Early Childhood Mental Health Consultation (ECMHC) Hub Feasibility Study Report and Roadmap

June | 2019
Introduction

In the Fall of 2018, a group of stakeholders including representatives from Early Milestones Colorado, the Office of Early Childhood, and a team of public and private partners determined that a feasibility study was a necessary step to determine the start-up functions, structure, and operations of a statewide “Hub” for early childhood mental health consultation (ECMHC) in Colorado. The Hub is envisioned by the stakeholders to be a public private partnership and will create a consistent central resource for mental health consultants supporting children’s social-emotional development across various settings. The stakeholders recommended an “accelerator” model be used as a means to expand upon the existing functions already in place at the Office of Early Childhood. The stakeholders also recommended that the Hub live within an existing organization, rather than create a new entity.

Services that would be offered through the Hub include training, support, measurement, reporting systems, fundraising and advocacy for ECMHCs. The feasibility study, conducted by JSI Research and Training Institute, Inc. (JSI), aimed to understand the essential characteristics of an accelerator model of a public private network or infrastructure to support ECMHCs. The core research question of JSI’s work was, “What are the essential practices for managing the fiscal and programmatic elements of a public private partnership?” The study was conducted from January to May 2019. This report provides a brief background description and highlights the key findings and recommendations through the following sections:

Colorado IECMHC Snapshot  Scope of Study  Findings and Recommendations
Colorado ECMHC Snapshot

Colorado has a long history of public and private investments in early childhood mental health consultation. The Office of Early Childhood (OEC) supports 34 full-time equivalent consultants across the state and more than 24 additional consultants are supported through a variety of other funding sources. Colorado’s statewide leadership in building capacity for ECMHC includes:

- **Office of Early Childhood’s Early Childhood Mental Health Unit**, which has served to provide program development, professional learning supports, and funding of the Early Childhood Mental Health Specialists program,
- **ECMHC Consultation Systems Building Committee**, which was convened in 2008 as a subcommittee of Colorado’s Blue Ribbon Policy Council for Early Childhood Mental Health to support grant-funded ECMHC initiatives in the Colorado Department of Human Services/Office of Behavioral Health, and
- **The Funders Learning Network on Early Childhood Mental Health**, a diverse group of Colorado grantmaking organizations that fund in many areas and have shared interest in children’s mental health. Members convene regularly to share ideas, learn, and work together to improve the social, emotional, and mental health of children birth to age three.

**Snapshot of Colorado ECMHC Workforce**

While the OEC has been thoughtful in assessing the needs of ECMHCs and finding opportunities to promote consistency of practice outside of its system, it does not officially serve as an infrastructure for consultants funded by non-state sources. Consequently, many consultants are isolated from a community of practice, as well as resources that could help guide their work. A vision was established for a Hub that builds upon what already exists to provide resources beyond what is currently available through the OEC in the areas of training, support, consistent measurement and reporting systems, fundraising and advocacy.
Scope of Study

This feasibility study aimed to understand the accelerator model of a public private network or infrastructure to support ECMHCs. By researching the essential practices for managing the fiscal and programmatic elements of a public private partnership, ECMHC stakeholders will have the information needed for Hub development and implementation. Additionally, by recommending a model for the Hub’s operations, governance structure, and sustainability, funders can see the potential of an investment in the initiative. The phases of the feasibility study included:

1. Demand Assessment
   
   Goal: Determine the demand of and need for the Hub

2. Technical Feasibility
   
   Goal: Identify essential structural elements of the potential location or “home” for the Hub

3. Operational Feasibility
   
   Goal: Forecast the potential costs, staffing models, and governance structure for the Hub
Scope of Study, Continued

The feasibility study was conducted from January - May 2019. The project included four key activities:

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<tr>
<th>JAN</th>
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<tr>
<td>Background research</td>
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<td>Key informant interviews</td>
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<td>Synthesis and reporting</td>
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<td>Facilitated discussion to share findings</td>
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**Background research**

From January through February, JSI reviewed the foundational feasibility study resources (cited above) to understand the history, planning, discussion topics, and decisions to date specific to the Hub. JSI also conducted an internet scan for public private ECMHC Hub models, which did not yield any viable and relevant existing models. During this initial phase, JSI had two meetings with Early Milestones and the OEC to share a proposed list of key informants and a sample layout for the final roadmap using an adapted LeanCanvas format¹, a streamlined business plan template that highlights essential assumptions. The key informant interview list was revised and organized by priority order based on its relevance to a public private model. On February 21, JSI and Early Milestones attended the Funders Learning Network on Early Childhood Mental Health meeting to provide a briefing on the feasibility study and to collect possible best practice models for public private partnerships. JSI received additional recommendations for key informants and support for the LeanCanvas roadmap layout. A key informant interview guide was drafted, piloted, and approved by the Early Milestones and OEC team.

