

FLORIDA PARTNER REPORT:
COLLABORATION ANALYSIS FOR THE ECCS STATE
LEADERSHIP NETWORK



Introduction

The Early Childhood Comprehensive Systems (ECCS) Impact Project, implemented by the Florida Association of Healthy Start Coalitions, Inc. in 2016 with funding from the federal Health Services and Resources Administration (HRSA), seeks to improve the developmental health of infants and young children in two Florida communities using the Collaborative Improvement and Innovation Network (CoIIN) approach. An evaluation team at the Chiles Center located within the College of Public Health at the University of South Florida will evaluate the Florida ECCS impact project.

The strategy used by the ECCS Impact Project is improving early childhood comprehensive systems within Florida by fostering collaboration and coordination in two place-based communities, the Miami Children's Initiative in the Liberty City neighborhood and Jacksonville's New Town Success Zone in the New Town neighborhood. Thus, the evaluation assesses implementation, processes, and community networks at state and community levels. The community partner evaluation describes linkages between family support programs or services and the extent of those relationships.

Purpose

This report documents the findings of the partner network analysis of state-level early childhood agencies participating on the Florida ECCS State Team and Advisory Group for the first and second year of the impact project. The analysis assessed the network structure, level of collaboration, and partner perceptions of potential outcomes of the Florida ECCS Impact Project. The community team structure, organization, and systems building evaluation component seeks to understand how coordination and partnerships among organizations at the state and community level occurring, including:

- a. How well do the partners represent all sectors of the system, as well as the diversity of the region?
- b. To what extent do network size, density, interagency trust, contribution, and collaboration evolve throughout the ECCS project?
- c. What strategies work best to facilitate the ECCS project?

This report sets forth a foundation of Florida's ECCS development, growth, and progress in creating a collaborative, integrated network of community and agency partners critical to meeting its goals and objectives of improving developmental screening and referral, promoting child development, and supporting family well-being.

Throughout the ECCS impact project, the evaluation team will collect and analyze data to disseminate findings as they relate to the research questions above.

Methods

The quantitative measurement of collaboration among agencies, organizations, and groups was completed by the evaluation team using the Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER) Tool (<http://www.partnertool.net/>). The PARTNER Tool, developed by the Center on Network Science at the University of Colorado Denver, sponsored by the Robert Wood Johnson Foundation, collects data by administering an online survey to the identified stakeholders. This social analysis software is designed to measure the collaboration process by linking connectedness, trust level, and resource exchange among agencies. To fit the needs of the Florida ECCS evaluation, the evaluation team altered the survey with feedback from the ECCS leadership team. Following the revisions, the finalized survey was then sent to the identified list of state-level stakeholders through the PARTNER Tool software. The analysis was conducted using PARTNER Tool and SPSS 24.

Results

Participants

The Florida ECCS Project Coordinator identified state-level stakeholders to participate in the PARTNER survey. This report depicts the responses of 14 of the 17 stakeholders who responded to the request to complete the Year 1 survey (response rate of 82.4%) and 16 of the 23 stakeholders who participated in the survey (response rate 73.9%) for Year 2.

Level of Collaboration

Level of collaboration is an important indicator that measures the types of collaboration between the partners required to reach the aims of ECCS. With one question, “*What kinds of activities does your relationship with this organization/ program entail?*”, the state leadership team identified their agency’s level of collaboration with other state partners. Stakeholders selected from the following answer choices:

