family Health’s organizational capacity to support ethical, meaningful engagement. The Louisiana team used this opportunity to merge the existing family engagement workgroups and develop a new State Performance Measure and action plan for the Title V 2021–2025 Block Grant cycle. The new State Performance Measure utilizes the Organizational Commitment section of the Family Voice’s [Family Engagement in Systems Toolkit \(FESAT\)](#) and provides accountability and benchmarks as the Bureau of Family Health works to institutionalize family partnership as a foundational component of all systems change initiatives.

- *Attended the Fall MCH Skills Institute to support implementation of the refined action plan.* The Skills Institute helped the team integrate fresh perspectives for implementing the action plan and recruiting new workgroup members. Although the new participants were eager to contribute, the workgroup was limited in capacity to move the work forward at the Bureau-wide level. Each program at the Bureau of Family Health has unique needs, which made defining the family partnership work across the Bureau challenging. To help build momentum and gain clarity on the work remaining, the team decided to narrow the focus and pilot a family partnership strategy within one Bureau of Family Health program.
- *Applied for the ECCS: Health Integration Prenatal-to-Three Program grant.* The grant development process presented an opportunity to build upon the broader Title V state action plan and design a family partnership strategy with a clearly defined focus within the scope of an early childhood systems project. Whether or not the Bureau of Family Health is awarded the ECCS grant, the Louisiana team plans to continue the ECCS, MIECHV, and Title V collaboration to move their shared family partnership priority forward with a more narrow early childhood systems focus.

In early 2023, AMCHP staff followed up with the Louisiana team to learn about their progress since applying for the new iteration of the ECCS project. The Louisiana team's proposal for the ECCS project was successful, and they have been awarded the grant. Currently, they are working on implementing their project.

Most notably for their collaborative efforts, the Louisiana team has leveraged the opportunity that their ECCS award has created to transform their approach to family and community engagement across their early childhood programs within the Bureau of Family Health. Specifically, the team has shifted towards a targeted universalism approach, which aims to achieve health equity for all children across the state by considering the unique needs and circumstances of different population groups. To begin implementation of this approach, the team invested time in learning about best practices for engaging families and communities and then used state-level data to identify which subpopulations would be the initial focus of their work. Consistent with the principles of the targeted universalism approach, the Louisiana team has been intentional in engaging with families of young children who have historically been underrepresented or marginalized in the healthcare system. Through their engagement efforts, the team has sought to center the experiences of families with early childhood healthcare systems, with a particular focus on understanding any barriers they have encountered and potential strategies for addressing these barriers and improving their overall healthcare experiences. This input has been crucial in informing the team's approach to implementing policy, practice, and process changes aimed at improving health equity and outcomes for all Louisianans.

How is the collaboration with Title V and MIECHV continuing?

The ECCS project's collaboration with Title V and MIECHV programs has been ongoing since the Louisiana team's shift towards a targeted universalism approach. Although there have been some staff role changes, all three programs share a common understanding of the updated approach to family and community engagement.

While the ECCS and Title V programs are leading the systems change efforts for implementing and utilizing a targeted universalism approach (i.e. policy, practice, and process changes), the MIECHV program is focused on the on-the-ground implementation of the approach as they provide direct services to children and families across the state. Lessons learned from MIECHV's implementation experience will be scaled and spread to other early childhood services across the state.

The collaboration between the three programs continues to include sharing of resources, strategies, and best practices. Additionally, the advisory board of MIECHV has provided a direct link for communication and collaboration between the programs. This ongoing collaboration between ECCS, Title V, and MIECHV programs has been instrumental in ensuring that the targeted universalism approach is being effectively implemented across Louisiana.



STATE PERSPECTIVE:

The Value of Collaboration.

Dedicating time to strategize on how best to collaborate around a shared priority was an important catalyst in moving Louisiana's team toward institutionalizing and normalizing family partnership in their organization. Although family partnership was not the original focus of the project, utilizing the framework for improved collaboration deepened the team's understanding of the pivotal role of family partnership in systems change in early childhood and beyond. The team saw significant value to improved collaboration, especially with respect to strong relationships and infrastructure building.

By utilizing the framework for improved collaboration, the team developed a mutual understanding and respect for the difficulty and importance of this work. Despite setbacks and uncertainty related to the COVID-19 pandemic, the Louisiana team continued to be champions for prioritizing family partnership and supports for each other. The team revised the original action plan several times over the past year, but the shared early childhood systems vision and family partnership priority continue to serve as a beacon for collaborative efforts among ECCS, MIECHV, and Title V.