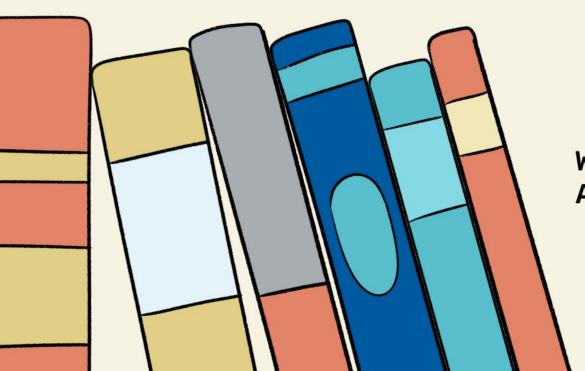
Librarians as Key Players Community Health and Child Development



Creative partnerships for healthy communities

Whitefield Public Library & Ammonoosuc Community Health Services

Your Presenters

Courtney Vashaw, M.Ed., CAGS; Director of the Whitefield Public Library and ACHS Project Lead

Lyn Schmucker, M.S.Ed; Whitefield Public Library Programming Director and ACHS Early Childood CHW

Alyssa Antonucci, BA-CHW; Ammonoosuc Community Health Services Early Childood CHW 77

PROBLEM: In 2018, the Whitefield Public Library's budget was \$45,000. We had \$8,000 for books, but little money for anything else, especially staffing.



TIME TO GET CREATIVE!

Fundraising and grants were essential, but community partnerships can increase how far you can stretch those dollars.

Who were our potential partners?

(Use ALL of those connections!)

SIDE NOTE:

While exploring partnerships and funding, it was important to educate potential collaborators about what libraries DO in the 21st century.

About 50% of my job had nothing to do with books, but was more along the lines of SOCIAL SERVICES.

And then COVID hit...

AMMONOOSUC COMMUNITY HEALTH SERVICES HAD A NEW PROBLEM:

HOW COULD ACHS CONNECT PEOPLE WITH HEALTH INFORMATION OUTSIDE OF THE CLINICAL SETTING?

COVID tests, masks, information, etc.

ACHS HAD MONEY AND RESOURCES, THE LIBRARY HAD ACCESS TO THE COMMUNITY.

And people TRUST libraries!

A partnership was born!

ACHS brought on library director as their "boots on the ground" in the community.

7

I did community needs assessments, surveys, distributed COVID tests, masks, and information. I also listened...

1000+ COVID TESTS DISTRIBUTED!!

(We also started working with food security.)

Using COVID (ACHS helped s position.



I did community needs assessments, surveys, distributed COVID tests, masks, and information. I also listened...

```
1000+ COVID TESTS DISTRIBUTED!!
(We also started working with food security.)
```

Using COVID grant funding, ACHS helped subsidize this position.

This put \$15,000 back in the library budget.

A NEW COLLABORATIVE PROJECT in 2024

ACHS got a grant to improve access to early childhood screening.

PROBLEM: 25% of children in our area are not being screened for developmental delays.

How do health centers better reach families, especially in rural areas?

SOLUTION: Use "Community Health Workers" to meet families where they are.

And where are they?

LIBRARIES!

Library staff come on board!

- · Library director comes on as project lead.
- Children's Programming Director works in dual capacity. Some of the work overlaps (subsidized by ACHS).
- · Outside work is paid for by ACHS.
- ACHS also hired a non-library staffer to do outreach and assessments.

ALL RECEIVE CHW Training!

56 hour multi-week training for all.

Scholarships and stipends available.

North Country Health Consortium & Southern NH AHEC are amazing community resources!

What kind of work does a CHW do?

(...and how much of it are you already doing?)

You are a trusted member of the Community.

Librarians KNOW THINGS!

And what we don't know, we typically know how to find.

Librarians are CONNECTORS to resources, information, and ideas.

Confidentiality

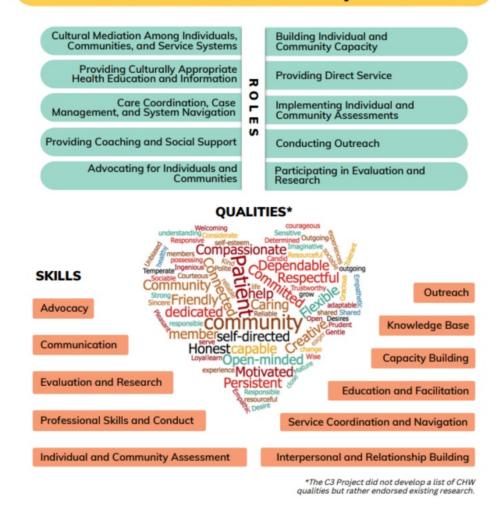
Librarians are NOT bound by HIPAA (Health Insurance Portability and Accountability Act), but we are professionally bound to not disclose private/sensitive information.

