

What About the Babies? Building a Bridgeport “Baby Bundle” Ecosystem



Allison Logan, BS-ED, MS
Executive Director



Bridgeport, Connecticut

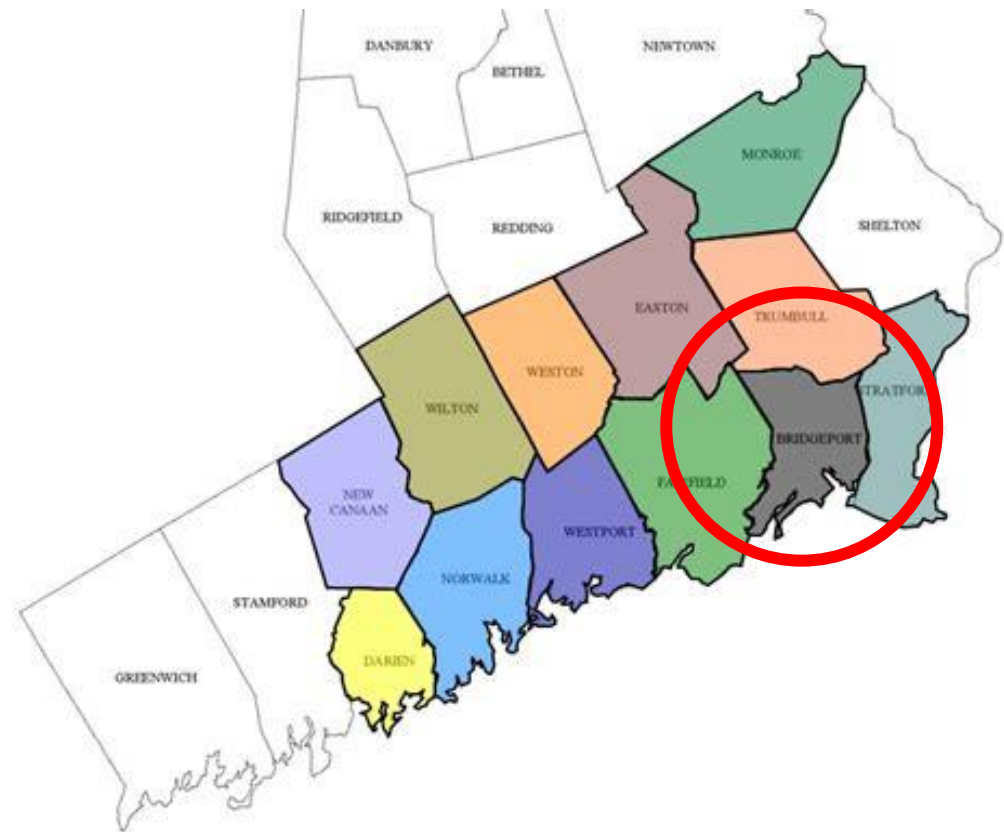


Population: 145,934

Children 0-21: 33,634

99.9% Free and Reduced Lunch

Bridgeport is a city surrounded by the wealthiest cities/towns in the state and the nation. The disparities in outcomes for children and youth in Bridgeport, compared to their neighbors, are known as the largest achievement/opportunity gaps in the country.



In Bridgeport, we started by back-mapping the data...



The data showed us we HAD to start with the babies!

