# HDS Ripple Effect Map

#### What is this map?

- ► This visual is a representation of the "ripple effect" that is created as a result of First 5 San Diego's Healthy Development Services.
- ▶ The map was developed through the analysis of qualitative data spanning three Fiscal Years (2019-2020, 2020-2021, 2021-2022). The data analyzed include narrative data submitted on a quarterly basis, Family Survey Experience (FES) open ended data, and regional MDT observational data.
- ► The map includes and incorporates additional input from HDS regional partners.

## How is the map organized?

- ► The information on the map is organized by "ripples" or levels. We organized the data in a total of 7 ripples starting with key elements and moving outwards in order of impact.
- ► How to read the map:
  - ▶ Start at the bottom (1: Key Elements of HDS) and think about the Key Elements of HDS as the key inputs that set in motion the subsequent ripples that propel outwards: the impact of HDS on providers and the system that culminates in the largest ripples on families, children and the community at-large. The map should help paint a picture of the reach that HDS has in the community and all of the milestones and victories that happen throughout the process that are supporting multiple stakeholders.

### What is each ripple?

- Key Elements of HDS: describes the unique features of HDS that set the foundation for the later stages of impact, including the development of relationships with community partners, cross team collaboration, intentional care coordination teams, etc.
- Provider Impact of HDS: describes how HDS's approach to training and supporting providers allows them to build and strengthen capacity, deepen partnerships in the community, and develop expertise in child development and family support.
- 3. Provider Impact on HDS: slightly different than provider impact of HDS, this ripple shows the results of the capacity and relationships built in the second ripple and how providers bring that capacity and learnings into their interactions with children and families.
- **4. System Impact of HDS:** this level highlights how the HDS model is integrated into the approaches other community organizations and partners take with children and families, including incorporating development assessments as practice and building referrals pathways into and out of HDS.
- 5. Family Impact of HDS: highlights the confidence developed by parents and caregivers in their understanding of the development and needs of their children as well as the trusting relationships they develop with HDS providers and community.
- 6. Child Impact of HDS: describes the ultimate impact on children of all the previous ripples including their developmental, behavioral, and social emotional gains, the confidence they develop, and how the system of care is more clearly serving them in support of their overall healthy development.
- Community Impact of HDS: describes the large-scale impact of HDS on other families and future generations beyond the current HDS participants.

Children are entering school ready to learn and caregivers Families share what they learn through HDS with their friends, Caregivers and children pass on the skills and approaches learned are entering school ready to advocate for their child neighbors and other families at schools, church, etc., spreading through HDS to future generations, potentially transforming family the impact of HDS through their communities dynamics and impacting children for years to come ......7 **Community Impact of HDS** Children are experiencing developmental/behavioral/social Children who are otherwise ineligible for emotional gains (able to communicate their needs, regulate services are receiving quality care and Children's basic needs and Children are better supported by their emotions, improved overall language and making gains that prepare them to enter their caregivers and have stronger social determinants of communication, age-appropriate socialization) school ready to learn and improve their attachment/relationships with health are supported by Confident caregivers long-term developmental trajectories their caregivers more resilient and selflead to more sufficient families having 6 Child impact of HDS confident children their needs met Families are able to address their basic needs and build Caregivers feel more confident in their Families stress levels are their capacity to access parenting as they learn about Families were able to reduced and are better resources through care development and how to play with their continue services able to support their coordinator/wrap-around during COVID due to Caregivers improve child and build stronger child and strengthen support which builds their Families of all their own mental relationships/attachments with their the quick relationships within their readiness for services and health and are better backgrounds and children (e.g. practice positive discipline, implementation of families (e.g. improved allows them to focus on cultures feel welcomed, telehealth and create routines and healthy habits, build able to read their co-parenting) their child support/resources for child's cues and model engaged, cared for, language and communication) listened to, supported, regulation/co-regulate basic needs with their child understood, hopeful Family impact of HDS Pediatricians refer to HDS as an Strong essential part of the system of care and Pedi at ricians connections Community partners are more aware of available incorporating with medical HDS fills service gap for families collaborate with each Community partners change development services/resources for families homes who aren't eligible for other other beyond HDS how they approach services as screenings as a services or provides bridging they observe and learn from and MDTs standard of practice services while families wait for HDS's relational and System impact of HDS higher levels of service (e.g. school collaborative approach district, CA-ES, etc.) Providers model reflective practice, family-Providers model centered care, focus on social-emotional Providers able to quickly respond to changes in healthy community needs such as the Covid-19 development for community partners attachment for Learning communities and pandemic (telehealth, resources/basic needs) caregivers ongoing refinement of best Care coordinators practices, improving quality and are support Provider impact on HDS system for consistency of care caregivers Providers are able to bring a consistent, empathetic, whole-family centered, Strong collaboration and warm culturally responsive approach that handoffs between care coordination Providers feel supported and prioritizes relationships and tailored to teams, HDS providers and have high levels of career Providers gain expertise meet families where they are at community partners satisfaction, potentially in prenatal and early increasing staff retention and childhood mental health decreasing burnout Provider impact of HDS and development Providers take Deep relationships Provider trainings and support multi/trans/interbetween funders. disciplinary contractors/providers emotional/mental health, approach Cross-regional collaboration and AAP, evaluation reflective practice, traumaconsistent foundation of service Collaboration with levels/curricula/tools while allowing wealth of knowledge flexibility in service flow and approach based on regional Dedicated care Kev elements of HDS Flexible, responsive, coordination teams long-term and trustimplemented by a based funding HDS