CHW Self Assessment Tools



Figure 1:
The CHWs Roles and Competencies
Support Pyramid

The C3 Core Roles & Competencies



The C3 Core Roles & Competencies

Cultural Mediation Among Individuals, **Building Individual and** Communities, and Service Systems Community Capacity Providing Culturally Appropriate Health Education and Information **Providing Direct Service** 0 Care Coordination, Case Implementing Individual and Management, and System Navigation Community Assessments ш S **Providing Coaching and Social Support Conducting Outreach** Advocating for Individuals and Participating in Evaluation and Communities Research **QUALITIES*** Compassionate SKILLS Outreach Advocacy **Knowledge Base** Communication **Capacity Building**

experience Motivated

Persistent 8

Evaluation and Research

Education and Facilitation

Professional Skills and Conduct

Service Coordination and Navigation

Individual and Community Assessment

Interpersonal and Relationship Building

*The C3 Project did not develop a list of CHW qualities but rather endorsed existing research.

CHW Skills...

- 1. Communication Skills
- 2. Interpersonal and Relationship-Building Skills
- 3. Service Coordination and Navigation Skills
- 4. Capacity Building Skills
- 5. Advocacy Skills
- 6. Education and Facilitation Skills

More CHW skills...

- 7. Individual and Community Assessment Skills
- 8. Outreach Skills
- 9. Professional Skills and Conduct
- 10. Evaluation and Research Skills
- 11. Knowledge Base

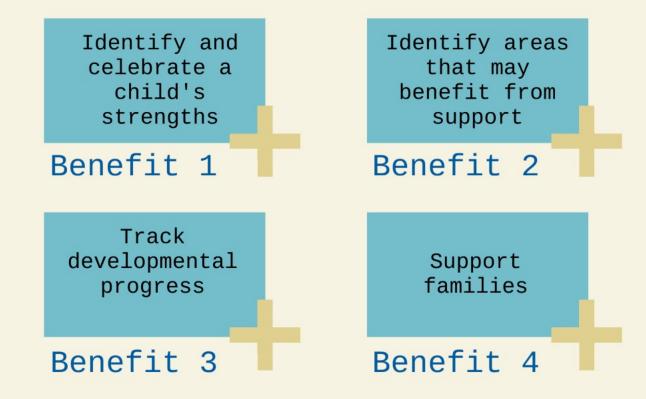
Where we are today...

We are staffed up, trained, and ready to roll!

- Soft-launch of the screening process
- Resource collections
- Referrals and outreach
- Making connections with other community partners who are also working on kindergarten readiness & assessing delays

ACHS ECD Screening Initiative

Why do Developmental Screenings?



The earlier a need is identified and addressed, the more effective and less expensive it will be, and will lead to better life outcomes.

Why the Ages and Stages Questionnaire (ASQ)?

The ASQ is the gold standard screening tool for children. There are 2 types: The ASQ-3 & The ASQ:SE-2

When choosing a screening tool, it's important to select one that's reliable, research-based, and rigorously reviewed.

Similarities and Differences Between



The ASQ*-3 and ASQ*:SE-2 tools help parents and professionals to build a picture of children's development and abilities. While these tools share some common features, they also have unique differences that are important to know!

Similarities

- Parent-completed
- Used in diverse settings (early learning, parenting, pediatrics, public health)
- Flexible administration (print, online, with or without support)
- Written at 4th-6th grade reading levels
- · Culturally sensitive
- Screening process opens discussion with parents about child's development
- Monitoring zone points to areas that would benefit from practice or support
- Referral area indicates need for ongoing assessment (and possible services)
- Overall section captures parent concerns, qualitative details about child's skills/behavior
- Follow-up includes parent concerns
- Extensively researched with high reliability and validity

Unique features of

ASQ3

- Screens 5 developmental areas
- 21 questionnaire intervals screen from 1–66 months
- Number of items consistent across questionnaire intervals
- Items address competence skills
- Item response options: Yes, Sometimes, Not Yet
- · Scoring of item responses is consistent
- Before answering, items must be tried with child
- Answers based on observation of child's skills
- Results of multiple questionnaires (parent, teacher, other caregiver) can be combined for scoring
- Scores below cutoff in any area indicate need for follow-up

Unique features of

· Screens 1 developmental area

- 9 questionnaire intervals screen from 1–72 months
- Number of items varies across questionnaire intervals
- Items mix social competence and problem behaviors
- Item response options: Often or Always,
 Sometimes, Rarely or Never
- · Scoring of item responses varies
- Items may be answered based on recent memory of child's behavior
- Answers based on observation and personal interpretation of behavior
- Results of multiple questionnaires (parent, teacher, other caregiver) should not be combined for scoring
- Scores above cutoff indicate need for follow-up

Learn more about the ASQ tools at www.agesandstages.com

Ages & Stages Questionnaires* and ASQ* are registered trademarks of and #ASQ , #ASQ3 , and #ASQ are owned by Paul H. Brookes Publishing Co., Inc. All rights reserved.

