Engaging and Expanding Healthy Start Grantee Leadership

Division of Healthy Start and Perinatal Services

Department of Health and Human Services
Health Resources and Services Administration
Maternal and Child Health Bureau

1

Webinar Presenters

- Kimberly Sherman, HRSA, Healthy Start

- Yvonne Hamby, JSI/EPIC Center

Webinar Presenters

- Lea Ayers LaFave, JSI/EPIC Center

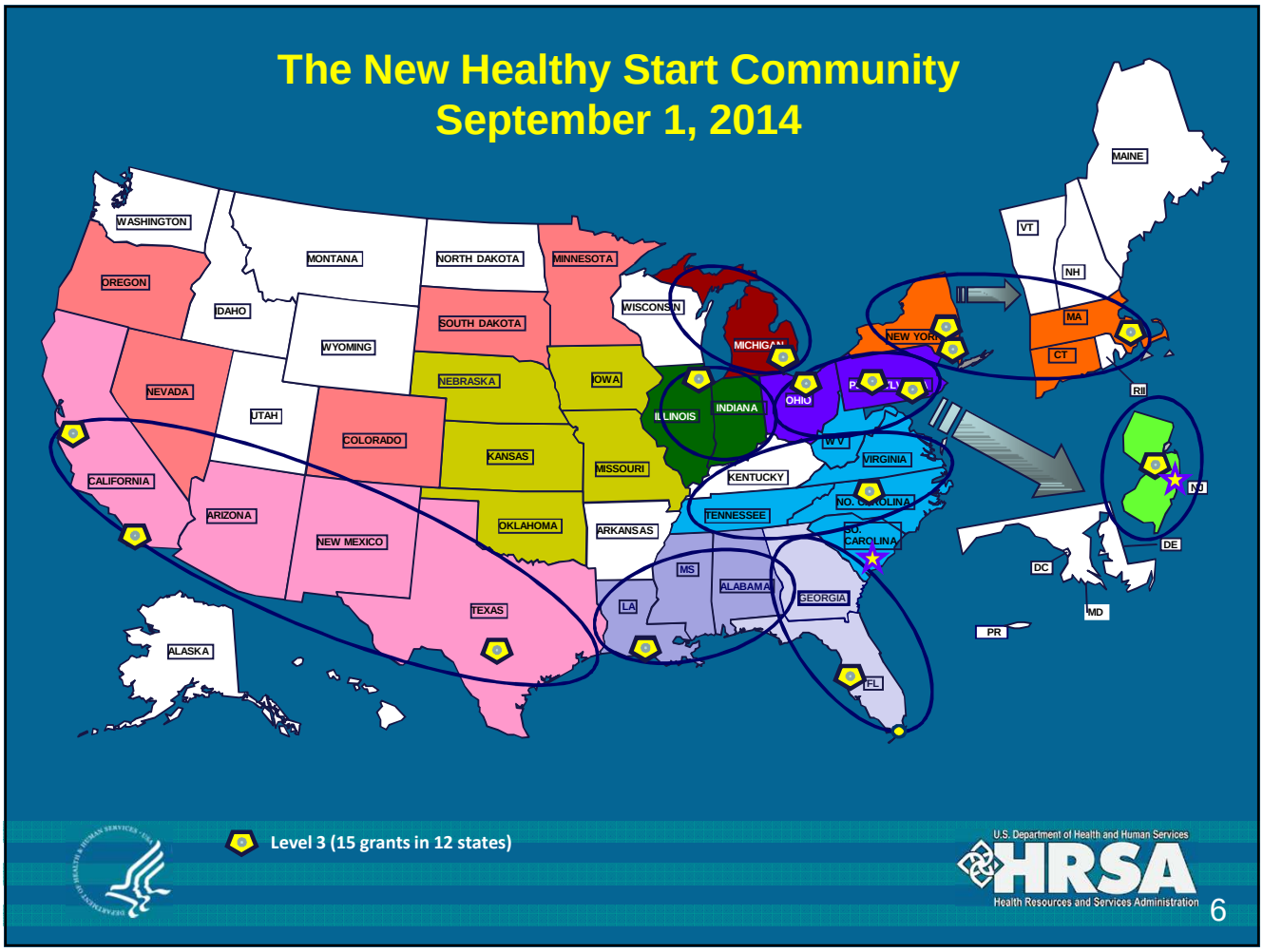
- Kathleen Thies, JSI/EPIC Center

LEARNING OBJECTIVES

- Describe the roles and responsibilities of Health Start Level 3 Grantees
- Describe expectations of Level 3 Grantees including time commitment
- Describe the function of the Healthy Start CoIIN
- Describe the competencies that will be developed through your work as a Level 3 Grantee
- Identify appropriate representatives from your organization to attend the pre-conference Quality Improvement/Leadership Institute

AGENDA

Time	Topic	Presenter
1:00 – 1:15	Welcome/Presenter Introductions	Kimberly Sherman
	Review of Objectives & Agenda	Yvonne Hamby
1:15 - 1:30	Roles and Responsibilities for Level 3 Grantees	Kimberly Sherman
1:30 – 1:40	Overview of Healthy Start CoIIN	Lea Ayers LaFave
1:40 – 1:45	Q & A	Moderator
1:45 – 2:05	Expectations for Level 3 Grantees and Competencies for Healthy Start CoIIN Representatives	Kathleen Thies
2:05 – 2:15	Next Steps: Overview of Institute	Lea Ayers LaFave
2:15 – 2:30	Q & A	Moderator


The New Healthy Start Community
September 1, 2014
WASHINGTON
OREGON
CALIFORNIA
NEVADA
IDAHO
MONTANA
WYOMING
UTAH
ARIZONA
COLORADO
NEW MEXICO
NORTH DAKOTA
SOUTH DAKOTA
NEBRASKA
KANSAS
OKLAHOMA
TEXAS
MINNESOTA
IOWA
MISSOURI
ARKANSAS
LOUISIANA
WISCONSIN
ILLINOIS
MICHIGAN
INDIANA
OHIO
KENTUCKY
TENNESSEE
MISSISSIPPI
ALABAMA
GEORGIA
FLORIDA
SOUTH CAROLINA
NORTH CAROLINA
VIRGINIA
WEST VIRGINIA
NEW YORK
MAINE
VERMONT
NEW HAMPSHIRE
MASSACHUSETTS
CONNECTICUT
RHODE ISLAND
NEW JERSEY
DELAWARE
DC
MARYLAND
PUERTO RICO
ALASKA
Level 3 (15 grants in 12 states)
U.S. Department of Health and Human Services
HRSA
Health Resources and Services Administration
6

5 Key Approaches to Healthy Start

1. Improve Women's Health
2. Promote Quality Services
3. Strengthen Family Resilience
4. Achieve Collective Impact
5. Increase Accountability via Quality Improvement, Performance Monitoring, & Evaluation

U.S. Department of Health and Human Services
HRSA
Health Resources and Services Administration

