



ZERO TO THREE
Early connections last a lifetime

Better Outcomes for Babies: Key Practices of Cross-System Collaboration

Introduction

States achieve better outcomes for infants, toddlers, and families when they work collaboratively across systems and when services are coordinated and connected. By working collaboratively, states have:

- strengthened referral pathways, leading to more children and families receiving services they need;
- increased the number of children and families served by leveraging funding;
- integrated developmentally appropriate services into settings where families already are;
- improved the quality of services across sectors;
- focused on a more efficient use of existing resources;
- increased convenience for families to access multiple services in a single location;
- met the needs of adults and children at the same time; and
- targeted multiple barriers that families face.

Cross-sector work is not easy. It can involve challenges such as getting leadership from different state agencies to come to agreement on a unified model and ensuring that staff from multiple agencies are speaking the same language.

Core Policies for Infants, Toddlers, and Families

In 2017, with funding from the W.K. Kellogg Foundation, ZERO TO THREE and the Center for Law and Social Policy (CLASP) led an initiative to identify federal and state policy actions that advance the field in addressing the well-being of infants, toddlers, and families. This project, [*Building Strong Foundations: Advancing Comprehensive Policies for Infants, Toddlers, and Families*](#) was guided by a Policy Framework comprising four principles describing the needs of infants, toddlers, and their families, based on a large body of developmental research: Babies need healthy bodies, healthy minds, and healthy parents; economically stable families; strong parents; and high-quality child care and early education opportunities. In the first phase of *Building Strong Foundations*, ZERO TO THREE and CLASP identified [13 policies](#) core to advancing infant-toddler well-being.

While not a comprehensive list, the state profiles included in this series—Colorado, Illinois, New Jersey, and Washington—connect two or more core policy areas to collaboratively meet the needs of babies, young children, and their families. They are meant to inspire and offer tips for states interested in embarking on similar collaborations. This companion brief identifies some of the common practices that were critical to the states' collaborative efforts.

It is important to note that because this series is specifically focused on collaboration, it does not include examples of state innovation that center on a single policy area. ZERO TO THREE has several other resources that highlight such strategies, including [A Place To Get Started: Innovation in State Infant and Toddler Policies](#), and the [State Initiatives Collection](#).

Cross-System Collaborative Initiatives

- Colorado: Embedding a Two-Generation Approach Into State and Community Systems
- Illinois: Developing a Unified Model for Infant and Early Childhood Mental Health Consultation
- New Jersey: Providing Families With a Single Point of Entry for Accessing Services
- Washington: Strengthening Partnerships Between Temporary Assistance for Needy Families and Home Visiting Systems

Key Practices of Cross-System Collaboration

Colorado, Illinois, New Jersey, and Washington are just a sample of the states that have designed cross-system collaborative efforts for infants, young children, and families. These efforts share common elements related to design and implementation, leadership, partnerships and collaboration, workforce, funding, and evaluation. While the focus of these efforts differs from state to state, there are key practices that have contributed to their success and can be replicated in other states.

Design and Implementation

- **Rely on the expertise and experience of professionals on the ground.** Professionals who are doing the work are best suited to think through how a model will work in different systems. Illinois' Infant and Early Childhood Mental Health (IECMH) consultation model was developed by IECMH consultants and then presented to the leadership team for approval. Although the groups worked closely together in the final stages, it was essential that professionals doing the work on the ground led the process.
- **Build goodwill and momentum early in the design process.** New Jersey worked to cultivate interest and support from multiple state departments from the beginning of their central intake system development, which was a key ingredient of their success.
- **Stay committed for the long haul.** Building an initiative takes time. New Jersey emphasized that it took a long time to build their central intake initiative and nurture the relationships. They weathered tough times along the way but were committed to achieving their ultimate goal of a statewide system.

Leadership

- **Engage state system leaders.** Convening state system leaders has been an important strategy across each state initiative. Illinois found that looking collaboratively at IECMH consultation was critical. Without leadership support, there would have been no commitment to implement the unified model.
- **Encourage adaptive leadership.** Washington's initiative required professionals to change how they were thinking and acting. It was essential that leaders at the state and community levels were supportive of change and willing to enact new processes. Similarly, Colorado invested time and resources in educating leaders at all levels about the importance of integrating a

two-generation approach into existing work. Time spent learning and strategizing together led state and county officials to change the way they interact with families and each other.

- **Cultivate strong local leadership.** All of the states have acknowledged the importance of cultivating strong leadership at the local level. Washington's powerful local leadership was critical in building its referral pathway.