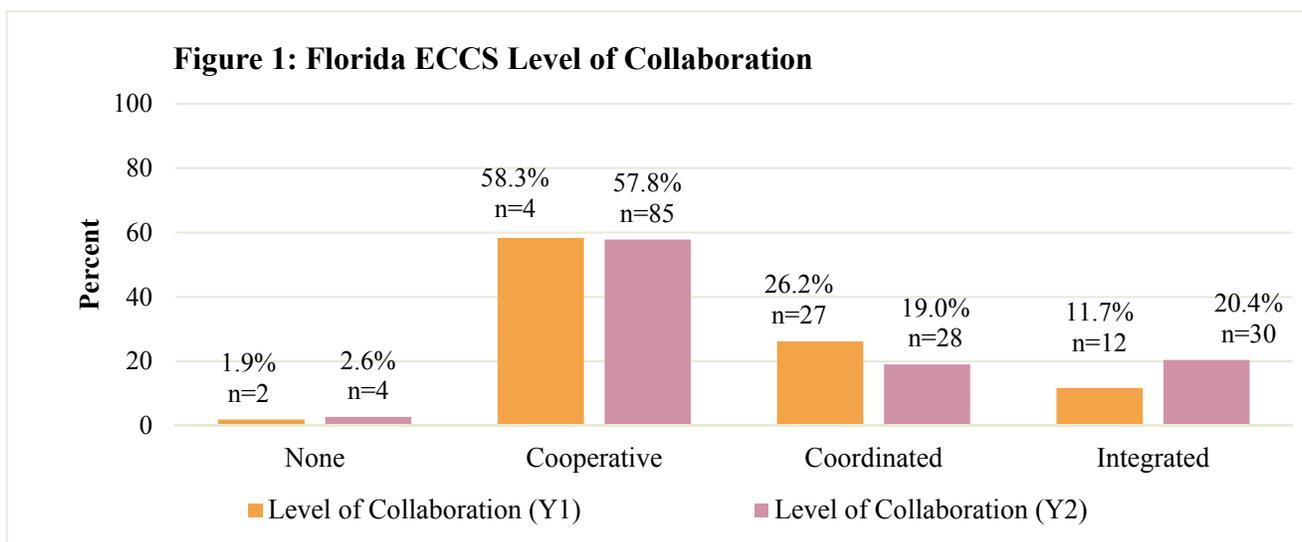
None

Cooperative activities: involves exchanging information, attending meetings together, and offering resources to partners (example: informs other programs of RFA release)

Coordinated activities: include cooperative activities in addition to intentional efforts to enhance each other’s capacity for the mutual benefit of programs (i.e. separate granting programs utilizing shared administrative processes and forms)

Integrated activities: in addition to cooperative and coordinated activities, this is the act of using commonalities to create a unified center of knowledge and programming that supports work in related content areas (example: developing and utilizing shared priorities for funding effective prevention strategies; funding pools may be combined)

As shown in Figure 1, the Florida ECCS state partners most commonly identified their level of collaboration with one another as “cooperative” or “coordinated” for Year 1 and “cooperative” or “integrated” for Year 2. Most notably, the percentage of integrated activities increased during Year 2. The number of interactions (Year 1=101; Year 2=148) includes all possible interactions among all partners.



State-Level Network

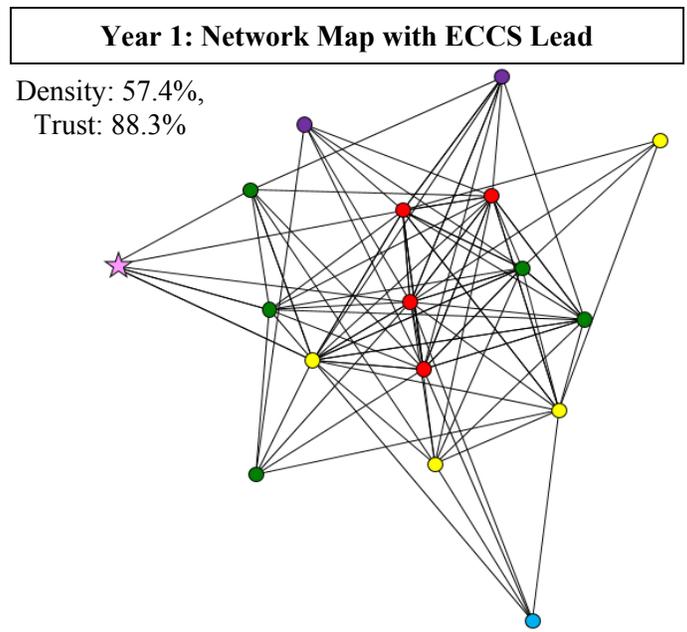
Community Networks

Network maps illustrate collaboration within a community. Based upon information provided from the completed surveys for Year 1 and Year 2, the network map (Figure 2) visually represents the connections among state partners in Florida. The stakeholders (Year 1, n=14; Year 2, n= 16) who participated in the survey are represented as colored dots in the network, depending on their agency's service sector, including:

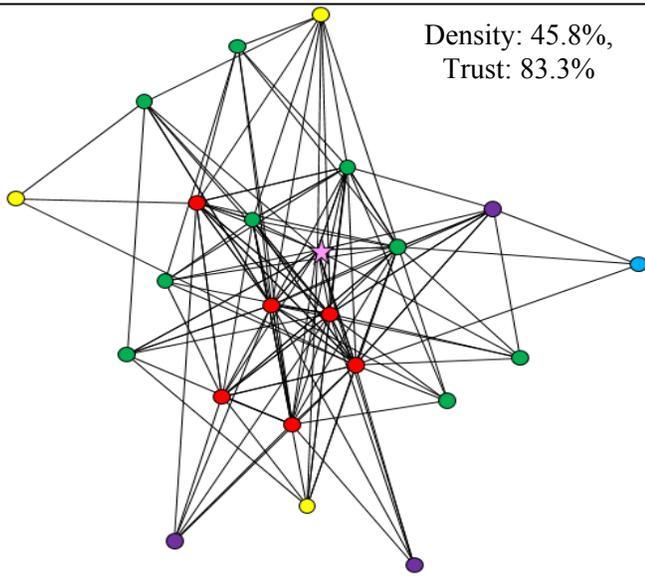
- ★ ECCS Lead (Light Pink)
- Community Organization/Social Service (Green)
- Health (Yellow)
- Early Childhood Education/Intervention (Red)
- Mental Health (Purple)
- Parent/Community Member (Light Blue)

The line between two dots signifies a connection or a relationship between two agencies, and each agency can have more than one connection (up to the number of community partners). Density and trust scores are also described in the community network. The density score represents the number of connections in relation to the total number of possible connections within the state leadership network. In order to achieve a density score of 100%, all community partners must have a connection with each agency. A trust score measures the level of trust among state partners. The results of the network map, including the density and trust score, are presented below.

Results state that density and trust decreased in the project's second year, as a number of new partners were added to the network. Year 2 maps show that ECCS Lead plays a vital role in maintaining community partner relationships. A second network map for Year 2 is presented represents the network structure with the absence of the ECCS Lead. There is a 3.4% and a 3.9% increase in density and trust, respectively, with the inclusion of the ECCS Lead.



Year 2: Network Map with ECCS Lead



Year 2: Network Map without ECCS Lead

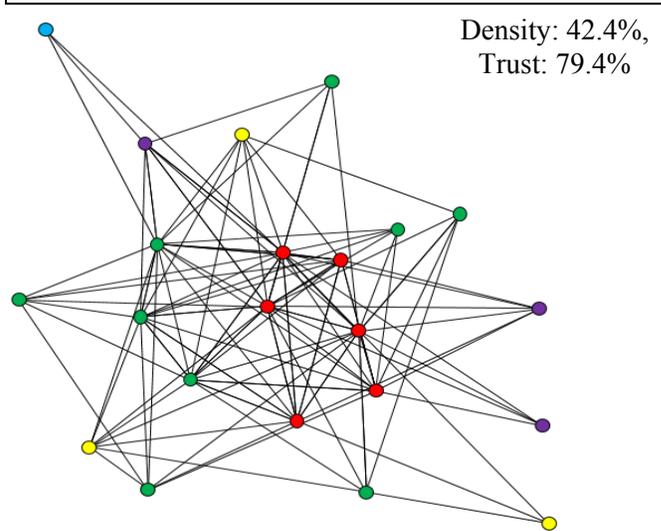


Figure 2: State-Level ECCS Network Map

Aspects of Collaboration

Stakeholders could also select all aspects of collaboration that contribute to their perceptions of the progress and success of the Florida ECCS impact project to date. Of the 14 stakeholders that completed the PARTNER Tool survey in Year 1, *exchanging information/knowledge* (18.7%, n=14), *bringing together diverse stakeholders* (16.0%, n=12), and *having a shared mission* (13.3%, n=10) were noted as the most reported aspects of community collaboration contributing to the Florida ECCS impact project’s progress. For Year 2, *bringing together diverse stakeholders* (16.3%, n=14), *exchanging information/knowledge* (15.1%, n=13), and *having a shared mission/goals* (14.0%, n=12) were reported as the top three aspects of collaboration. The top three aspects of collaboration remained consistent. Table 1 documents the aspects of collaboration that were reported as contributing to Florida ECCS’s progress.

Table 1: Aspects of collaboration that contribute to Florida ECCS’s success:*

Aspects of Collaboration	Year 1 (n = 14)	Year 2 (n=16)
Bringing together diverse stakeholders	16.0% (12)	16.3% (14)
Exchanging information/knowledge	18.7% (14)	15.1% (13)
Having a shared mission/goals	13.3% (10)	14.0% (12)
Sharing resources	12.0% (9)	12.8% (11)
Collective decision-making	12.0% (9)	12.8% (11)
Meeting regularly	8.0% (6)	11.6% (10)
Informal relationships created	12.0% (9)	10.5% (9)
Formal relationships, MOUs	8.0% (6)	7.0% (6)

* Percentages may add up to more than 100% as respondents could choose all that apply.

* Bolded percentages indicate the top aspects of collaboration.



