



# Five Years of Help Me Grow Inland Empire: Where do we *grow* from here?

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# Local Help Me Grow Implementation: Critical partners in building system infrastructure



Connect Community Partners  
Outreach to Families



Centralized  
Access Point

Specialized Child Development Line  
Linkage & Follow-up



Family &  
Community  
Outreach



Bridge to  
Population  
-Level  
Strategy



Child Health  
Provider  
Outreach

Accountability to Partners  
Data-informed System Change



Data  
Collection &  
Analysis

Community & Health System Tools  
Physician Champion & Leadership

HMGIE: System Building & Service to Families

First 5 Riverside County

Strategic Areas: Infrastructure beyond operations & Stabilize Families Supports

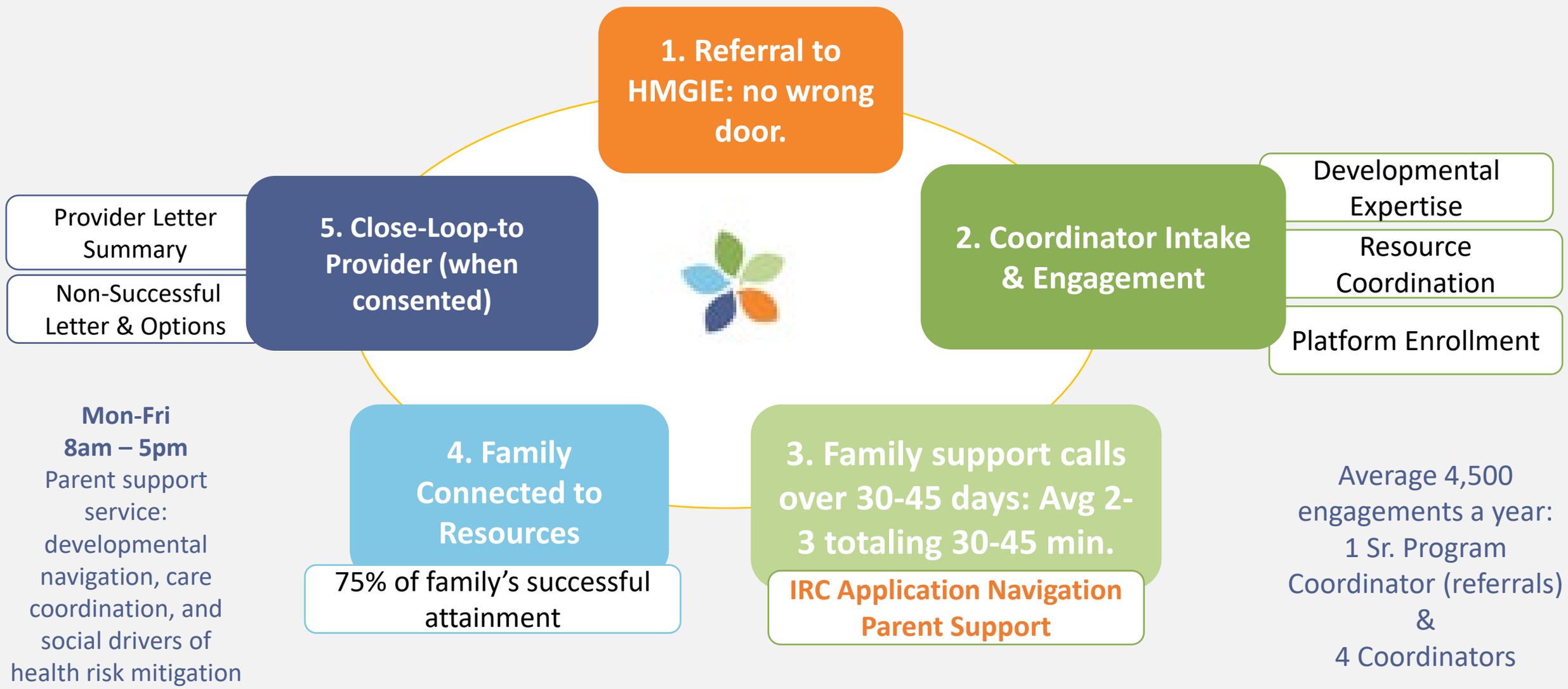
First 5 Association CA Strategic Plan Goals

“System Change. Promote an Integrated Whole Child, Whole Family System of Care.”





