Priority 3: Children and families' access and benefit from developmentally appropriate services and supports within collaborative, integrated community and health care systems.

## **Medical Home Initiatives**

Objective 3.1—Increase the percentage of families who participate in a Title V funded program that report their child has a medical home by 10% by 2030.

<u>Help Me Grow Incubator Hub Initiative – Continuous Systems Improvement</u>: Help Me Grow



An Affiliate of the National Network

Kansas has been selected to participate in the Continuous Systems Improvement branch of the HMG National Incubator Hub Initiative. This year long project will support Kansas in advancing family-centered care coordination by refining how families connect with early childhood services, enhancing referral processes, and integrating feedback loops to improve system responsiveness. The central goal is

ensuring every child in Kansas has access to a pediatric medical home.

The Child Health Consultant and HMG Kansas will partner with regional providers to pilot a more connected, person-centered referral approach—utilizing resource specialists with developmental knowledge to serve as a front door for families. The initiative will include provider and family feedback sessions, implementation support for centralized referral and intake systems (IRIS, UniteUs, 1-800-CHILDREN, etc.), and focused evaluation to ensure systems are working better for families and professionals. This work will contribute to broader state efforts to strengthen early childhood infrastructure and align with Kansas's Title V priorities and All In for Kansas Kids Strategic Plan goals.

<u>Data and Analysis</u>: Title V will explore a Help Me Grow Kansas comprehensive database. Data collection and analysis will assist with ensuring all other HMG components are working effectively, help to identify gaps or barriers, and guide quality improvement work.

Title V is currently part of a data trust agreement where a variety of information can be shared among state agency partners for a more complete picture of the early childhood systems and supports. The Child Health Consultant, in partnership with KU-CPPR, will be exploring new ways to analyze and utilize available data sources to encourage systems level changes. Data sources we will leverage:

- ASQ Online Enterprise system: used to track screening rates, outcomes, and referrals over time.
- 1-800-CHILDREN call log and referral platform: will capture information about family needs, referral patterns, and successful connection to services.
- IRIS and Unite Us platforms (where implemented): to assess efficiency, closure rates, and timeliness of referral pathways.
- Provider and family feedback: collected via engagement sessions, surveys, and targeted interviews, with themes used to inform rapid-cycle quality improvement.
- ECID (Early Childhood Integrated Data) system: used to explore linkages across early childhood services and assess systems-level impact.
- DAISEY Data: Collected from MCH ALT Grantees. Used to explore services delivered, frequency of services, and regional data.

<u>Care Coordination Survey</u>: The HMG KS Care Coordination survey was launched in 2024, and analysis is currently underway to understand how families and providers experience care coordination, data collection processes, and universal intake processes. This survey will allow us to more accurately and cohesively define and capture referral and linkage data.

<u>Pediatric Medical Home Knowledge</u>: In the first year of the 2026–2030 State Action Plan, the Title V team will build a foundational understanding of the medical home model and develop effective strategies for communicating its value across all maternal and child health (MCH) domains. This effort will include targeted learning, cross-sector engagement, and the creation of tailored messaging to reach families, community partners, grantees, and other key stakeholders. Emphasis will be placed on clarity, cultural responsiveness, and accessibility to foster consistent understanding and promote meaningful family engagement.

By the end of FFY 2026, all Title V staff will be equipped to clearly and confidently articulate the significance of the medical home model, regardless of their programmatic focus or population served. This shared baseline knowledge will support more consistent and intentional integration of the medical home concept into Title V strategies, care coordination efforts, and cross-system collaboration.

To support outreach and education, the team will develop or adapt at least one family-facing resource—such as a tip sheet, video, or infographic—that explains what a medical home is, why it matters, and how families can access or advocate for one. Concurrently, the team will initiate development of a provider-facing tool that outlines the core components of the medical home model and provides practical strategies for implementation within care coordination and service delivery.

Input from family partners and health care providers will be actively solicited to ensure both resources are relevant, actionable, and grounded in lived experience. These tools will serve as key assets for future training, systems alignment, and collaborative initiatives in subsequent years of the action plan.

<u>Provider Champion Developmental Screening Trainings</u>: The Help Me Grow Provider Champion will be creating and conducting training for health care providers on developmental screenings, referral practices, and the medical home model. Through partnership with the Kansas Chapter of the American Academy of Pediatrics, training attendees will be eligible for continuing education credits. Trainings will be tailored to provider needs, with feedback loops, such as session evaluations, established to ensure provider experiences inform future improvements.