**Key informant interviews**

From February through April, JSI conducted 15 key informant interviews, one in person and fourteen over the phone. Two interviewees managed or had a major role in coordinating a Hub-like partnership in other states. The other interviewees were executives, administrators, directors, and managers of public private partnerships in Colorado. Interviewees were asked questions about their organizational structure, legal structure, services, governance, staffing, costs, and implementation of their public private partnership.

**Synthesis, recommendations and reporting**

From April through May, JSI synthesized the findings and insights from the interviews and summarized the results into this report and roadmap.

**Facilitated discussion to share the findings**

In June, JSI shared the findings with stakeholders through a facilitated discussion with the goal of determining the best course for transitioning the project from feasibility study to implementation and launch.
Findings and Recommendations

Each phase of the feasibility study yielded results to help inform and guide the development of the ECMHC Hub in Colorado. An overview is included below with considerations and recommendations following.

Demand Assessment

The need for a centralized ECMHC Hub to provide consistency and reduce consultant burden in accessing resources and support has been well documented from prior background research. The background research also suggests the Hub will increase capacity and meet the needs of the ECMHC workforce by providing system coordination, professional development, and a shared platform to creatively address challenges. In addition to centralization, the need for a private partner who can advocate and fundraise was identified as essential to the Hub. Stakeholders, including funders, recognize the value of centralization of efforts to ensure the most efficient use of funding.

Technical Feasibility

This analysis summarized themes and identified several structural components critical for the location or “home” of the Hub in order for its success, which include:

- Both a virtual and physical space
- A computer infrastructure system (hardware system) and technology (software systems)
- Existing reputation among ECMHCs as a place to go for resources and information
- Leverage the “home” organization’s finance, accounting, marketing and communication systems to support and promote the Hub
Operational Feasibility

Recommendations for operational best practices of a Hub are summarized in four sections below:

1. **Operational Best Practices** sorted by frequency mentioned by key informant interviewees, and categorized by the following:

   - **Must Haves**
     *Characteristics that were most mentioned and cited as essential to a successful Hub.*

   - **Nice to Have**
     *Characteristics mentioned as a beneficial element to consider, but not essential to a successful Hub.*

   - **Avoid**
     *Characteristics to avoid when starting up and rolling out a successful Hub.*

2. **Hub Roadmap** providing a high-level snapshot of the suggested business model.

3. **Implementation Plan** detailing how to implement the suggested recommendations in the short term and ongoing considerations.

4. **Summary of Recommendations** that build from the key informant interviews, as well as established best practices to position the Hub for success.
# Operational Best Practices

## MUST HAVES

### Clear and transparent communication
- Build and maintain shared ownership through open conversations
- Maintain clear and responsive communication with stakeholders to support the collective effort that the Hub was built upon

### Trusting relationships between partners
- Take the time to create a shared vision to guide the partnership in its decisions
- Include all major players and, when possible, integrate what they have already created rather than recreating

### Clearly defined roles and responsibilities of each partner
- Detail in a charter or written agreement to ensure a shared foundation and understanding for each partner
- Both the public and private entities must be invested in the partnership and see the value each brings to the arrangement

### Demonstrate outcomes
- Documenting program outcomes and demonstrating return on investment is advantageous

### Sustainable funding structure
- Diversify funding sources to mitigate risk of relying on only one or two funding sources
- Secure long term, committed funding to provide continuity for Hub structure and avoid diverting time wasted on scrambling to secure alternative funds

### Advocacy for Hub
- One of the largest advantages of the private entity in the partnership is their ability to engage in advocacy efforts to benefit the ECMHC field

### Coordinator for the Hub should have previous experience in early childhood systems in Colorado
- Being well established and connected will expedite the development and implementation of the Hub

### Utilize existing systems and tools relevant to ECMHCs
- “Don’t reinvent the wheel”

## NICE-TO-HAVES

### Quick decision-making process across partners
- Coordination and communication across the Hub are essential to its success, but also time consuming
- Streamlined organizational structures enable the Hub to be more efficient

### Nimble structure in order to be responsive to partners/clients
- Restrictive organizational structures can create additional barriers in achieving aims of the Hub

### Neutral in moving the common agenda forward
- Restrictive organizational structures or a narrow mission/vision could limit the Hub’s ability to achieve its agenda

### Connect data management systems to Hub, such as a dashboard, to increase real-time engagement and utility for users
- Host a centralized reporting system on the Hub platform to further integrate measures, facilitate a better user experience for consultants, and provide targeted support services based on needs
- Include any easily measured metrics that can illustrate program success so metrics can be leveraged by all partners for funding opportunities