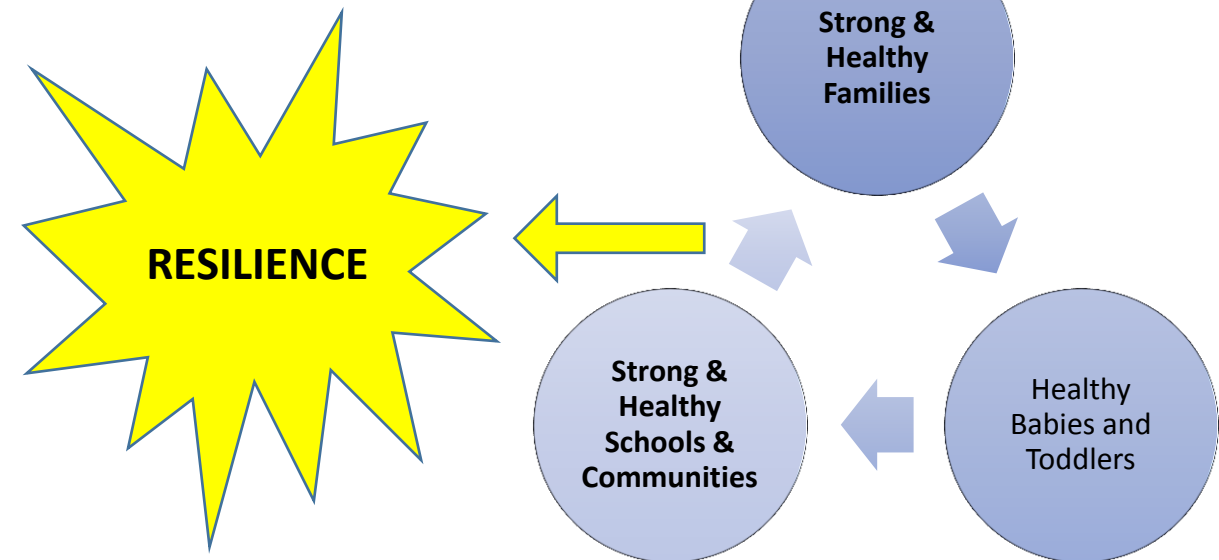
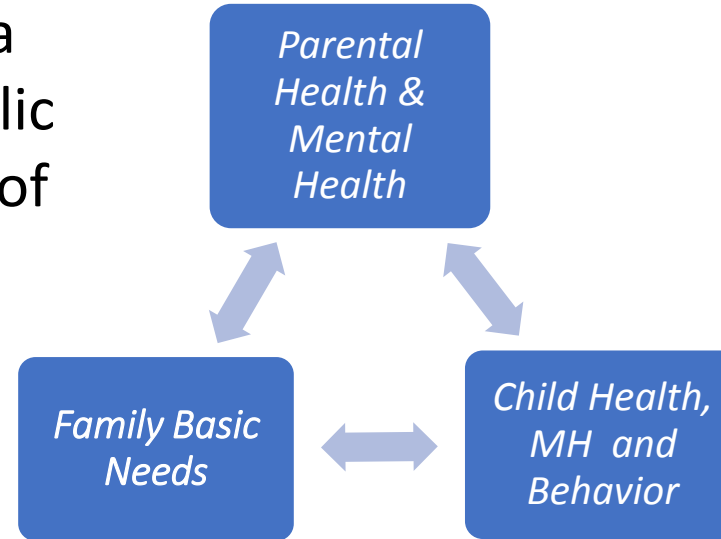
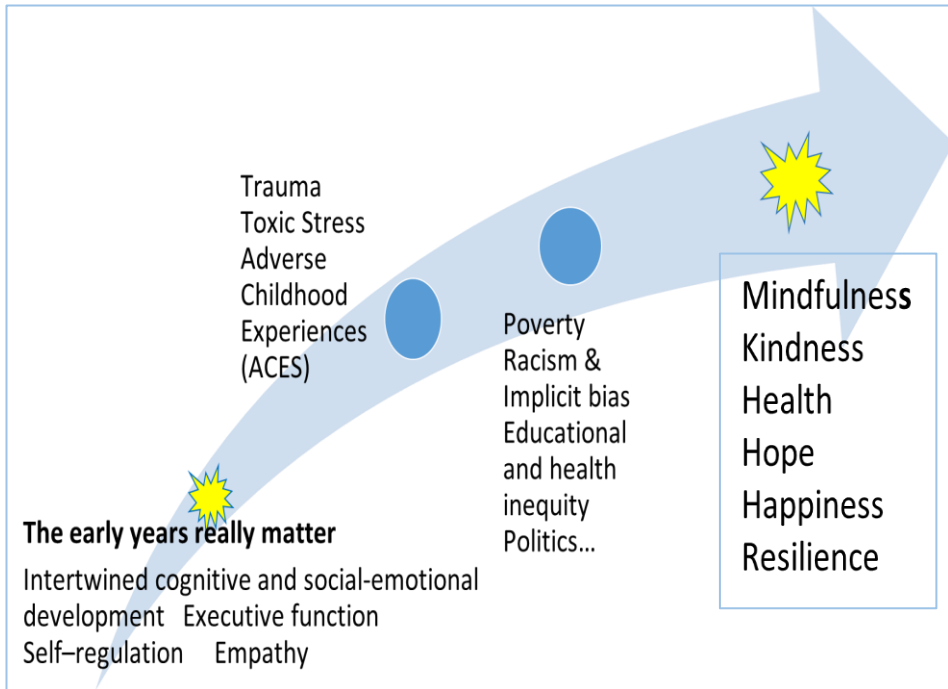
- ❑ 8.7% of 5th graders proficient in math
- ❑ 23.9% of 3rd graders reading at level
- ❑ 3 in 10 entering K- school ready
- ❑ **75% of three-year-olds enter Head Start BEHIND (2016)**
- ❑ **21% no or inadequate prenatal care**
- ❑ **63% of the city's 1800-2000 yearly births are Medicaid funded**

