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| **Communities build what they dream. Families get what they need. Children thrive.** |

August AOK Network Meeting Notes:

* Introductions & Check-In: What is your superpower?
* What is the Community, Assessment, Planning, and Action Process (CAPAP)?
  + Informs the direction of your three local AOK initiatives for the next five years
    - Network capacity
    - Child and Family Outcome
    - Information and Referral
  + Reinforces our belief that communities should determine the specific direction of their initiatives
* Why a five-year cycle?
  + We improve outcomes for children and families by improving the early childhood system
  + It takes time to understand and change the system in significant ways that can lead to improved outcomes for children and families
  + Systems are complex and require continuous learning and adaptive (iterative) action over time to figure out what works
  + With a longer view, we can focus on bigger system improvements
* Four Primary Phases of CAPAP
  + Phase 1: Assess Child and Family Outcomes
  + Phase 2: Assess the Early Childhood System
  + Phase 3: Design Strategies for System Improvements
  + Phase 4: Implement, Track, Learn & Adapt, Scale
  + Throughout this process we integrate:
    - Collaborative leadership
    - Parents as partners/ family engagement
    - Equity lens
    - Storytelling
* Phase 1: Assess Child and Family Outcomes
  + What:
    - Collect, assess, and prioritize child and family outcomes
      * Informed by AOK Networks’ Developmental Pathway
  + End Result:
    - Agreed upon targeted problem: a subset of related child and family outcomes the Network will focus on for the next five-year cycle
* Understand Child and Family Outcomes
  + In-Person we went over examples of some of the indicators that are listed in the developmental pathway
  + Overall we are ensuring that:
    - Babies are born healthy
    - Young children are safe, healthy and developing positively
    - Children are kindergarten ready
* Get to Know: Assessment Tables
  + In person: we went over the assessment table example shared in the Network slides as well as pulled up our current data table that our county (Autumn & Jess) have worked on to input data
* AOK Parents Survey
  + Closes on September 8th
  + Has detailed questions related to indicators listed in the developmental pathways
  + Purpose of the Parent Survey
    - Collect critical outcomes data that aligns with the AOK Developmental Pathway
    - Assess for unique problems for each AOK Network
    - May be used to track the impact of the AOK Network on specific outcomes over time (multiple years of data is needed)
  + Outcomes measured by the Parent Survey
    - More women receive a postpartum checkup
    - More children are receiving lead testing
    - More children have health insurance
    - More babies are breast-fed
    - More children attend well-baby/child visits
    - More children are receiving preventative dental care
    - More children are eating healthy
    - More children practice healthy sleeping habits
    - More children brush their teeth daily
    - More children participate in health-related fitness activities
    - More children are read to and develop foundational language and literacy skills
    - More parents/caregivers read to their children on a regular basis
    - More parents/caregivers comply with safe sleep recommendations for their infants and toddlers
    - More parents/caregivers comply with car seat safety recommendations
    - Fewer members of the household smoke
* How do I help?
  + Be a champion for AOK Network
  + Share, share, share
  + Contribute your knowledge
* FY24 Workgroups
  + We will be having sign-up sheets for this upcoming years workgroups, we are getting rid of Info & Referral workgroup and bringing back the Early Childhood Mental Health
  + Below is a list of the workgroups that we will have for this year
    - Steering Committee
    - Health and Wellness
    - Learning through Play
    - Early Childhood Mental Health
    - Data Workgroup
  + If you are interested in joining one of the above workgroups and were not able to attend the meeting, please reach out to Jess or Autumn at either [jessical@foreverychild.org](mailto:jessical@foreverychild.org) or [autumng@foreverychild.org](mailto:autumng@foreverychild.org)
* Partner Updates:
  + Scott County
    - Community Baby Shower
    - September 9th
    - Lincoln Center, Davenport, IA
    - 1-3pm
    - Free and open to new and expecting families
  + Safe Families
    - Gala
    - October 2nd
    - Holiday Inn, Rock Island, IL
    - 630-930pm
  + Birth to Five
    - Dissemination Report Available this upcoming Monday
    - Mainly will be shared digitally
    - Tomorrow (8/3) there is a community meeting @ the Esperanza Center in Moline, IL at 6pm and will be outside (will have a space for children)
  + Rock Island Health Department
    - New WIC Brochures
      * Needed for WIC application
        + Proof of residency
        + Proof of income
        + If already on SNAP/Medicaid (certain types) can bring card/letter
      * If homeless & applying
        + Drivers license for identification
        + WIC can issue ready-to-feed formula
  + AOK
    - New yellow pages – please let us know if you need to updated ones distributed to your agency/organization
  + CASA
    - Still looking for volunteers to advocate for children in the foster care system
  + Children Exposed to Violence Conference
    - August 17th
    - Free – limited registration (**Have to register**)
    - On EveryChild website – [www.foreverychild.org](http://www.foreverychild.org)
    - From 830-1130am
  + Community Education (EveryChild)
    - Heather & Latashia are filling schedules for Fall, Winter, and Spring related to education classes and groups that they offer
* Presentation – Rock Island Heath Department – Low Birth Weight Project
  + Purpose
    - Highlight overall access to care, preventative care, and health equity issues
  + Why Low Birth Weight (LBW)
    - Definition: less than 2500 grams (5lbs 8oz)
    - Higher in black population in the US overall
    - Costs associated with LBW births are significantly higher than normal birth weight births (LBW = $114,437 vs Normal $6,743)
  + Factors Associated with LBW Outcomes
    - Maternal Health
    - Socioeconomic Status
    - Environmental Factors
  + A Few Notes on Data
    - Focused on full-term, singleton LBW births
    - Local data compiled for observation and community inquiry
    - There was a drop in babies born from 2010-2020 with 4192 being born in 2010 and 3585 being born in 2020
    - There was a rise, however, in Low Birth Weight babies, which averages about 70 a year, but was ~100 in 2020
  + Associated factors
    - Mother’s race
    - Mother’s marital status
    - Age of mother (20-24)
    - Mother’s education (9th-12th grade education with no diploma or only a high school diploma or GED)
    - Birth Gender – female, etc
  + Protective Factors
    - Mother marks “Non-Hispanic”
    - Mother’s marital status – married
    - Mother is considered white
    - Mother’s education – bachelor’s degree, etc
  + Hospital data
    - 101 combined QC data (Genesis & Unity Pointe) in 2021 LBW births
  + Areas of Opportunity
    - Increase access to maternal Health care
      * Increasing prenatal care access and education
        + Transportation services
        + Childcare access and costs
      * Implementing new models of care delivery
      * Enhancing access to home visitation, doula, and “remote” support services
      * Providing support for navigating the healthcare system
    - Improving preventative care and support services
      * Support tobacco use
      * Provide support for substance use
      * Facilitating access to dental care
      * Facilitating positive overall mental health and managing chronic conditions
      * Facilitating access to mental health services and reducing stress
      * Addressing social determinants of health needs