strong network of providers

# **HDS Ripple Effect Map Content**

#### 1 Key Elements of HDS

- ▶ Flexible, responsive, long-term and trust-based funding
- Provider trainings and support (early childhood socialemotional/mental health, reflective practice, trauma-informed and culturally responsive services, resilience, well-being and self-care)
- Collaboration with community partners (MDTs, pediatricians, school districts, health providers)
- Dedicated care coordination teams implemented by a network of strong provider organizations
- Cross-regional collaboration and consistent foundation of service levels/curricula/tools while allowing flexibility in service flow and approach based on regional differences
- Providers that reflect the communities being served and bring a wealth of knowledge and experience

#### 2 Provider impact of HDS

- Deep relationships between funders, contractors/providers, AAP, evaluation
- Providers feel supported and have high levels of career satisfaction, potentially increasing staff retention and decreasing burnout
- Providers are able to bring a consistent, empathetic, wholefamily centered, culturally responsive approach that prioritizes relationships and tailored to meet families where they are at
- Providers take multi/trans/inter-disciplinary approach
- Providers gain expertise in prenatal and early childhood mental health and development
- Strong collaboration and warm handoffs between care coordination teams, HDS providers and community partners

#### 3 Provider impact on HDS

- ► Learning communities and ongoing refinement of best practices, improving quality and consistency of care
- Providers model healthy attachment for caregivers
- Providers model reflective practice, family-centered care, focus on social-emotional development for community partners
- Providers able to quickly respond to changes in community needs such as the Covid-19 pandemic (telehealth, resources/basic needs)
- Care coordinators are support system for caregivers

#### 4 System impact of HDS

- Community partners change how they approach services as they observe and learn from HDS's relational and collaborative approach
- Community partners collaborate with each other beyond HDS and MDTs
- Strong connections with medical homes
- Pediatricians refer to HDS as an essential part of the system of care and are more aware of available services/resources for families
- Pediatricians incorporating development screenings as a standard of practice
- HDS fills service gaps for families who aren't eligible for other services or provides bridging services while families wait for higher level of services (e.g. school district, CA-ES, etc)

#### 5 Family impact of HDS

- Families of all backgrounds and cultures feel welcomed, engaged, cared for, listened to, supported, understood, hopeful
- Caregivers feel more confident in their parenting as they learn about development and how to play with their child and build stronger relationships/attachments with their children (e.g. practice positive discipline, create routines and healthy habits, build language and communication)
- Families stress levels are reduced and are better able to support their child and strengthen relationships within their families (e.g. improved co-parenting)
- Families are able to address their basic needs and build their capacity to access resources through care coordinator/wrap-around support which builds their readiness for services and allows them to focus on their child
- Families were able to continue services during COVID due to the quick implementation of telehealth and support/resources for basic needs
- Caregivers improve their own mental health and are better able to read their child's cues and model regulation/co-regulate with their child

#### 6 Child impact of HDS

- Children who are otherwise ineligible for services are receiving quality care and making gains that prepare them to enter school ready to learn and impact their long term developmental trajectories
- Children are experiencing developmental/behavioral/social emotional gains (able to communicate their needs, regulate their emotions, improved overall language and communication, age appropriate socialization)
- Children are better supported by their caregivers and have stronger attachment/relationships with their caregivers
- Children's basic needs and social determinants of health are supported by more resilient and self-sufficient families having their needs met
- Confident caregivers lead to more confident children

### 7 Community impact of HDS

- Families share what they learn through HDS with their friends, neighbors and other families at schools, church, etc., spreading the impact of HDS through their communities
- Children are entering school ready to learn and caregivers are entering school ready to advocate for their child
- Caregivers and children pass on the skills and approaches learned through HDS to future generations, potentially transforming family dynamics and impacting families for years to come