We focused on the science...

Our Community Action Network had a strong commitment to increasing public understanding of the (neuro) science of adversity, health and resilience



Key Concepts: Toxic Stress. Harvard Center on the Developing Child, Retrieved July 2015



BRIDGEPORT PROSPERS

Chapter 2



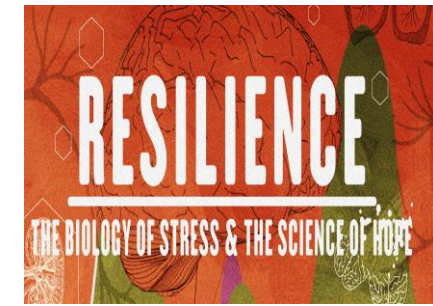
June 2016
Summary Report
Birth - 3 CAN
Pre-K - 3rd CAN

LIVE UNITED.



B - 3 CAN
PK - 3rd CAN
Technical Reports

2015
2016
2017
2018



We use
a data-informed, truth-
to-power community
impact process

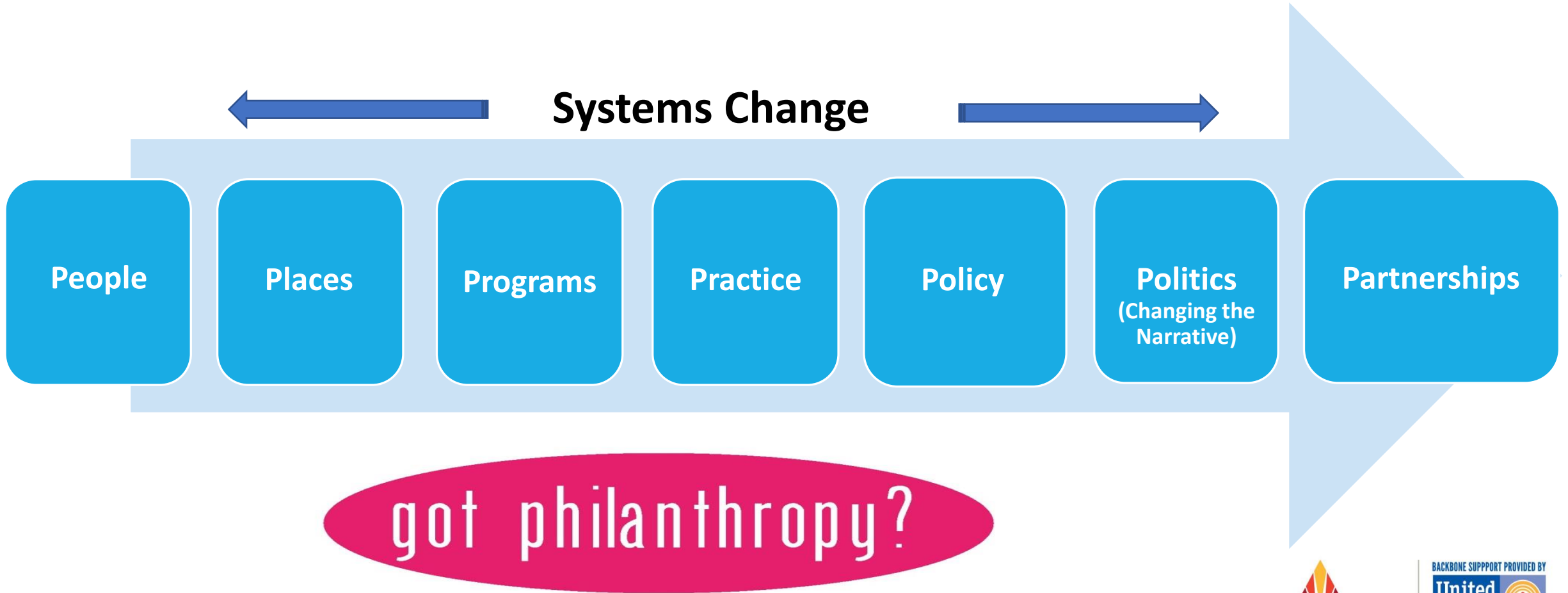


"FACT TO ACT: DATA DRIVEN DECISION MAKING"

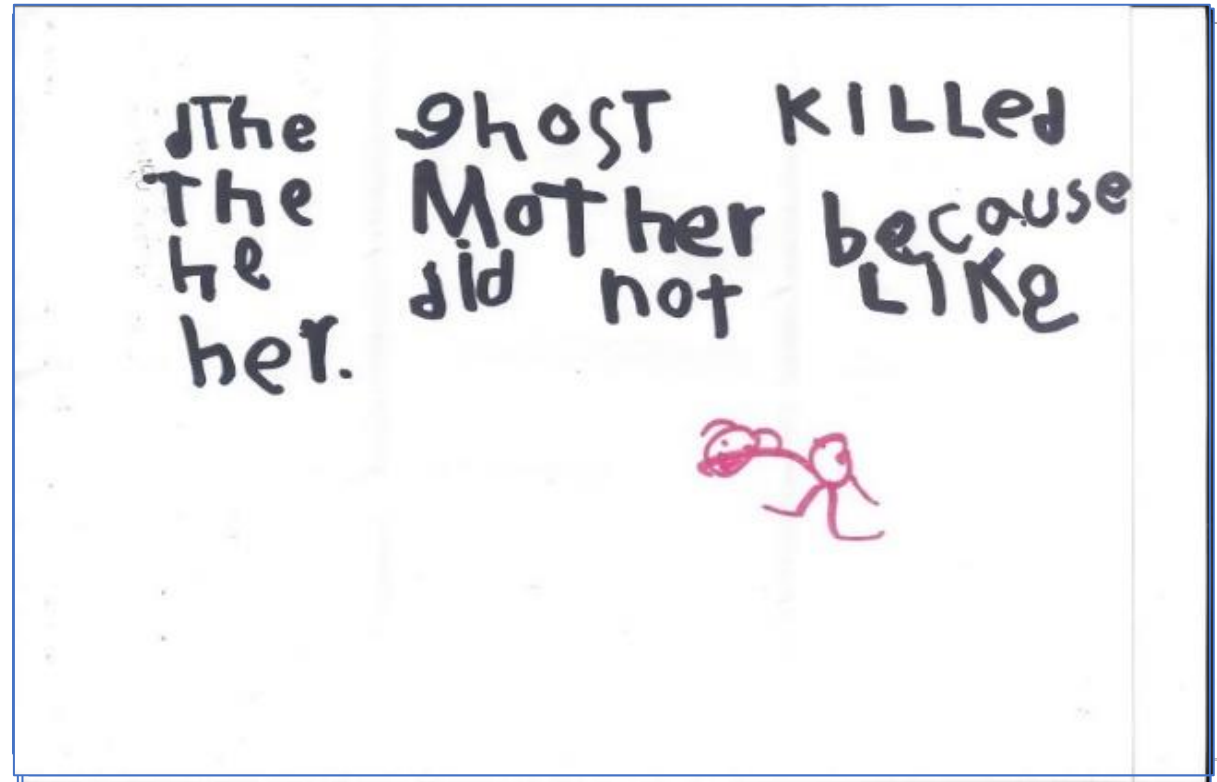
JUNE 26 8:30- NOON
UNIVERSITY OF BRIDGEPORT - TOWER ROOM