Potential Outcomes of Florida ECCS

The potential and most important outcomes of the Florida ECCS impact project were assessed through two survey questions. As with the aspects of collaboration, stakeholders were able to choose all of the potential outcomes that they believe could apply to state-level efforts. Respondents also were asked to choose which they believed would be the most important potential outcome of the impact project.

For the first year of the impact project, stakeholders selected *increased knowledge sharing* (6.9%, n=13), *innovation in service delivery* (6.4%, n=12), *improved services for children and families in high-need communities* (6.4%, n=12), *improved resource sharing* (6.4%, n=12), and *improved communication among agencies and organizations interested in the health and well-being of children and their families* (6.4%, n=12) as the top five potential outcomes of Florida ECCS’s efforts (Table 2). The top six potential outcomes of Florida ECCS’s efforts reported during Year 2 included *improved communication among agencies and organizations interested in the health and well-being of children and their families* (6.7%, n=14), *improved services for children and families in high-need communities* (6.7%, n=14), *reduction of health disparities* (6.3%, n=13), *increased knowledge sharing* (5.8%, n=12), *public awareness of issues related to the health and well-being of children and families* (5.8%, n=12), and *resources for professional development* (5.8%, n=12) (Table 2).

Table 3 displays stakeholders’ opinions of the most important potential outcome of the Florida ECCS impact project. Half of the state partners reported *improving services for children and families in high-need communities* (50.0%, n=7) as the top most important potential outcome of the project; the remainder selected other potential outcomes during Year 1. The most important potential outcome for Year 2 was also *improving services for children and families in high-need communities* (43.8%, n=7). The most important potential outcome options not selected by partners for both iterations of the survey were:

- Policy, law, and/ or regulation
- Public awareness of issues related to the health and well-being of children and families
- Increased coordination and referrals for other community resources
- Development of local systems for coordinated intake and referral
- Innovation in service delivery
- New sources of data
- Access to federal resources
- Support, expertise in using Continuous Quality Improvement (CQI)
- Health education services, health literacy, educational resources
- Expertise in using data to drive service delivery
- Improved resource sharing

Table 2: Potential Outcomes of the Florida ECCS Impact Project:*

Potential Outcome	Year 1 (n = 14)	Year 2 (n=16)
Improved services for children and families in high-need communities	6.4% (12)	6.7% (14)
Improved communication among agencies and organizations interested in the health and well-being of children and their families	6.4% (12)	6.7% (14)
Reduction of health disparities	5.3% (10)	6.3% (13)
Increased knowledge sharing	6.9% (13)	5.8% (12)
Public awareness of issues related to the health and well-being of children and families	5.3% (10)	5.8% (12)
Resources for professional development	4.8% (9)	5.8% (12)
Increased coordination and referrals for other community resources	5.3% (10)	5.3% (11)
Improved school readiness	5.3% (10)	5.3% (11)
Experience, expertise in implementing evidence-based interventions	5.3% (10)	4.8% (10)

Community support for the health and well-being of children and their families	5.3% (10)	4.8% (10)
Development of local systems for coordinated intake and referral	4.8% (9)	4.8% (10)
Health education services, health literacy, educational resources	3.7% (7)	4.8% (10)
Policy, law, and/ or regulation	2.7% (5)	4.8% (10)
Innovation in service delivery	6.4% (12)	4.3% (9)
Improved resource sharing	6.4% (12)	4.3% (9)
Support, leadership in Collective Impact	5.3% (10)	4.3% (9)
Support, expertise in using Continuous Quality Improvement (CQI)	4.8% (9)	4.3% (9)
Expertise in using data to drive service delivery	4.3% (8)	4.3% (9)
Access to federal resources	2.7% (5)	3.4% (7)
New sources of data	2.7% (5)	2.4% (5)

* Percentages may add up to more than 100% as respondents could choose all that apply.

* Bolded percentages indicate the top reported potential outcomes.

