



ZERO to THREE
Early connections last a lifetime

Washington, District of Columbia

A Methodological Approach to Assessing Opportunities and Gaps
Provides a Baseline for Next Steps

This policy vignette highlights efforts in Washington, DC to take stock of current programs and funding streams supporting the infant and early childhood mental health (IECMH) system. Leaders from multiple District departments as well as the Children's National Hospital and the Early Childhood Innovation Network met regularly to maximize cross-sector understanding and utilization of current policies. As part of this, they developed an assets map and are developing a financing primer. These tools are an important next step in effectively identifying and covering IECMH services. The vignette also shares key lessons learned.

the Innovation

Public and private sector leaders in Washington, DC took a methodological approach to assessing opportunities and gaps in the financing of IECMH promotion, prevention, assessment, diagnosis, and treatment. Additionally, they wanted to ensure that cross-sector provider communities (e.g., pediatricians, mental health professionals, child care/early learning providers and programs) understood the current landscape, including financing policy. Two products were created: (1) an asset map that outlines the IECMH service and workforce continuum from promotion and prevention through diagnosis, treatment, and recovery during the preconception/perinatal period through age 5; and (2) a draft financing primer of all early childhood programs and services with aligned Medicaid codes where applicable. Importantly, the spreadsheet, that was developed as part of the financing primer, also served the purpose of highlighting where there are not billable codes for IECMH services.

the Impetus

Launched in 2013, *The DC Collaborative for Mental Health in Pediatric Primary (DC Collaborative)* is an interdisciplinary public/private partnership aimed at increasing the integration of mental health and pediatric primary care. The DC Collaborative includes a multitude of stakeholders, including the DC Departments of Health, Behavioral Health, and Health Care Finance; DC chapter of the American Academy of Pediatrics; and Medstar Georgetown University Hospital (MGUH). The DC Collaborative collectively created and now oversees the child psychiatry access program for the District, *DC MAP (Mental Health Access in Pediatrics)*, which supports primary care providers in identifying and addressing mental health needs. The DC Collaborative and DC

“Representatives from Minnesota shared their version of an asset map. It started our thinking that we have all of these services and it would be good to have them mapped on one page.” – Leandra Godoy, Assistant Professor of Pediatrics, Children’s National



MAP have supported mental health integration efforts in other ways as well, including promotion of universal mental health screening in primary care through education, quality improvement, and technical assistance, and development and maintenance of a Child and Adolescent Mental Health Resource Guide. Launched in 2016, *the Early Childhood Innovation Network (ECIN)* grew out of the work of the DC Collaborative and represents a collaboration between Children’s National, MGUH and a multitude of partner organizations. ECIN has a robust network of cross-sector public and private partners working to empower families, educators, and healthcare providers with strategies to buffer the impact of stress and adversity upon young children living in low-income communities in Washington, DC.

Building on these efforts, in 2016 the Bainum Family Foundation convened leaders from early childhood, health and behavioral health care, and grassroots organizations to provide education to lawmakers on the importance of the early childhood years. Interest was sparked within the DC Council and in 2017–18 several council members championed the [Birth to Three for All DC Act of 2018](#). The Act exclusively focuses on improving health and education support for children from prenatal to age 3. Also in 2017, DC Mayor Muriel Bowser launched [Thrive by Five DC](#), the District’s first comprehensive childhood health and learning initiative that focuses on empowering families through a holistic approach to early childhood development. These and other efforts by city leaders, health and education providers, and advocates created an environment for discussions about IECMH to flourish.

The DC IECMH team arrived at the May 2018 kick-off meeting for the second cohort of the [ZERO TO THREE IECMH Financing Policy Project \(IECMH-FPP\)](#) knowing that they wanted to advance IECMH policy change, but not sure where to begin. “We were able to talk with other states and learned from them about the value in creating these tools that could inform change,” said Elizabeth Groginsky, former Assistant Superintendent of Early Learning, Office of the State Superintendent of Education.