### Create a customer journey map or conduct an assessment
- Determine what consultants expect from the Hub and what will be most valuable to them to enhance user engagement

## AVOID

### Duplication of efforts
- The Hub should capitalize on its “home” organizational structure’s expertise of the field and build on it; rather than causing a more fractured and siloed resource supporting ECMHCs

### High indirect cost rates
- High indirect cost rates detract from efficient and effective use of funds for the Hub services
- Some funders will not consider supporting projects that include high indirect cost rates

### Working within a restrictive and/or time-consuming organizational structure
- A complex and/or time-consuming organizational structure could be detrimental to the Hub’s effectiveness as a convener and its ability to nimbly respond to shifting political priorities

### Utilize existing systems and tools relevant to ECMHCs
- “Don’t reinvent the wheel”
# Hub Roadmap

The canvas model below depicts the integrated considerations for a Hub based on the most commonly cited characteristics from the interviews. The format can be considered a “roadmap” to understanding the essentials for a public private partnership model.

## High Level ECMHC Hub Concept
- Public private partnership that creates a central resource for early childhood mental health consultants across settings
- Hub would exist within an existing organization, rather than create a new entity
- Primarily virtual space with physical office space
- Virtual space serves as a central point to access all resources and supports for ECMHCs; user interface allows for required data input and report production, access to resources, and a way to request technical assistance or training

## Hub Services Offered
- Training
- Peer mentoring
- State “huddles” (short webinar case studies)
- Quarterly seminars
- Technical assistance
- Resource center
- Discussion forum
- Newsletter
- Listserv
- Marketing and advocacy tools
- Public search functions for ECMHC
- Job board

## Hub Organizational Structure
- Coordinator would provide leadership management and operations of the Hub
- Hybrid organizational structure would allow responsibilities to be divided among implementing partners’ areas of expertise
- Operations of the Hub would comply with the established systems within home organization (i.e. finance, accounting, human resources)

## Hub Governance Model
- Hub “home” organization with Coordinator develops MOUs with partners
- Hub Coordinator regularly convenes Hub Partnership Committee to discuss operations, activities, objectives for the Hub functions; meetings should follow a structured agenda template that is sent out to partners in advance
- Sub-committees may form based on topic areas of interest among partners

## Hub Legal Structure
- Comply with legal systems of the Hub “home”, which generally follow a 501c3 “charitable organization” structure

## Public/Private Best Practices
- Trust and open communication
- Willingness to compromise
- Community engagement
- Well defined roles and responsibilities
- Shared vision

## Hub Staffing Approach
- 1 FTE Coordinator with a deep knowledge of the dynamics and key stakeholders within the field of ECMH
- 1 FTE ECMHC expert to advise and manage technical assistance requests
- 0.25 FTE IT professional to support ongoing operations
- 0.25 FTE Finance and Accounting support
- 0.25 FTE Evaluation and Data support
- Leverage in-kind/donated staff, such as marketing and communications
- Staff skill requirements: proactive with good interpersonal communication skills

## Cost Model (start-up and operational costs)
- State OEC funds
- Private foundation funds (Funders Network on ECMH)
- Federal funds (Early Head Start/Head Start, SAMHSA Project LAUNCH)
- Leverage in-kind, when possible

## Sustainability Considerations (revenue streams)
- Annual subscription fee to access Hub (variety of price modeling available; i.e. sliding fee; tiered, etc.) or fee for service
- Procure a minimum of 3-5 years of funding at a time
- Request dollar matching from funders, so funders are matching revenue generated, translating into perceived value from user
Implementation Plan

The following recommendations are a summary of the findings from this report that JSI believes to be the most critical steps for ECMHC stakeholders to consider.

Short-term recommendations

1. **Form a Hub Partnership Committee**: In preparation for Hub development, form a *Hub Partnership Committee* to provide oversight, unique knowledge, and skills from public and private entities to guide the Hub implementation. The committee should not exceed 10 people and should include the OEC, private foundations supporting ECMHCs, representatives from the Colorado Behavioral Healthcare Council and the Colorado Association for Infant Mental Health, and consultants with rural and urban field expertise. An application process and a neutral facilitator can facilitate successful formation.

2. **Identify a technology platform for the Hub that builds from existing resources**: The *Hub Partnership Committee* should determine whether the OEC database can be expanded for broader use or a vendor will be needed to build out a virtual platform for the Hub.

3. **Select a “home” organization for the Hub**: Through a competitive process, the *Hub Partnership Committee* selects a “home organization” to develop and operate the Hub. A request for proposals (RFP) or other similar process should require a more detailed business plan, including a start-up action plan with clearly stated goals and objectives, metrics for success, and budget.