Similarities and Differences Between



The ASQ*-3 and ASQ*:SE-2 tools help parents and professionals to build a picture of children's development and abilities. While these tools share some common features, they also have unique differences that are important to know!

Similarities

- Parent-completed
- Used in diverse settings (early learning, parenting, pediatrics, public health)
- Flexible administration (print, online, with or without support)
- Written at 4th-6th grade reading levels
- Culturally sensitive
- Screening process opens discussion with parents about child's development
- Monitoring zone points to areas that would benefit from practice or support
- Referral area indicates need for ongoing assessment (and possible services)
- Overall section captures parent concerns, qualitative details about child's skills/behavior
- Follow-up includes parent concerns
- Extensively researched with high reliability and validity

Unique features of



- Screens 5 developmental areas
- 21 questionnaire intervals screen from 1–66 months
- Number of items consistent across questionnaire intervals
- Items address competence skills
- Item response options: Yes, Sometimes, Not Yet
- Scoring of item responses is consistent
- Before answering, items must be tried with child
- Answers based on observation of child's skills
- Results of multiple questionnaires (parent, teacher, other caregiver) can be combined for scoring
- Scores below cutoff in any area indicate need for follow-up

Unique features of



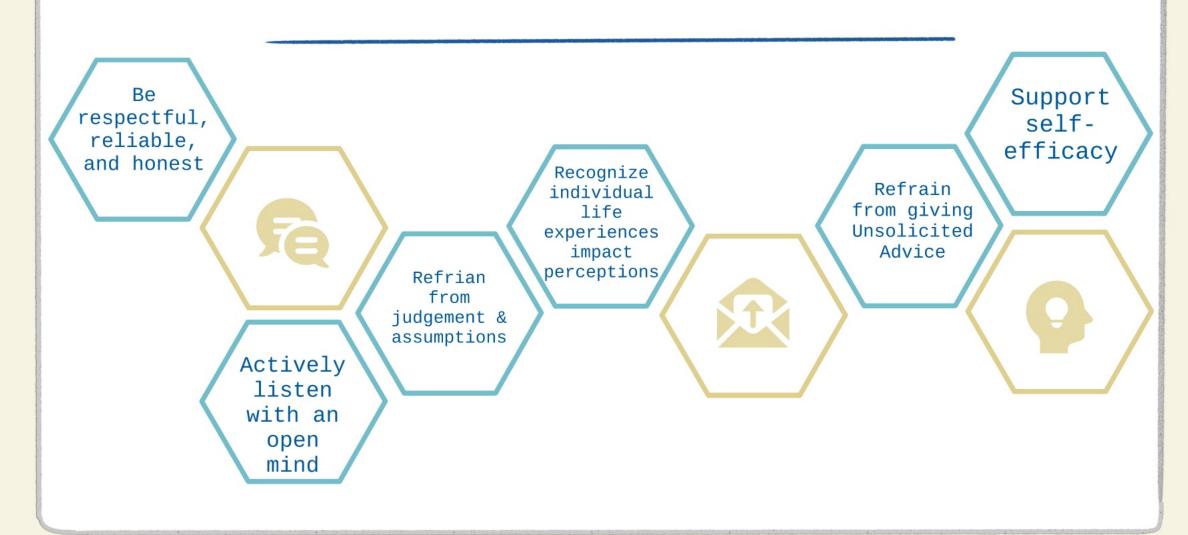
- Screens 1 developmental area
- 9 questionnaire intervals screen from 1–72 months
- Number of items varies across questionnaire intervals
- Items mix social competence and problem behaviors
- Item response options: Often or Always,
 Sometimes, Rarely or Never
- Scoring of item responses varies
- Items may be answered based on recent memory of child's behavior
- Answers based on observation and personal interpretation of behavior
- Results of multiple questionnaires (parent, teacher, other caregiver) should not be combined for scoring
- Scores above cutoff indicate need for follow-up