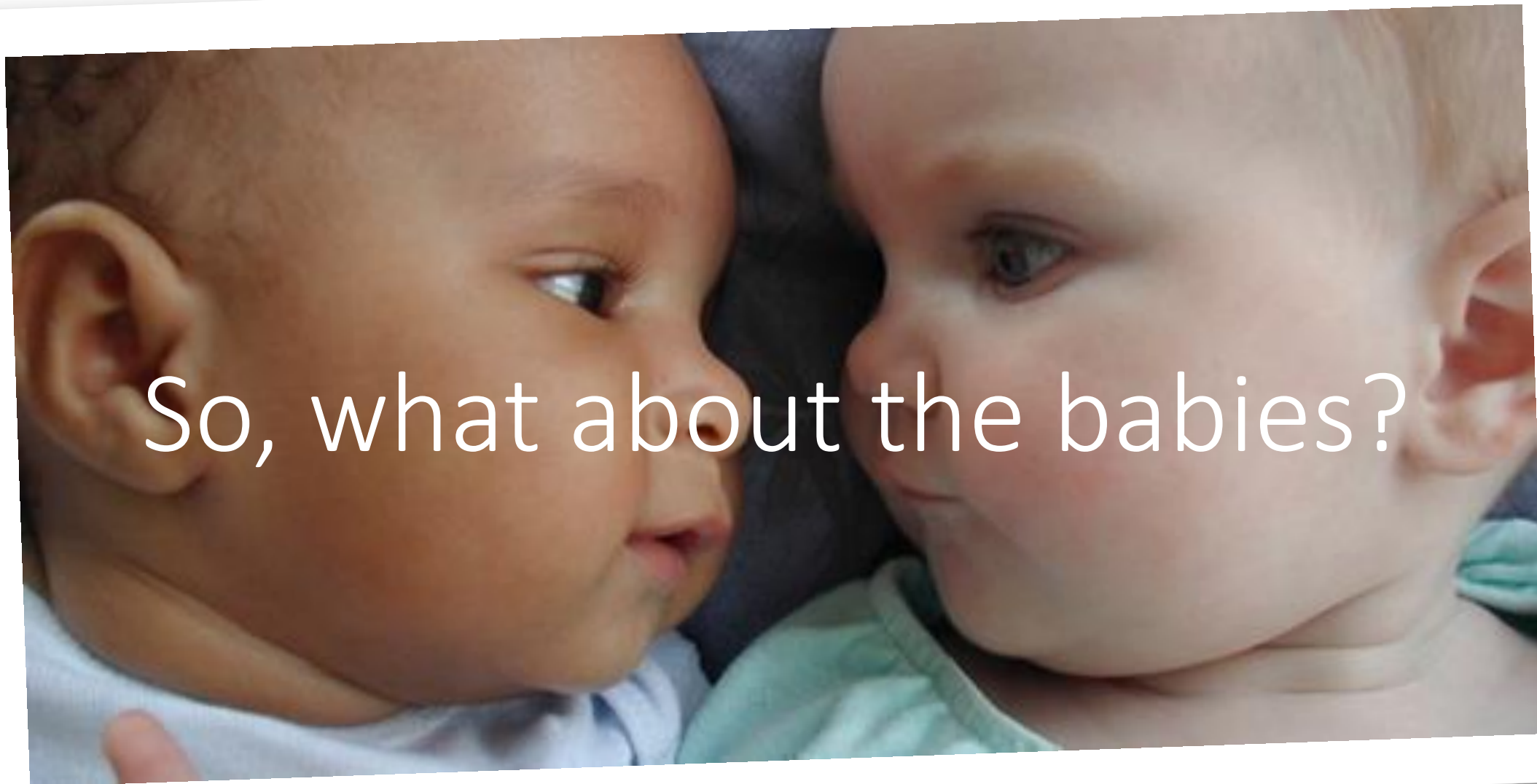
We checked ourselves using the “Rule of P”

Cross-sector partners joined the Community Action Networks (CANs) to design an innovative framework- Not one strategy alone can move a community level outcome towards systems change, it must be deliberate, universal and place-based--founded in science and relational health.