Seeds were planted when they saw an example of an asset map from Minnesota and a funding gap document from Virginia. Follow-up technical assistance from one of the designers of the Minnesota IECMH system of care helped to provide additional inspiration and direction.

the Process

When the DC team returned from Minnesota, they took four important steps that contributed to their success. First, they decided to include more perspectives to ensure broader representation from cross-sector stakeholders. Second, they established a regular monthly meeting date and time and stuck to it. Third, they actively sought feedback for the tools that were being developed. Finally, they ardently looked for ways to plug IECMH into conversations happening throughout the District, whether it involves behavioral health reforms or other opportunities in early childhood development initiatives throughout the District.

Including more perspectives. The team that attended the Minnesota meeting included representatives from the Office of the State



Superintendent of Education, the DC Department of Health Care Finance (Medicaid), the DC Department of Behavioral Health, Children’s National, and the Early Childhood Innovation Network. The initial team determined it would be beneficial to gather perspectives beyond the core team and solicited input from representatives from children’s advocacy, the DC Behavioral Health Association, private service agencies, and others. This larger group was not only helpful in affirming that the map and funding tools would be useful, but it also aided in expanding the understanding of what is available in the community before and after treatment.

Seeking feedback on core tools. Development of the asset map was iterative. As a core group, they drafted the map with input from all team members. They then revised the map, and each member of the team shared it with their respective departments or organizations for input. They sought feedback with other early childhood stakeholders too, again gathering comments and reworking the map. Most recently, families and community organizations provided feedback at the 2019 Mayor’s 2nd Annual Maternal and Infant Summit and the 2019 DC Early Childhood Summit. “The map transformed over the year with input from many stakeholders,” said Leandra Godoy, Assistant Professor of Pediatrics, Children’s National. Meghan Sullivan, Project Director of DC Social Emotional and Early Development Project (SEED) in the Department of Behavioral Health adds, “People were excited about having it all on one page. It doesn’t dive into the specifics of each program but rather presents the information in a way that people can understand and talk about the whole continuum of IECMH.”

Embedding the work in multiple efforts.

Members of the DC IECMH team sit at many tables and have been intentional in seeking opportunities to weave IECMH into related efforts. For example, they are bringing IECMH concepts into discussions and planning for the Pritzker Children’s Initiative as well as the development of the District’s Early Childhood Strategic Plan. This work will help inform the conversations about changes to the behavioral health system through the District of Columbia Section 1115 Medicaid Behavioral Health Transformation Demonstration (1115 Waiver Initiative), illuminating

how IECMH fits into the behavioral health system. They also organized a breakout at the Mayor's 2019 Maternal and Infant Summit and DC's Early Childhood Summit in order to reach service providers and residents who might not have the foundational understanding of IECMH.

Financing

With the passage of the Birth to Three for All DC Act of 2018, the DC Council provided a significant investment (\$15.8 million for FY20) to expand:

- DC's child care subsidy program for low-income children,
- home visiting for Early Head Start,
- an early childhood mental health consultation program,
- HealthySteps (an evidence-based pediatric primary care program that promotes healthy development),
- Help Me Grow (a program that promotes healthy development for children and pregnant mothers), and
- lactation professionals.

next Steps

The team will keep advancing the work by

- disseminating the asset map to additional stakeholders and finalizing the funding primer;
- using the asset map and funding primer to inform early childhood recommendations for DC's 1115 Waiver Initiative;

- expanding mental health supports and consultation in licensed child development facilities through new, locally appropriated funding for FY20 that will support the Department of Behavioral Health's evidence-based mental health consultation model known as Healthy Futures; and
- expanding HealthySteps with new locally appropriated funding for FY20.

important Lessons

- Be mindful of your partners' time and consider whether you might need to bring more people onto the team to accomplish your goals.
- The work is important and urgent, but change will not happen quickly. Maintain a sense of urgency and set short-term goals that will move you toward the ultimate vision.
- Find ways to tie the work into other projects to solicit feedback and to influence the other agendas.
- Consider how you can center the voice of parents and community members in the work.

for more Information

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