# Centralized Access Point: Regional Resource Hub for Families

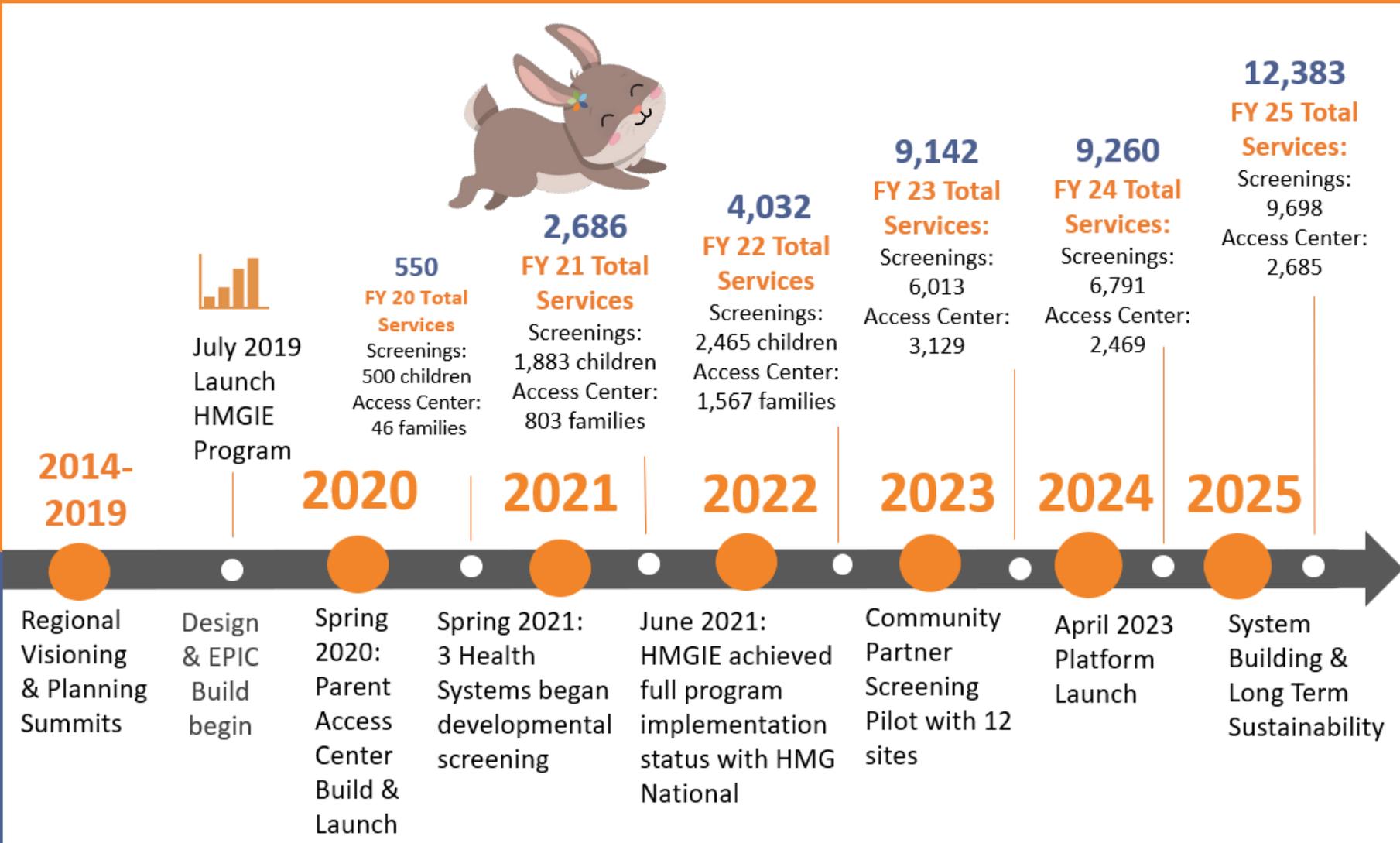


# Impact After 5 Implementation Years: What have we Learned?



Service  
Delivery

System  
Building



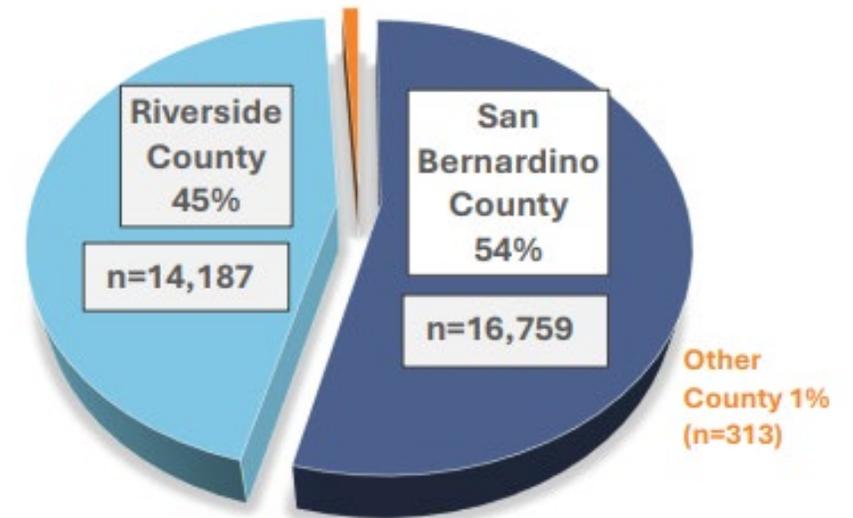
# 5-Year Impact: HMGIE & System Partners