Level 3 Roles & Responsibilities

✓Must implement all Level 1 & 2 Activities

AND

1. Provide expanded MCH services
2. Develop a place-based initiative

Roles & Responsibilities

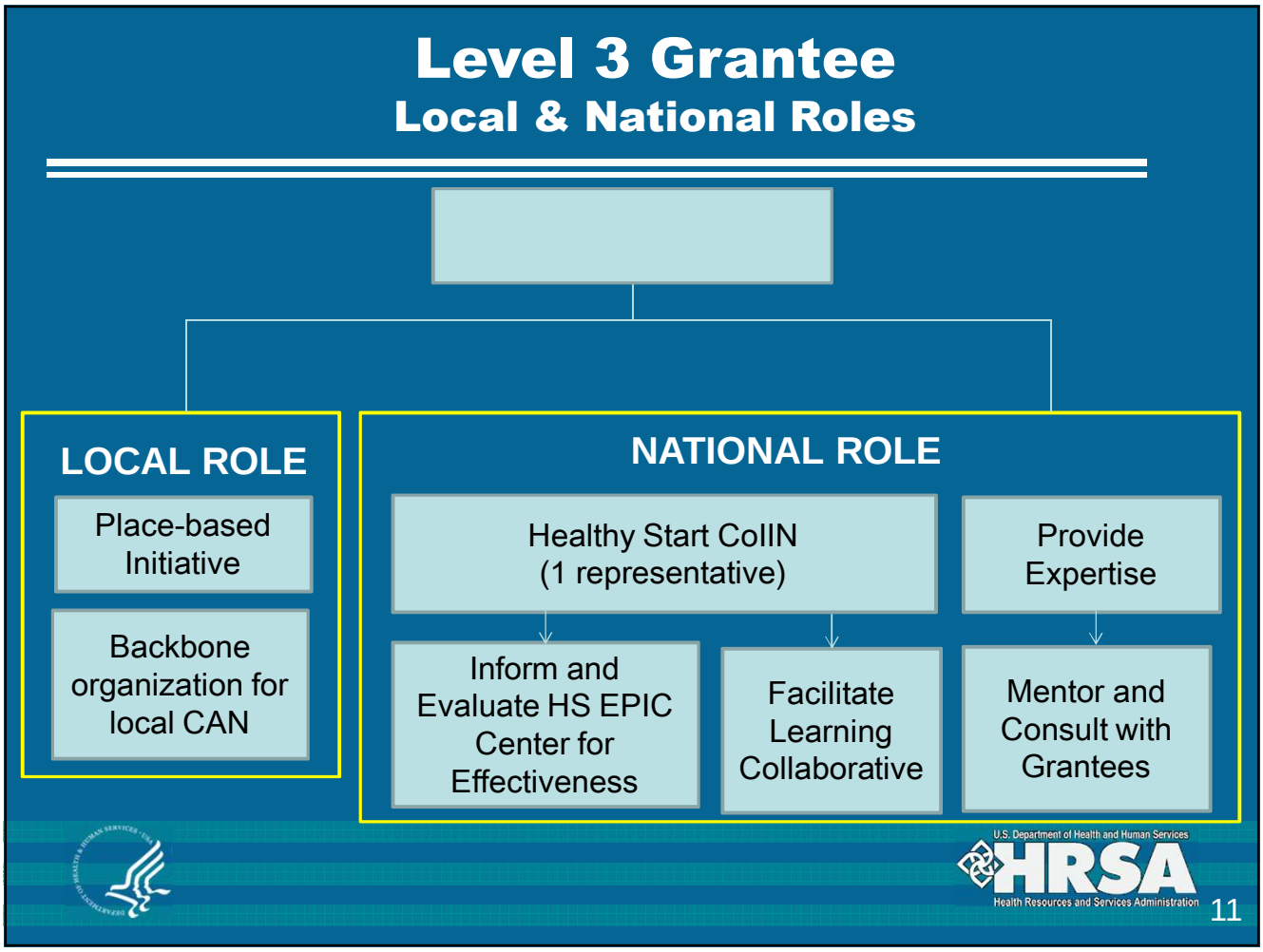
3. Serve as a resource site for state, regional, and national action in support of improving perinatal outcomes.
4. Serve as leaders and participate in the development of state/regional/national programs and policies.

Roles & Responsibilities

5. Actively participate in the development and implementation of the HS Collaborative Innovation & Improvement Network (HS CoIIN).

U.S. Department of Health and Human Services
HRSA
Health Resources and Services Administration