We listened to real stories
from children in
Bridgeport....





So, what about the babies?



The Goal of Healthy and Ready by 3

All Bridgeport babies born beginning in January 2018 will reach expected health and developmental benchmarks by the age of three.

We Looked at What Works..... (Based on the Science)

Outcome Goal

What Works to
move the
community
outcome goal of
**ALL children being
healthy and ready
by three?**

Key Drivers

Universal Screenings: Universal screenings and ongoing assessments that focus on early identification and treatment of developmental delays in **children** (including vision, hearing impairments and behavioral health) as well as **maternal/paternal** depression and ACES to reduce depression, improve parent/child interaction and enhance child development

Early Intervention: provides services, education and support to infants and toddlers who have an identified physical or mental delay, disability, special need or whose risk factors place the child at high risk for delay

Universal Home Visiting: For vulnerable families who are expecting a child, early and intensive support by skilled home visitors produces significant benefits for both the child and parents including the enhancement of parent/child interactions

Early Care and Education: Participation in high quality, center or home based early childhood education programs has been demonstrated to enhance child cognitive and social development.

Early Literacy: Early Language and literacy develop at the same time, beginning at birth, with both visual and vocal exchanges between a child and caregiver. Children with books in their homes who are read to in the first years of life are more likely to read on grade level.

Supporting Care and Parenting: Resources, tools, outreach and access to universal parent supports based on the neuroscience of early child development.

We got help from the neuroscience...