Partnerships and Collaboration

- **Build relationships across systems.** Working to build relationships across systems has been a critical strategy for all four states. For example, most of the individuals involved in the Illinois initiative have known and worked with each other for a long time. These trusting relationships made it possible for them to have difficult conversations and compromise to come to agreement on a unified IECMH consultation model.
- **Agree on shared language and assumptions.** Systems do not come to the table with the same assumptions; achieving consensus takes time. New Jersey worked to ensure that everyone—from the community level to the state level—was speaking the same language at the same time. They emphasized the need for a communications vehicle where communication flows from the bottom up, from the top down, and horizontally. Washington also worked to come to agreement on shared language. This was a process that took some time and intentional effort at the state and local levels.
- **Learn about the other system.** Professionals working in one state system do not necessarily have knowledge of other systems. They often weren't built to be aligned. Washington is intentionally focused on creating opportunities for the two systems involved in this collaboration (Temporary Assistance for Needy Families [TANF] and home visiting) to learn about each other.
- **Make use of existing professional networks.** Many professional networks at the national and state levels can serve as great partners and collaborators. Colorado engaged members of the Ascend Network, who have become champions for the work. Having supporters across sectors representing different professional disciplines is directly impacting sustainability across two-generation projects in Colorado.
- **Engage parents and families.** Some states have found that parents and families played an integral role in the creation and implementation of programs. New Jersey intentionally included parents in designing and implementing their central intake system, by recruiting them to participate in state and county advisory boards. Colorado engaged the families they serve in program and policy design and implementation, to better understand the problems they are experiencing. They are thinking together about how government can help families address their needs.



Workforce

- **Hire staff dedicated to the program.** Collaboration takes time and intentional effort and can be difficult when there is no one to manage it. Illinois found that funding a position explicitly charged with overseeing the IECMH consultation initiative was essential. Washington has a staff person dedicated to the TANF Home Visiting pilot who is available to meet with community members, answer questions, think through processes, and review data. Colorado has staff dedicated to two-generation work in the Governor's Office and the Department of Human Services. Specifically calling out collaboration as part of a job position has been crucial.
- **Address staff turnover proactively.** Staff turnover is an issue across all four states. It can be challenging and disruptive. The success of Washington's TANF home visiting partnerships relies on local relationships as much as systems. Having plans in place to train new hires and support them with implementation has been essential. New Jersey invites new employees to the table regularly to explain the importance of the initiative and the key role they are playing.
- **Provide professional development opportunities.** All four states discussed the critical importance of professional development. Colorado ensured that professional development opportunities for staff included two-generation approaches. Providing regular opportunities to help all staff understand the importance of making this shift was essential to building support and eliciting creative ideas.

Funding

- **Utilize existing funds.** All four states have mentioned the need to be creative and flexible with funding. Recognizing that new funding is not always available, Colorado has focused on rethinking how they are using existing funding to support families. They've also worked intentionally to blend revenues across departments and with philanthropy.
- **Seek in-kind contributions.** Because of limited funds, some states mentioned the need to seek in-kind contributions. Illinois' pilot is being funded not only by private foundations, but also by the state through in-kind contributions. Some state systems are absorbing the cost for existing IECMH consultants to participate in the pilot.
- **Leverage federal grants.** States have to think creatively about other sources of funding. For example, New Jersey leveraged several federal grants, including Maternal, Infant, and Early Childhood Home Visiting (MIECHV), Early Childhood Comprehensive Systems (ECCS), Project LAUNCH (Linking Actions for Unmet Needs in Children's Health), and Race to the Top—Early Learning Challenge (ELC) to support the expansion of the county-based central intake hubs.

Evaluation

- **Invest in evaluation.** Collecting and analyzing data is an important tool to check assumptions and make sure decisions are based on factual information. Illinois decided to invest significant funding toward an evaluation of their IECMH consultation model in hopes that what they learn will help them better serve young children and families.
- **Develop shared data and data systems.** New Jersey developed a statewide centralized management information system that is standardized across all 21 counties and provides all the data needed to evaluate the system and



try to improve it. In Washington, a client management system that both programs can use for referrals and tracking families' engagement with services has been extremely helpful.

- **Integrate family outcomes into accountability systems and data collection efforts.** Colorado's Department of Human Services asks offices/divisions to look beyond the goals of their individual program areas to consider the impact their services have on the entire family. Several state departments also collaborated to create an Opportunity Framework to identify common metrics all programs should support.
- **Use data regularly to engage in continuous quality improvement (CQI).** Several states have found that data can inform ongoing CQI. New Jersey's state-level CQI committee recently engaged in a CQI project focused on improving efficiency in how families move through central intake to home visiting programs.

Conclusion

Policymakers are increasingly paying attention to the unique needs of our nation's youngest children. Despite funding constraints and the challenging political landscape, states are working to create programs and services that are sustainable over time, through changes in political leadership and continually shifting priorities. The state profiles included in this series illustrate the benefits of cross-sector work. They connect two or more of the core policy areas to collaboratively meet the needs of babies, young children, and families. And they are just a sample of the states that have designed cross-system collaborative efforts for our nation's youngest children and their families.

While Colorado, Illinois, New Jersey, and Washington each have a different context, these profiles are meant to inspire and offer lessons learned for other states interested in embarking on similar collaborations. Their examples demonstrate that states achieve better outcomes for babies and their families when they work collaboratively across systems.



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For more information about the *Building Strong Foundations* project, and to access the case studies in this series, please visit www.zerotothree.org/resources/series/building-strong-foundations.

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