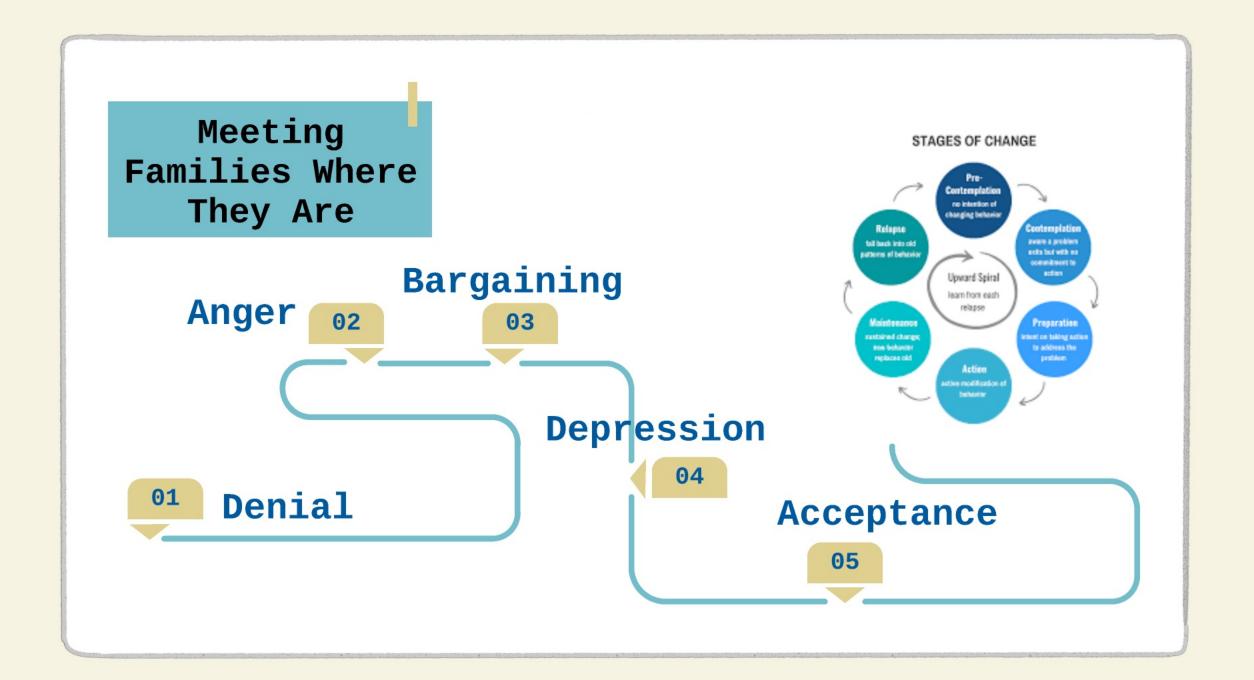
Learn more about the ASQ tools at www.agesandstages.com

Additional Screening Tools

- 1 Parents' Evaluation of Developmental Status (PEDS) https://pedstest.com/introduction-to-peds/
- 2 Child Development Inventories (CDI)
 https://childdevelopmentreview.com/specialiststools/child-development-inventory
- The Survey of Wellbeing of Young Chiledren (SWYC) https://childdevelopmentreview.com/specialiststools/child-development-inventory
- 4 Whole Child Assessment (WCA)
 https://lluch.org/health-professionals/whole-child-assessment-wca
- 5 Modified Checklist for Autism in Toddlers (M-CHAT) https://www.mchatscreen.com/

Relationship Building with Families





Motivational Interviewing

A collaborative person centered approach that is respectful and non-judgemental

Helps
individuals
express their
own desire for
change, and
helps them plan
for and begin
the process

Assist individuals in working through their ambivalence or resistance

Principles of MI

Empathy

Communicate respect & acceptance

Discrepancy

Elicit pros & cons of behavior

Avoid Argument

Do not confront or put on defense

Roll with Resistance

Respect individual's autonomy

Support Self-Eficacy

Communicate that they are capable

Components of Motivational Interviewing

0

Open Ended Questions

A question that invites a person to think before responding.

A

Affirming

To recognize and acknowledge that which is good; to support and encourage.

R

Reflective Listening

Desinged to clarify your understanding and convey this understanding

S

Summarizing

Reflections that pull together several things that a person has told you

Share Resources & Information



Family Resource Center can do ASQ screens & provides other family supports

CDC Milestone Tracker App fill out milestone checklists and get tips to build skills

Parent Information Center
Resources & information
NH Family Voices

Early Supports & Services
Assessment & services for 0-3
Local District for 3+

VROOM

provides tips for way to enhance daily interactions with your child

211 - connection to essential
community services
Service Link: 1-(866)-634-9412