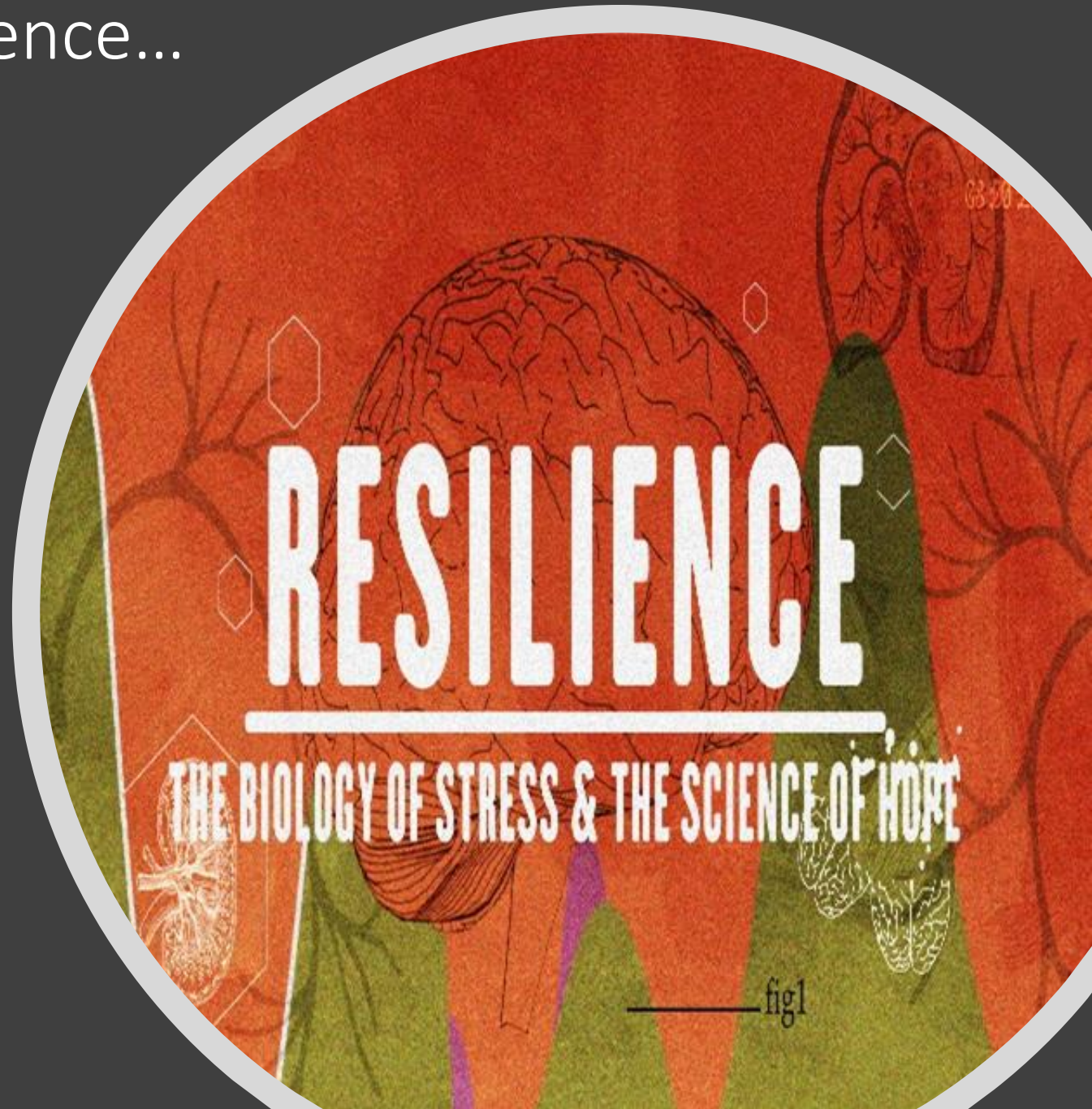
Changing the Narrative

Creating a Trauma-Informed City

Change the story and you
change perception; change
perception and you change the
world.

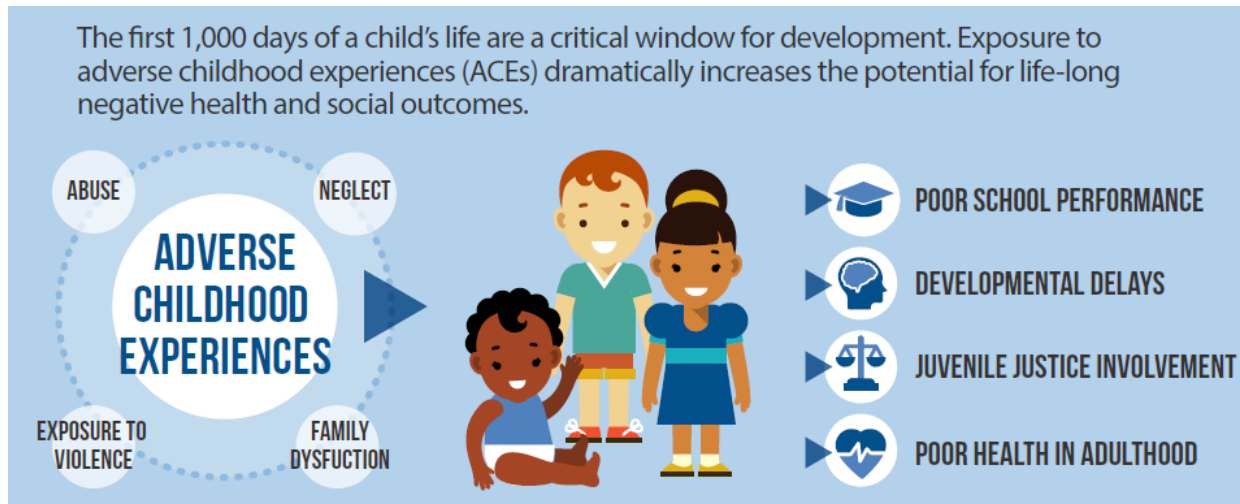
Jean Houston

LIKESUCCESS.com



Medicaid is also changing its narrative and framework.....

Bridgeport is the pilot site for this redesign in CT!



First 1,000 Days on Medicaid

MEDICAID'S UNIQUE ROLE IN EARLY CHILDHOOD ▶

Medicaid is uniquely positioned to identify and connect at-risk children (ages 0-3) in low-income families with needed health, developmental, and social services — increasing the odds that children get a good start in life.