### Screenings in Electronic Systems: 5-Year Impact



Total Screenings = 31,244; Unique Number of children screened = 21,004

**31,244** developmental screenings on behalf of **21,044 unique children** via electronic screening infrastructure that did not exist prior to FY 20.



# 5-Year Impact: HMGIE Access Center

## HMGIE UNIQUE CHILDREN SERVED IN 5 YEARS FY 20 - FY 25

N=8455

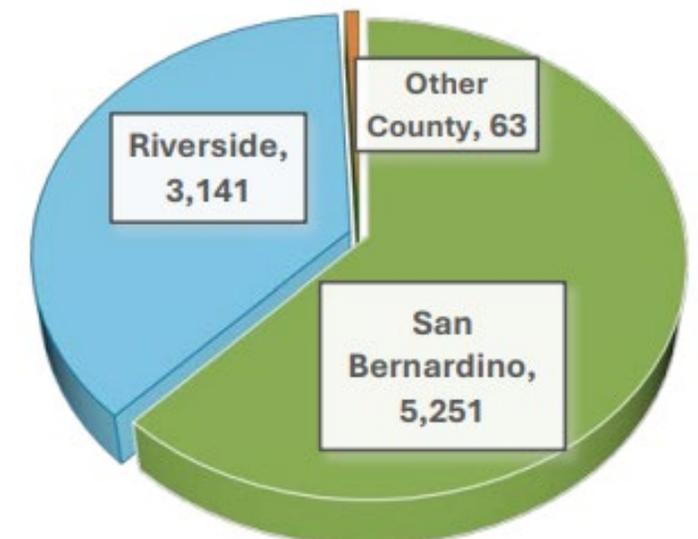


Counting a child 1x in 5 years = an 18% decrease in unique children reported annually.

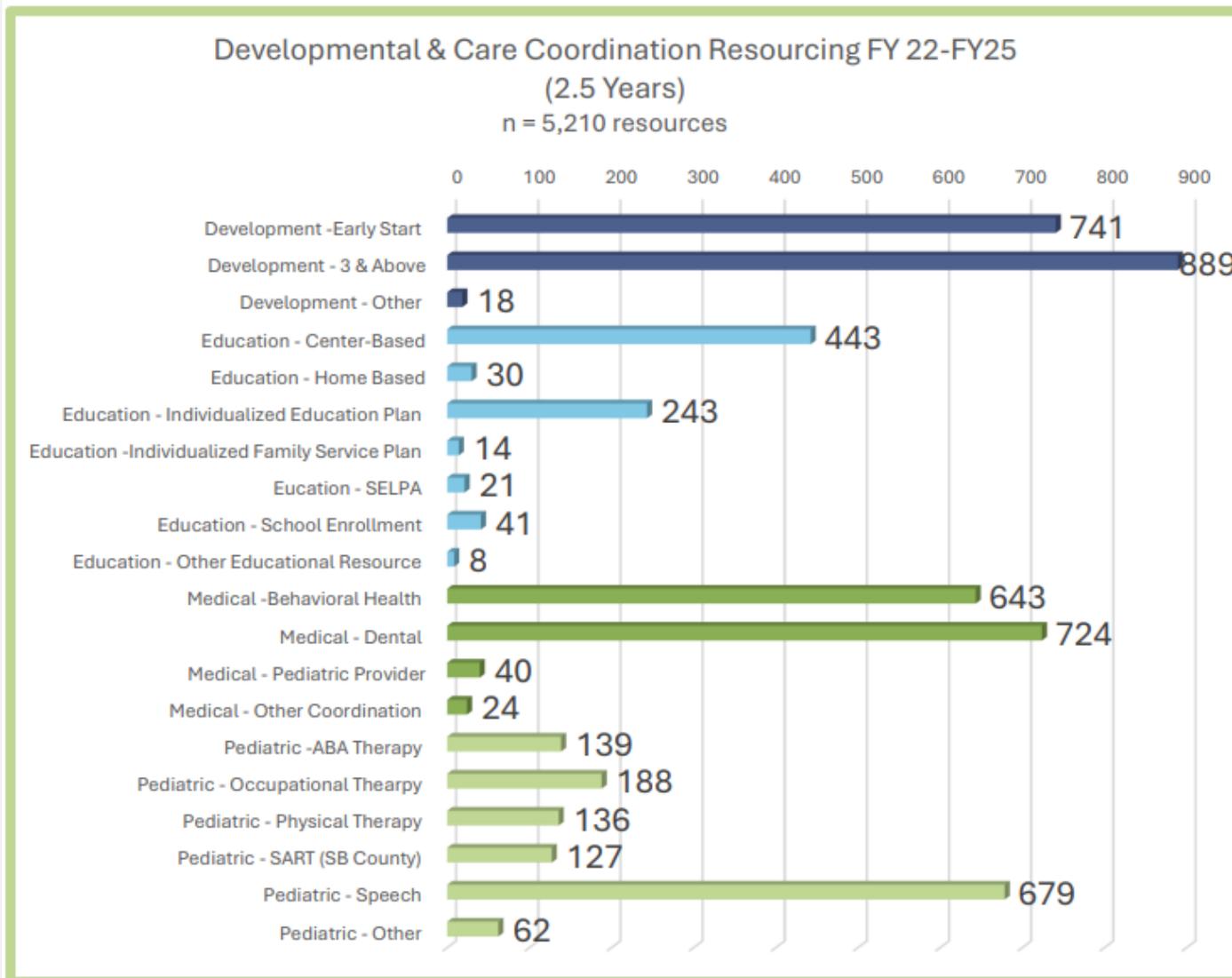
Longitudinal Safety-net during for families during their child's major developmental service transitions:  
18% of families contacted HMGIE 1+ times over 2-3 years