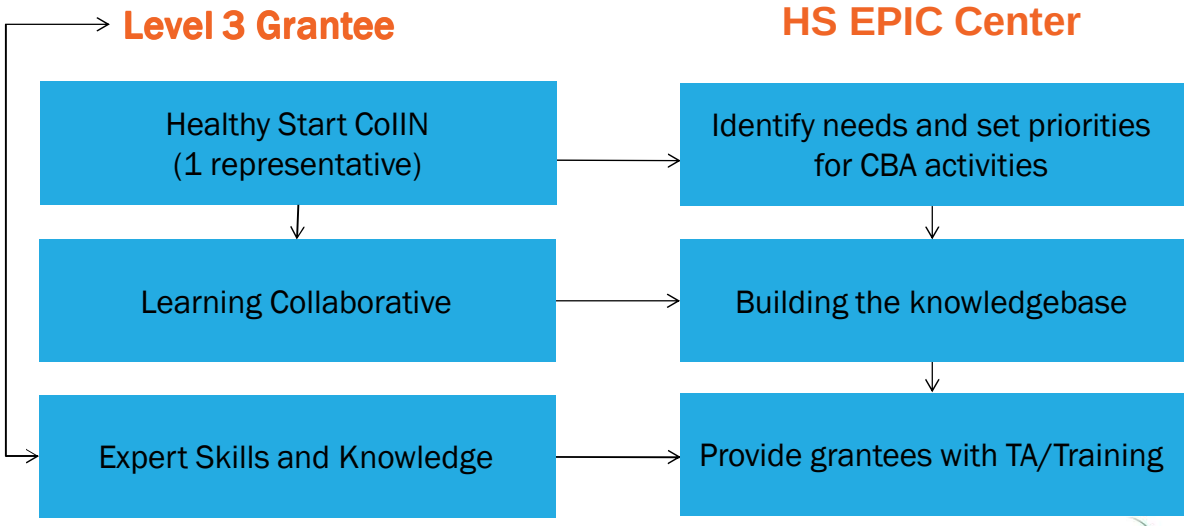
Level 3 Grantee
Local & National Roles



U.S. Department of Health and Human Services
HRSA
Health Resources and Services Administration