Medicaid covers almost half of babies born in the United States and 40 percent of children



Publicly financed health care is the social institution most likely to have regular contact with children ages 0-3 in low-income families



Medicaid guarantees coverage for developmental screenings and other preventive care that is important for identifying concerns early

MAXIMIZING MEDICAID'S WINDOW OF OPPORTUNITY ▶

There are key opportunities for state Medicaid agencies and their health plan contractors to support high-risk, low-income families:



Integrating data across sectors



Using data to target the highest risk children and families



Identifying assessment tools and shared metrics



Building state and community partnerships



Creating new clinical models and community linkages

The Bridgeport Baby Bundle

Three Premises:

1. Create a portfolio of actions and move all simultaneously with universal access...
2. Base on the neuroscience and start early...
3. Aim to change an **ecosystem** not only the trajectory of individual children and families.

Supported
Care and
Parenting

An Army of
Helpers and
Advocates

Bridgeport
Baby
Investment
Bundle

Innovation
and Better
Connections

Track
Change.
Measure
Impact

A Peek at What's Inside Each Strategy Blue & bold=action (Think about the Rule of P)

Supported Care and Parenting

The Bridgeport Basics
*Pre- and perinatal universal home visiting (Family Connects)
*Universal screening (Sparkler)
Early literacy (ROR)
Infant and toddler family child care (All Our Kin)
*Maternal wellness (including MH, ACEs)

An Army of Helpers and Advocates

Resilience screenings
The Bridgeport "Baby Squad"
Building champions: Faith, pediatric (*Sparkler and The Basics*), higher education and giving sectors

The Baby Investment Bundle

Investment Portfolio for strategy #1 PLUS
Strategy #5: Innovative Funding re data; High-wealth donors "Baby Scholarships"; *State Medicaid re-form funding*

Innovation and Better Connections

Authentic Family & Neighborhood Engagement
Top to Bottom (linking food & diapers)
Respectful service access: No wrong door and a warm handoff

Track Change. Measure Impact

National Interoperability Collaborative
Bpt Virtual Baby Data Coalition: *DSS, OEC & SDE Partnership*
City DPH and hospital data
Medicaid admin data; Linking to Sparkler data



Connecting State and Local Data Systems



Medicaid Data (63% of Births)

- Pregnant women by provider
- Babies born by hospital
- Live births: natural delivery and C-section
- NICU rate
- ER visits under 6 months old (Unduplicated count of ER patients, under 6 months old)
- Overnight hospital stays under 6 months old (Unduplicated count of overnight hospital stays under 6 months old)
- Unduplicated count of children either ER or overnight visit, under 6 months old
- HUSKY Enrollment of babies and other children in their families
- Prenatal and postnatal maternal MH screens paid for by Medicaid and successive MH treatment for depression



Healthy and Ready at Three? Together We Can!

Bridgeport Agency/Program Partners

Bridgeport Department of Health, Bridgeport Hospital, Bridgeport Hospital Foundation, St. Vincent's Hospital, Optimus Community Health, Southwest Community Health, Child First, Child and Family Guidance (NFN and PAT), Visiting Nurses Services, Dr. Norman Weinberger (Pediatric Champion), Pediatric and OB providers, Reach Out and Read, Read to Grow, All Our Kin, Early Head Start, Bridgeport Libraries,, Partnership for Early Education Research, Bridgeport Health Advisory Council, Primary Care Action Group

State and National Level Partners

CT Department of Social Services, Office of Early Childhood, CHDI, Child Development Infoline, Help Me Grow CT, Institute of Child Success, Family Connects, Reach Out and Read, Stewards of Change (Data and Interoperability), National Interoperability Collaborative, Boston Basics, Sparkler, MOMs Partnership, HRSA and National Institute of Child Health Quality (NICHQ)- Webinars given

Dr. David Willis, until very recently leading HRSA's home visiting and early childhood comprehensive services efforts at the federal level, describes the incredible national importance of this work -- for its focus on family and community "relational health" and its intent to bundle supports and action (from policy to programs) relevant to all young children, universally with substantive attention young, vulnerable children in America.

"It is increasingly well established that no single program can provide an adequate solution to developmental challenges for young children living with toxic stress, high levels of ACES, poverty, racism and inequity. The Baby creates a portfolio of supports and programs, citizen knowledge and action, investment and public accountability. Implemented early and in a universal, place-based context presents the best option for improving developmental outcomes, school success and health over the course of a person's lifetime."

Born Healthy and Ready by Three?

Together we can!





Thank you!

Email with any questions.....
alogan@unitedwaycfc.org