4. **Develop a marketing and communications plan that aims to build awareness of the Hub**: Develop a plan to define how the Hub will be introduced, branded, and publicized to the ECMHCs and community as a whole, including whether a pilot phase is needed. Seek support and leverage the home organization’s communications capacity, as well as the stakeholders’ mechanisms, if possible.

5. **Develop a sustainability plan (including fundraising and advocacy strategy)**: The *Hub Partnership Committee* and Hub “home” develop a more detailed plan that describes the accountability for continuing the work and funding for the Hub. Fundraising strategies, including a potential fee structure, possible threats, and advocacy efforts could be included.

Ongoing considerations

6. **Conduct careful, ongoing review of operations, revenues and expenses of the Hub**: Revise the model as needed. Facilitate continuous review of sustainability plans to ensure ongoing progress is being made.

7. **Support ongoing meetings with the Hub Partnership Committee**: Utilize input and guidance from the group.

8. **Conduct user testing to ensure the Hub is responsive to the end user’s needs**: Establish feedback loops for users to share their experience and ideas for improving the Hub.

9. **Conduct ongoing advocacy for the Hub and ECMHC**: Continue to raise awareness of the value of the Hub and provide resources and information to partners to ensure a network can be activated when necessary to address any advocacy needs.

10. **Seek opportunities to disseminate impact and lessons learned from the Hub experience**: Leverage dissemination opportunities to influence and inform the professionals about the Hub and its impact.
Summary of Recommendations

Throughout the process of this feasibility study, it became increasingly apparent that there is a need for a consistent source of information and connection for mental health consultants who support the social-emotional development of young children. It is also apparent that an ECMHC Hub is a strategy that can assist in meeting this need in an efficient manner. Based on JSI’s experience and the experiences of those who have implemented and managed similar Hubs, the following strategic recommendations for both the Hub “home” organization and the Hub itself are offered below.

1. The Hub “home” organization would ideally be an entity where ECMHCs already visit and/or recognize as a resource for information (such as Colorado Association for Infant Mental Health or Healthy Child Care Colorado) with the following characteristics:
   - The Hub could most effectively support collective decision-making among the public private partnership if the “home” organization has a neutral mission.
   - Due to the additional financial burden, a “home” organization with high overhead costs is not recommended as a viable location for the Hub.
   - Considering a Hub “home” that is embedded within an organization with a complimentary mission and programs to reduce startup costs and the operating budget. By embedding the Hub, costs could be shared with existing programs, significantly reducing total operating expenses and creating more financial stability. It could also capitalize on engaging existing stakeholders, creating a more cohesive broader network for the early childhood field.
   - Anticipated Hub expenses are included below with approximate costs:

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<tr>
<th>Item</th>
<th>Approximate Start-up Cost</th>
<th>Approximate Annual Cost</th>
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<tr>
<td>General operating expenses</td>
<td>$25,000</td>
<td>$25,000</td>
</tr>
<tr>
<td>Salaries &amp; benefits for 2.75 FTE</td>
<td>$187,500</td>
<td>$187,500+</td>
</tr>
<tr>
<td>Website</td>
<td>$25,000 - $75,000</td>
<td>$10,000</td>
</tr>
<tr>
<td>Program &amp; communication expenses</td>
<td>Variable</td>
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   - The ability to advocate for sustained funding is critical to sustain the functions of the Hub over time. To reduce the risk of staff stretched too thin or budget cuts, the Hub cannot be vulnerable to unreliable funding. The Hub “home” should be well connected in the field and skilled in advocating and fundraising.

2. The Hub Coordinator should be knowledgeable, well connected, and familiar with the systems serving early childhood in Colorado. Key informant interviews suggest this position is approximately equivalent to 1.0 FTE.

3. Be responsive to demand and needs of the ECMHCs using a customer journey map and user testing.

4. Be clear of the value proposition of the public private partnership. Share that value proposition with the partners.

5. During the initial planning and implementation phase, establish metrics for success for the public private partnership.

6. Diversify funding for the Hub. Identify revenue streams beyond government funding.

7. Prioritize marketing and communications for the Hub. Work to develop a strong brand integrity of the Hub.

Given these recommendations, a critical next step will be the formation of a Hub Partnership Committee with clear governance and decision-making protocols in order to shepherd the work forward. While the research to date has uncovered significant interest and demand, there is not a clear entity leading the effort. With a strong commitment to a public private partnership, an ECMHC Hub could provide necessary supports to a workforce dedicated to improving the lives of children and families across Colorado.
Sources

¹ https://leanstack.com/leancanvas.
² Mission Spark. ECMH Hub Key Informant Interview Summary and May 21, 2018 Stakeholder Meeting Summary, Small Group Notes and Draft ECMH Asset Table.