11

ROLE OF LEVEL 3 GRANTEES IN INFORMING HS EPIC CENTER ACTIVITIES

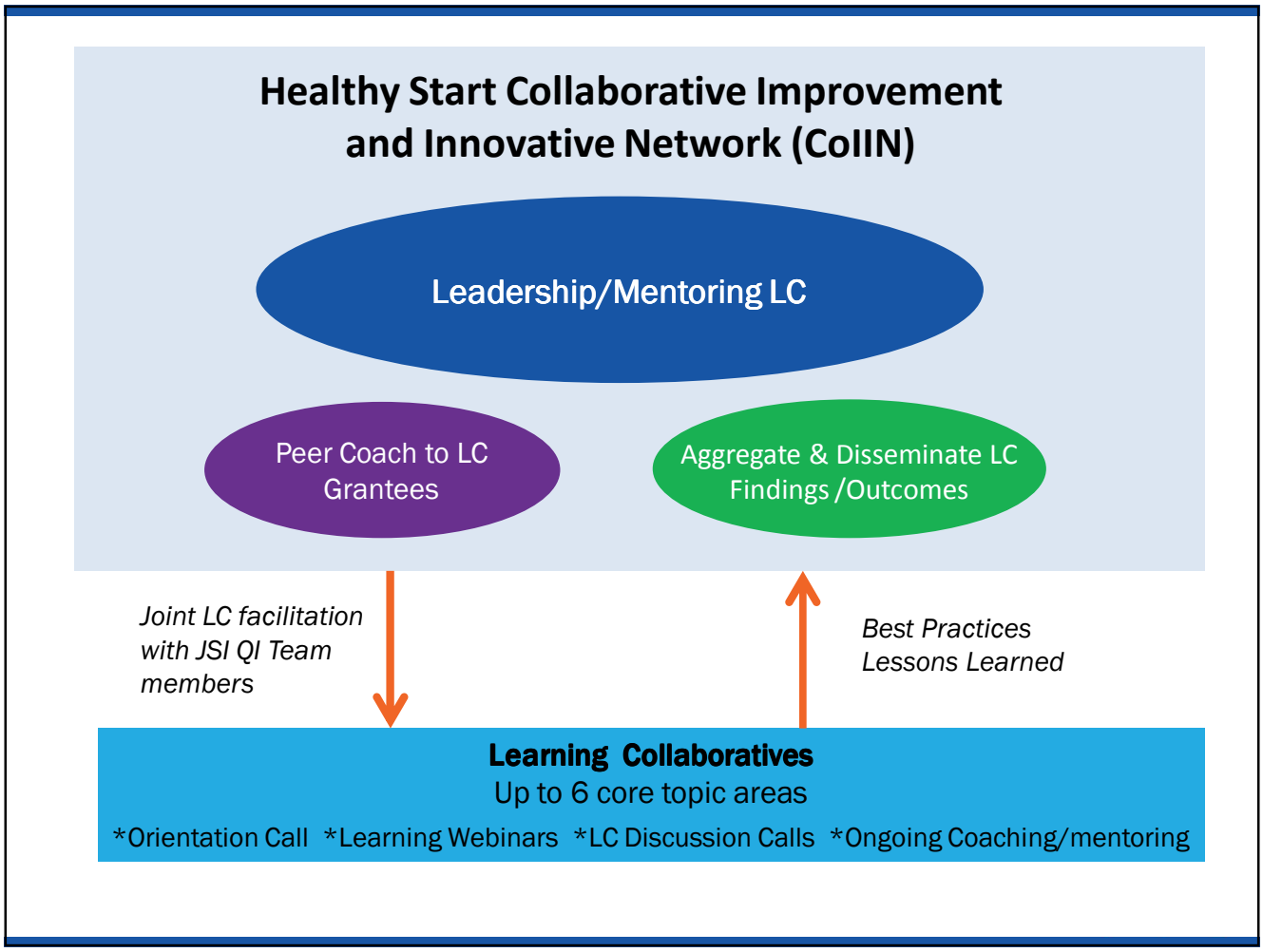


HEALTHY START COLLABORATIVE IMPROVEMENT & INNOVATION NETWORK

Purpose: The HS Collaborative Improvement & Innovation Network (CoIIN) provides a forum for coordinating initiatives to improve the effectiveness of the Healthy Start Community.

Responsibilities:

- Identify needs and set priorities for expanding the HS knowledgebase
- Promote program improvement and track impact
- Disseminate best practices and lessons learned to HS Community


Healthy Start Collaborative Improvement and Innovative Network (CoIIN)
Leadership/Mentoring LC
Peer Coach to LC Grantees
Aggregate & Disseminate LC Findings /Outcomes
Joint LC facilitation with JSI QI Team members
Best Practices Lessons Learned
Learning Collaboratives
Up to 6 core topic areas
*Orientation Call *Learning Webinars *LC Discussion Calls *Ongoing Coaching/mentoring

EXPECTATIONS OF LEVEL 3 GRANTEES

Staff Person	Function	Level of Effort
HS CoIIN Representative	HS CoIIN	Quarterly day-long face-to-face meetings
Learning Collaborative (HS Representative)	Learning Collaborative	3 days per month – webinar participation
Expert Consultation (various staff)	Expert Consultation	Up to 25 days a year

QUESTIONS AND ANSWERS

CORE COMPETENCIES FOR GRANTEE REPRESENTATIVES TO THE HEALTHY START COIIN

How these relate to Maternal Child Health (MCH) and Healthy Start Program Competencies

The HS program aims to reduce disparities in infant mortality and adverse perinatal outcomes by:

1) improving women's health,
2) promoting quality services,
3) strengthening family resilience,
4) achieving collective impact, and
5) increasing accountability through quality improvement, performance monitoring, and evaluation.

MCH COMPETENCIES

1. Leadership and Systems Thinking
2. Policy Development/Program Planning
3. Communication
4. Cultural Competency
5. Community Dimensions of Practice
6. Public Health Sciences
7. Financial Planning and Management
8. Analytical/Assessment Skills

LEADERSHIP

- Knowledge and skills in leadership and coaching
- Leadership versus management

MCH LEADERS…

- Understand and support MCH values, mission and goals with a sense of purpose and moral commitment
- Value interdisciplinary collaboration
- Think critically at the level of populations and individuals
- Have core knowledge of MCH populations
- Seek to learn new knowledge and develop new skills
- Demonstrate professionalism

http://devleadership.mchtraining.net/mchlc_docs/mch_leadership_comp_3-0.pdf

LEADERSHIP AND COACHING

Coaching is…

"a process that enables learning and development to occur and thus performance to improve. To be a successful a Coach requires a knowledge and understanding of process as well as the variety of styles, skills and techniques that are appropriate to the context in which the coaching takes place"

Eric Parsloe, *The Manager as Coach and Mentor* (1999)

COACHING

Coaching Functions

- QI catalyst
- Collaboration builder
- Strategic thinker
- Facilitator
- Measuring advocate
- Objective assessor