**12,462** total families served by HGMIE Access Center **8,455** unique children engagements.

## Unique Children Served by HMGIE Access Center by County (n=8,455)



# How HMGIE met Family Needs



**Over 27,165 resources have been provided since 2020.**

## Top Developmental Resources:

- 3+ & Above
- 0-3 Early Start
- Education - Center-Based
- Education – IEP

## Top Care Coordination Health:

- Dental
- Behavioral Health
- Speech

Every count is a story: HMGIE Coordinators spend 30-45 minutes per service engagement. Coordinators average 2.8 calls to support family progress towards achieving resources needed.

# What we learned: Social Risks of Families in IE

From a sample of 12,401 SDOH screenings done in Well Child visits:



**11% of all families reported medium-to-high financial risk.**



**11% of all families reported food insecurity.**



**5% of all families reported unmet transportation needs.**

From a sample of 868 SDOH screenings done by HMGIE team during an Access Center engagement:

- **78% of families reported financial insecurity**
  - **67% of families reported food insecurity**
  - **49% of families reported housing insecurity**
- 95% confidence at 5% margin of error*

**The HMGIE team only screens families who do not have a screening in EPIC, or re-screens when situation has changed. n=868 of 8,455**

# How has HMGIE impacted *the system*?

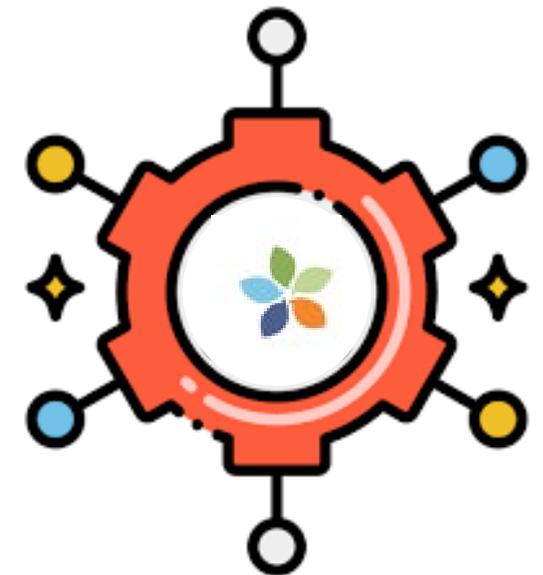
HMGIE built a unified, digital screening infrastructure that improves early identification, enhances collaboration across sectors, and supports better long-term outcomes for children and families.

**Health System providers** – Developed **10 electronic Ages & Stages Developmental Milestone screening tools**, more consistent developmental assessments in Well Child Visits.

**Community Platform Providers**— Delivered **30 electronic screening tools— including 21 Ages & Stages and 9 Social-Emotional screeners** —to support comprehensive child development evaluation across community settings.

Implemented **electronic referrals** with “close-the-loop” messaging to ensure seamless communication and follow-through between referring providers.

