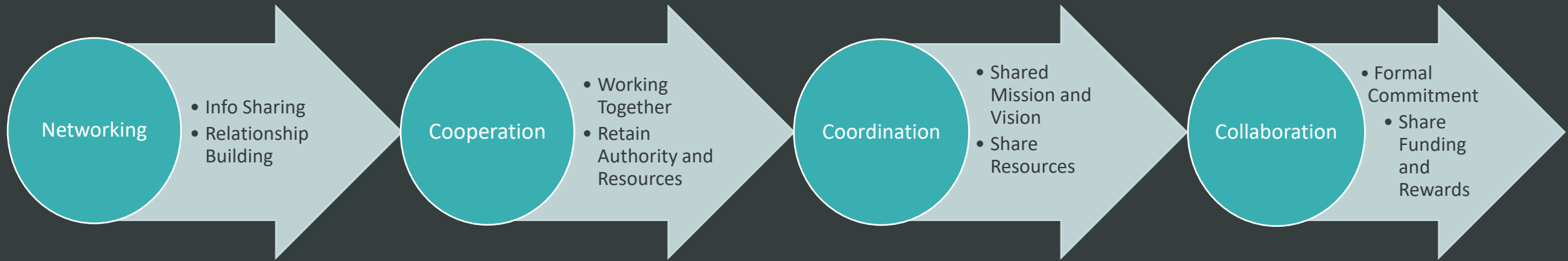


From Networking to Action

HOW ONE RURAL COALITION IS IMPACTING THE EARLY CHILDHOOD HEALTH CARE SYSTEM

Collaboration Continuum



How did we move along the
continuum?

2011



Who needs to be
at the table?



Lunch and Learn
meetings



2013



Mission and
Vision
developed



Strategic
Planning



2014-15



Combined to
form a larger
coalition



Branding
and Logo



Who is at our table?

- Public Health Department – WIC (Women, Infants and Children)
- Community Health Centers – Sun Life Family Health
- U of A Cooperative Extension – Developmental, Hearing, Vision and Dental Screenings
- Banner Health Care – Two birthing hospitals
- AZ Complete Health
- Easter Seals Blake Foundation – Smart Support
- Horizon Health and Human Services

Mission

Collaboration of Early Care and Education, Family Support and Health Care systems to promote information sharing amongst service providers, in turn improving the foundation of support for families with young children in the Pinal Region.

Vision

Vision: The First Things First Pinal Regional Health Care Coalition envisions a health care community focused on families and children using a holistic approach.

With Care That Is -

Protective

Passionate

Coordinated

Trustworthy

High Quality

Preventative

Appropriate

Competent

Sensitive

Culturally Diverse

And Empowering

What were our challenges and successes?

Challenges

- Private Practice
- Distance and Travel
- Keeping Partners Engaged

Successes

- Partnership with Banner Health Care
- U of A Screenings in WIC Offices
- The Health and Wellness Passport

The Health and Wellness Passport



Strategy Definition: A booklet developed in collaboration to help increase communication between public health agencies and the private medical community.

Identified Need: Lack of communication/coordination avenues and opportunities came up in survey responses, interview answers and needs assessment discussions by the coalition.

Objective: Provide a tool and record for parents; increase communication between families and health care providers, and identify need for intervention services.

Outcomes:

- Evidence that the passports are being used in medical practices
- Increase in resources being accessed
- Increase in immunization rates for young children
- Increase in integration between medical health, behavioral health, and AzEIP

Tasks:

- Break down categories and ages – March 2015
- Look at the Parent Kit to avoid duplication – March 2015
- Explore examples and best presentation – May 2015
- Develop templates – September 2015
- Get printing quotes – October 2015
- Develop vetting process for families – October/November 2015
- Vetting process with families for feedback – December 2015
- Negative response = end strategy, Positive response = move forward with next steps – January 2016
- Print Passports through Office Max – March 2017

Tasks:

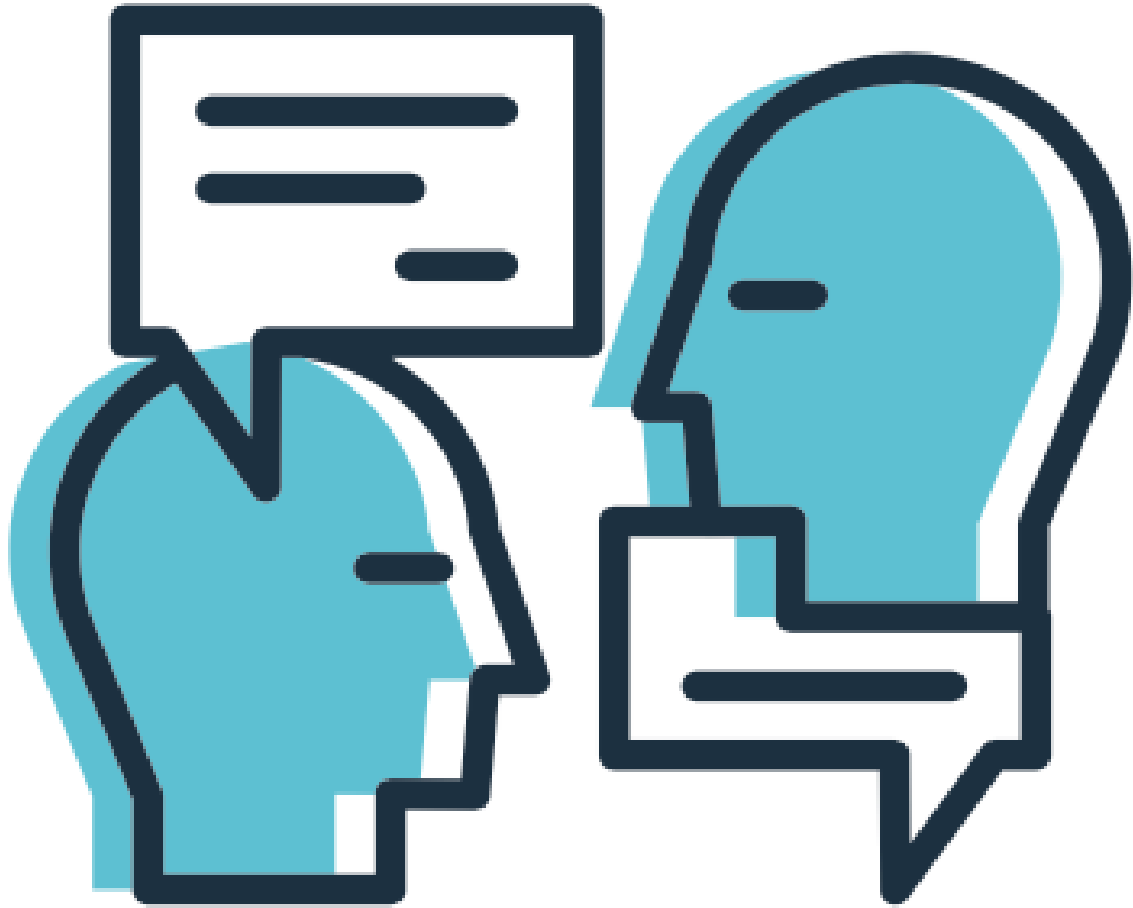
- Introduce Passport to Pinal Pediatricians and Family Doctors – April 2017
- Deliver Passports to hospitals and Sun Life – May 2017
- Plan Secondary Distribution for Dependency Children – June-July 2017
- Develop survey and a flyer to garner feedback – January 2018
- Develop plan for educating medical practices on how to connect to resources – May 2018
- Evaluate Distribution and Use – April 2019
- Continue education on the use of the Passport – Ongoing

How is the Passport used today?

- Banner Casa Grande and Banner Ironwood send the passport home with all new mothers
- Sun Life includes the passport in the 35 week bags for expecting mothers
- Pediatricians use them in their practice and hand them out

How is the Passport used today?

- DCS uses the passport with new investigations for children under 3, kinship placements and in home placements
- Home visitation, screening programs and dependency attorneys hand them out



**Any
Questions?**

Thank you!

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