Coaching Skills

- QI expertise
- Communication
- Operations
- Self-awareness
- Adaptive

Coaching Competencies
http://nationalqualitycenter.org/download_resource.cfm?fileID=37285

LEADERSHIP VS. MANAGEMENT

Subject	Leader	Manager
Essence	Change	Stability
Focus	Leading people	Managing work
Horizon	Long-term	Short-term
Approach	Sets direction	Plans detail
Decision	Facilitates	Makes
Culture	Shapes	Enacts
Dynamic	Proactive	Reactive
Style	Transformational	Transactional
Direction	New roads	Existing roads

http://changingminds.org/disciplines/leadership/articles/manager_leader.htm

ANALYTICAL/ASSESSMENT SKILLS

- Analytical/Assessment Skills
  - QI methods
  - Evidence-based practice
  - Implementation strategies and their measurement and evaluation

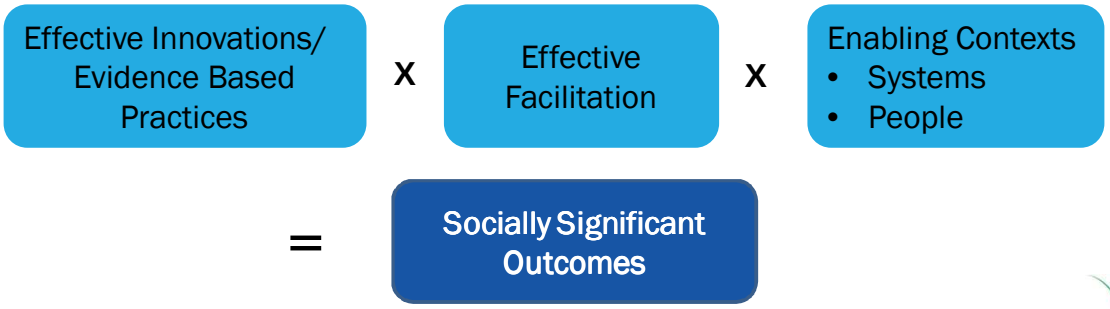
Without data all anyone has is an opinion.
Edward Deming

QI METHODS AND SKILLS

- How to assess and measure current practice against benchmarks
- Walk through your services through the participant's eyes
- How to use process maps, root cause analysis, fishbone charts, the Value Compass
- How to develop global and specific aims
- How to measure those aims
- PDSA cycles

IMPLEMENTATION STRATEGIES

- **Successful implementation is most likely to occur when:**
  - Scientific evidence is viewed as sound and fitting with professional and patient/participant beliefs (e.g., evidence based interventions)
  - The context/setting is receptive to implementation in terms of supportive leadership, culture and evaluative systems
  - There are appropriate mechanisms in place to facilitate implementation



IMPLEMENTATION: MEASUREMENT AND EVALUATION

- Outcome versus process measures
- Including measures in your aim statements
- Refresher on basic descriptive statistics
- Primer on control charts
- Creating dashboards and score cards
- Implementation and evaluation as iterative processes
- Evaluating patient outcomes versus implementation strategies

NEXT STEPS IN PREPARING FOR INSTITUTE

- Individual capacity assessment: When you register for the Institute, you will get a link for a tool to assess existing capacity and learning needs of L3 Grantees. This should be completed by each Healthy Start CoIIN representative by November 7th.

The Institute (November 18-19) – What to Expect	
Initial education and training – based on individual assessments	• Systems thinking • Leadership • Coaching • Quality improvement
Grantees/Healthy Start and JSI team: preparing to work together	• Overview of Convention • Expected focus areas for learning collaboratives • Criteria and process for matching Level 3 Grantees' expertise/interest to enhance EPIC Center • Establish guidelines for communication and process going forward

- Who should attend the Institute?
  - Up to 3 attendees including Project Director and Healthy Start CoIIN Representative/LC Coach

Questions and Answers

For More Information

Division of Healthy Start and
Perinatal Services
Main: (301) 443-8283
or
Contact the assigned Project Officer for
your grant

U.S. Department of Health and Human Services
HRSA
Health Resources and Services Administration

30