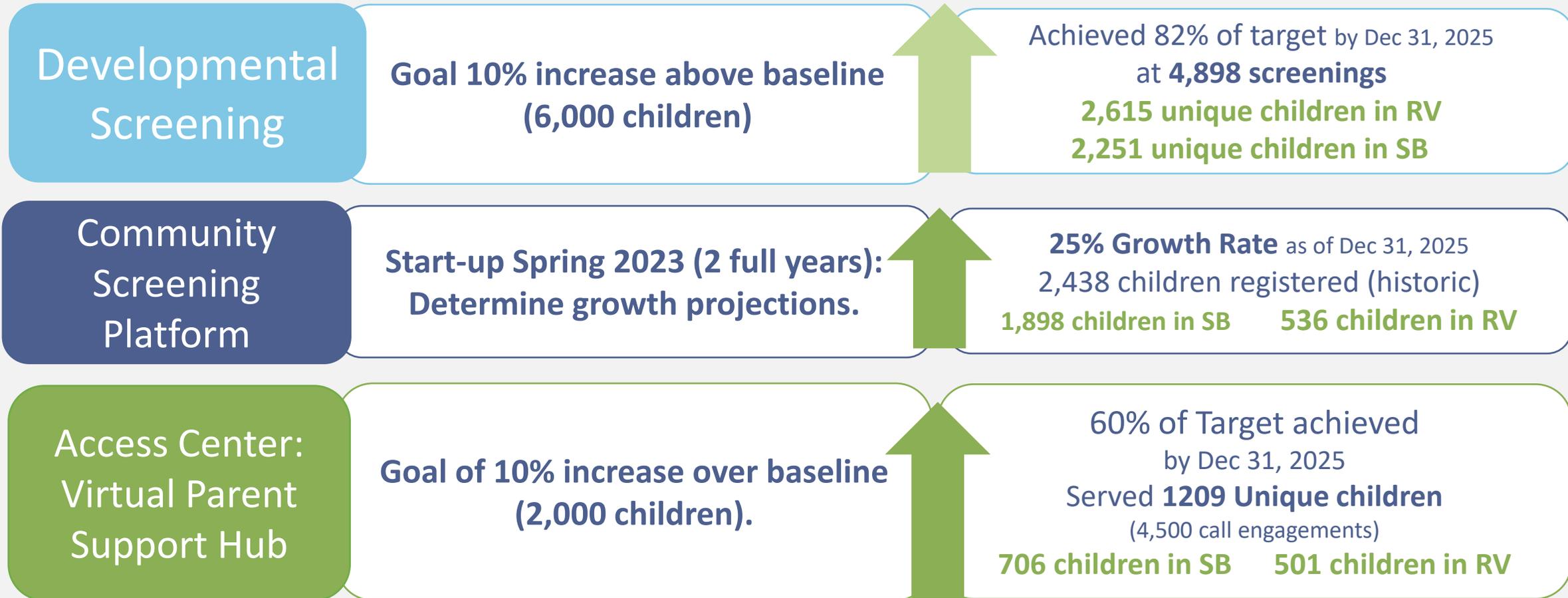
Established a **sustainable, cross-setting screening ecosystem** that allows children to be assessed in multiple settings and tracked longitudinally over time.



***At the start of FY 20, none of this infrastructure existed.***



# FY 26 Performance Goals – SOW FY 26



As of December 2025:

Total Developmental Screening Impact of HMGIE Built Infrastructure: 36,142 screenings

Total families supported and stabilized in the IE: 9,665 unique children, 16,962 engagements