Table 3: Most Important Potential Outcome of Florida ECCS Impact Project:*

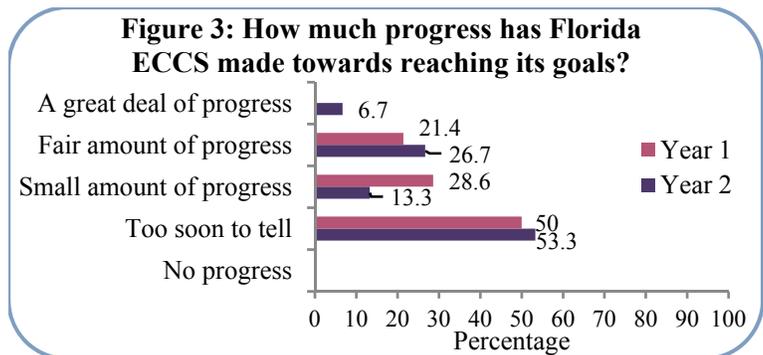
Most Important Potential Outcome	Year 1 (n = 14)	Year 2 (n=16)
Improved services for children and families in high-need communities	50.0% (7)	43.8% (7)
Reduction of health disparities	7.1% (1)	18.8% (3)
Community support for the health and well-being of children and families	7.1% (1)	12.5% (2)
Improved school readiness	7.1% (1)	6.3% (1)
Support, leadership in Collective Impact	7.1% (1)	6.3% (1)
Resources for professional development	0.0% (0)	6.3% (1)
Increased knowledge sharing	0.0% (0)	6.3% (1)
Experience, expertise in implementing evidence-based interventions	14.3% (2)	0.0% (0)
Improved communication among agencies and organizations interested in the health and well-being of children and their families	7.1% (1)	0.0% (0)

*Participants could only choose one answer option

* Bolded percentages indicate the top reported most potential outcome.

Progress of Florida ECCS

At baseline, 21.5% of stakeholders believed that a fair amount of progress had been made towards reaching the goals of Florida ECCS while none believed a great deal of progress has been made. By Year 2, 26.7% and 6.7% of stakeholders believed a fair amount and a great deal of progress had been made, respectively (Figure 3).



Discussion

This analysis reflects the baseline and second year results of the ECCS leadership network’s structure, collaborative processes, and expected outcomes of the Florida ECCS impact project. The network of partners reflects diverse engagement from a number of service sectors (social services, health, early

childhood education and early intervention, mental health, and parents/community members). These stakeholders, along with new state partners engaged throughout the impact project, will be asked to complete the PARTNER survey periodically through the five-year grant.

Network maps were created to evaluate the frequency of interactions of these stakeholders with the use of the PARTNER tool social analysis software. The number of interactions varied resulting in a density score of 57.4% for Year 1 and a density score of 45.8% for Year 2. Though the density score decreased, the presence of an ECCS lead resulted in a slight increase in density from 42.4% without an ECCS lead to 45.8% with the ECCS lead. There is still a fairly high level of trust (83.3%) among the group of year 2 stakeholders. As the second year of implementation has concluded, there has been a greater integration of services among some partners as the impact project progressed. As compared to 11.7% of stakeholders reporting integration of activities during Year 1, 20.4% of stakeholders reported integrated relationships in Year 2. Consistent with last year, *exchanging information/knowledge*, *bringing together diverse stakeholders*, and *having a shared mission* are aspects of collaboration that partners perceive most contribute to the progress of ECCS achieving its goals.

For Year 2, the stakeholders' perceptions of the Florida ECCS impact project's potential outcomes include *improved services for children and families in high-need communities*, *improved communication among agencies and organizations interested in the health and well-being of children and their families*, and *reduction of health disparities*, and of the twenty outcome choices, the most important reported potential outcome for Year 1 and Year 2 of the impact project was *improved services for children and families in high-need communities*. At baseline, half of the stakeholders believed that a fair/small amount of progress while the remaining stakeholders believed that it is too soon to tell if the project had made progress towards its goals. In Year 2, 26.7% and 6.7% of stakeholders believed a fair amount and a great deal of progress had been made.

Next Steps

This network analysis of the state-level partnerships contribute to an understanding of the state's structure, organization, and current system through the lens of multiple stakeholders and aims to document their efforts and ultimately, positive impacts in Florida. The next step for the evaluation team is to continue to gather qualitative data through focus groups to further understand the collaboration activities of the child development and well-being agencies in Florida. Additional evaluation efforts to measure how state agencies are progressing according to the newly innovative racial equity indicators identified by the state and local needs through Plan-Do-Study-Act (PDSA) data, public and program data, and focus groups will be conducted to improve ECCS systems and outcomes. Moreover, through data collected from PDSAs, PARTNER Tool, and focus groups, the evaluation team will be able to assess how Florida is developing and implementing plans to meet the needs of the state.

For more information, please contact:

Jennifer Marshall, PhD, MPH, Assistant Professor, Lead Evaluator
University of South Florida College of Public Health
Chiles Center for Healthy Women, Children and Families
(813) 369-2672, jmarshall@health.usf.edu
FL ECCS Evaluation: <http://health.usf.edu/publichealth/chiles/eccs>