Access Center = 5 FTEs

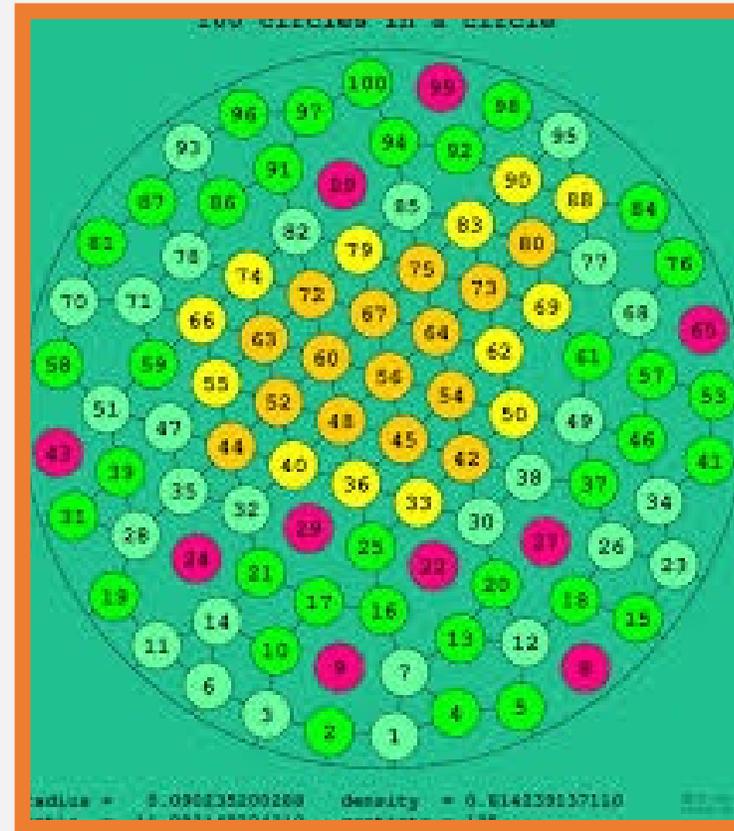




Where we are today &  
Where do we *grow from here?*

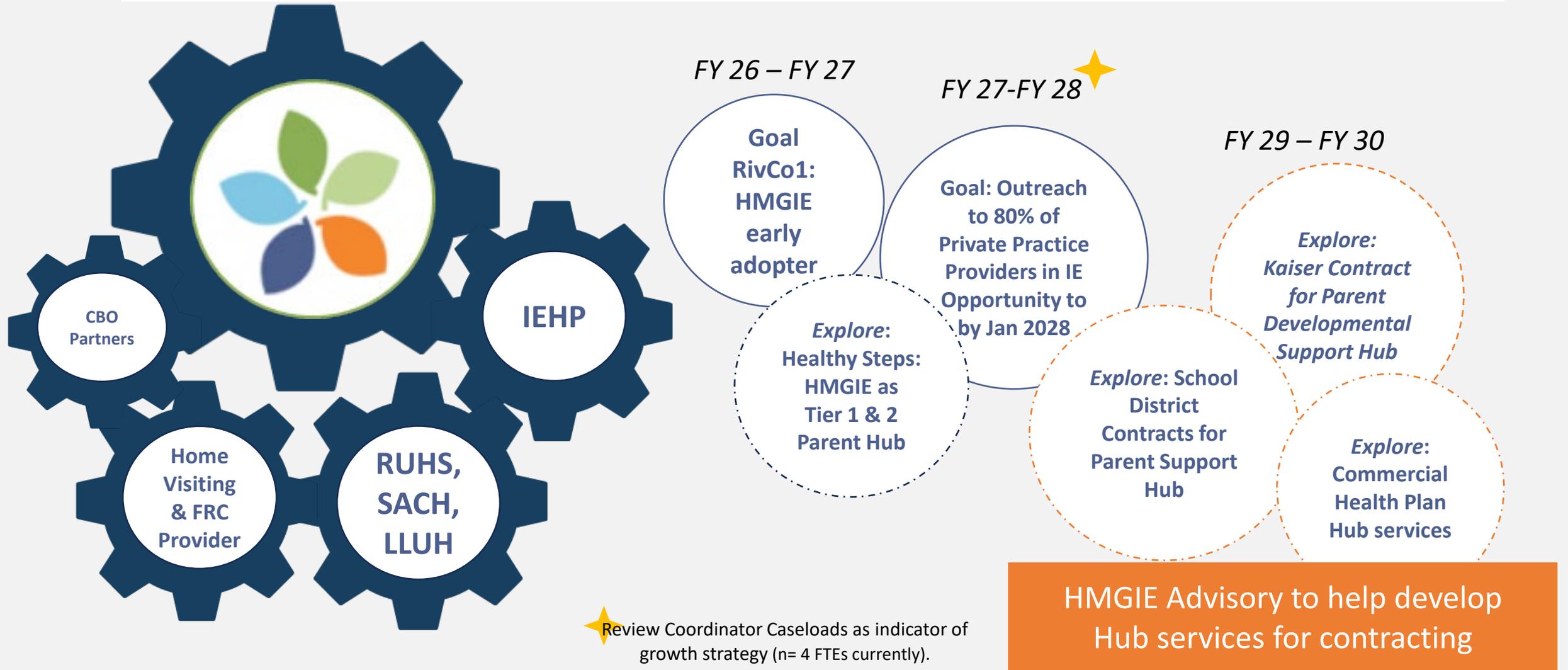
# How do we achieve collective impact?

Children by population - Represented by Pediatric Provider (Example)



145,000 children ages 0-5 estimated in Riverside County

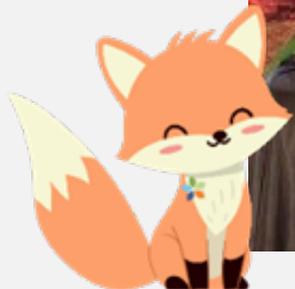
# HMGIE –System Development



FY 26-FY 30: HMGIE intends to integrate partners and populations traditionally isolated from aggregated service data through a regional, population hub strategy (achieve improved data of unique children in the region screened & served for early intervention and prevention services) as we stabilize families with our hub-based services.



# The Legacy of Dr. Marti Baum



*Vision:*  
“All children reach their full potential”

Architect of HMGIE and Physician Champion,  
2014-2025





# Thank you – The HMGIE Team

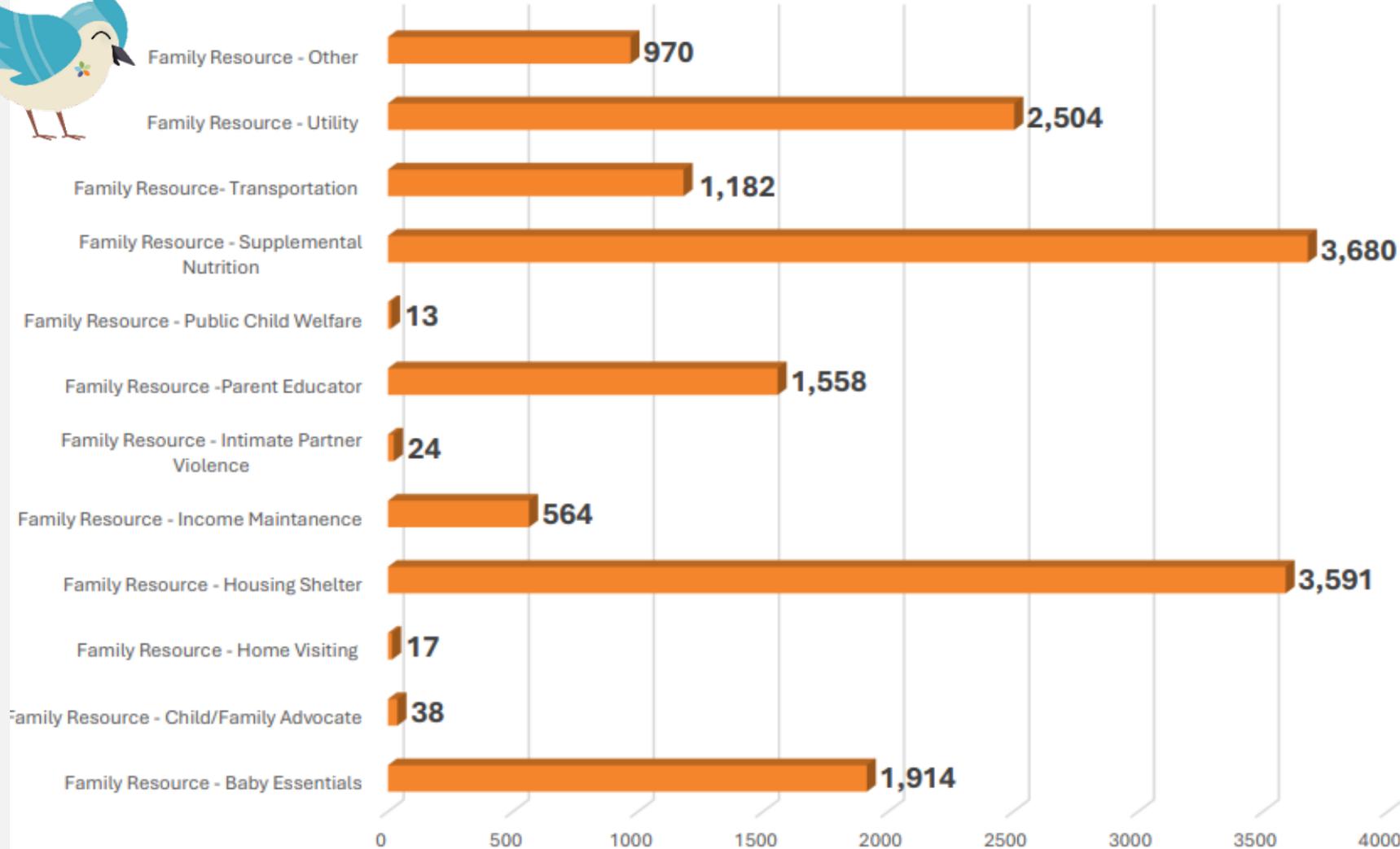
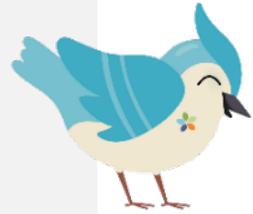


Thank you from the HMGIE Team



# Resources – Extra Slides

## Social Drivers of Health Risks Addressed with Families Fy 22 - FY 25 (2.5 Years) n=16,055



### The most frequently resourced family needs:

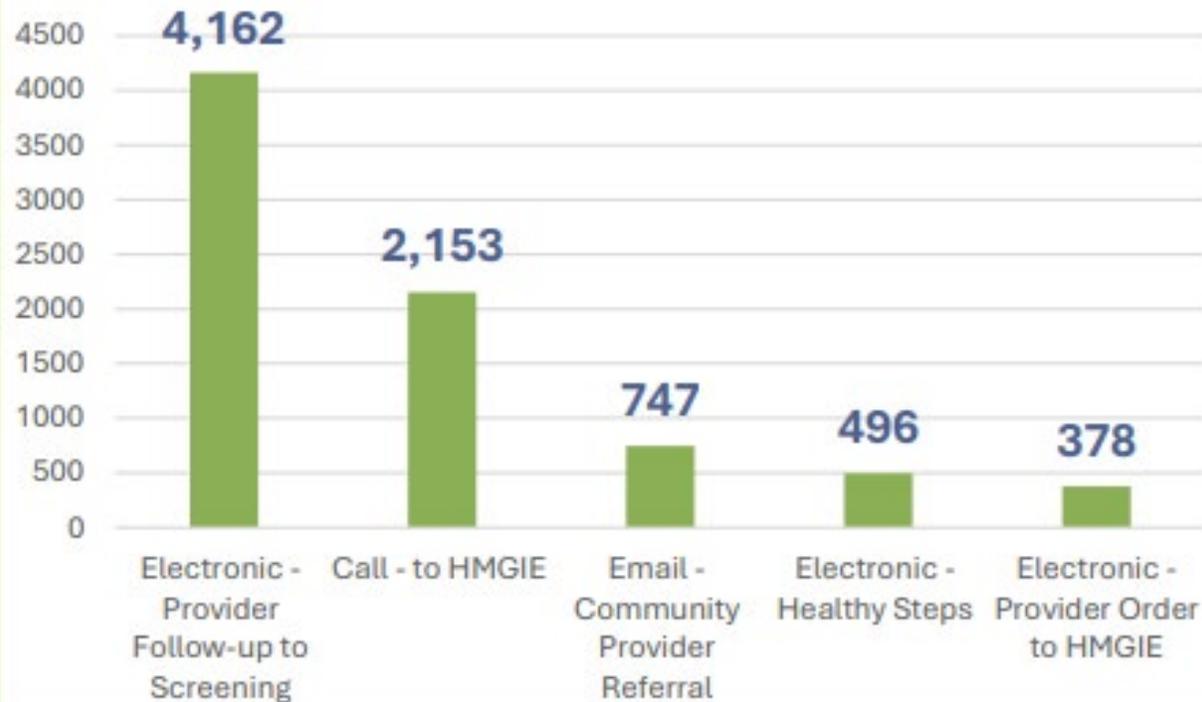
1. Supplemental nutrition or food assistance
2. Housing/Shelter
3. Utilities
4. Baby Essentials: formula, diapers, and supplies.

Children referred for developmental or care coordination typically also have one social risk associated in the referral or orders. HMGIE coordinators often identify additional risks and resource needs during service engagements with families.



# No Wrong Door to HMGIE

Referral Doorway to HMGIE  
FY 20 - FY 25  
n=7,936



Data for 7,936 unique children vs. 8,455 due to data collection variance in 5 years.

## Access Center Performance

- **82%** of children served are Medi-Cal
  - 8% had no insurance (and received navigation support to insurance)
  - 10% were commercially insured.
- **75%** of families attain resources at close of an engagement (5-year avg).
- 4 Coordinators Helping Families
  - Voicemail rate dropped to 0-1 a week with answered calls is up above 95% of the time.
- Parent voluntary surveys:
  - **14 Surveys “strongly recommend” and all “yes” to needs met since July 2025**

# The Importance of Being a Trusted Partner

In recent nationally-representative polling, **about 81–85% of parents say they trust their child’s pediatrician at least a “fair amount”** to provide reliable vaccine information: meaning that roughly **15–19% of parents do not express this level of trust.**

Kaiser Family Foundation Oct 2025

**1 in 6 parents** in the United States (~16%) reported delaying or skipping one or more recommended child vaccines due concerns of safety, efficacy or necessity. **14% of parents** are not confident in efficacy of vaccines.

Kaiser Family Foundation Oct 2025

**Providers cannot close the trust-gap alone with families without supportive services from teams who invest time in building trust with parents.**

## Factors that increase parent trust:

- Relationship-based care
- Transparency from providers
- Empathy
- Respect for parent’s worries
- Consistent follow-up over time

## The HMGIE Team help providers increase trust:

- Time-investment with families (30-45 min over 2-3 calls)
- Help navigate systems and solve problems
- Warm, kind service engagement with families
- Follow-up on concerns and identifies additional needs
- Consistent in follow-up to completion with families
- Ensure children are connected to their pediatric providers

