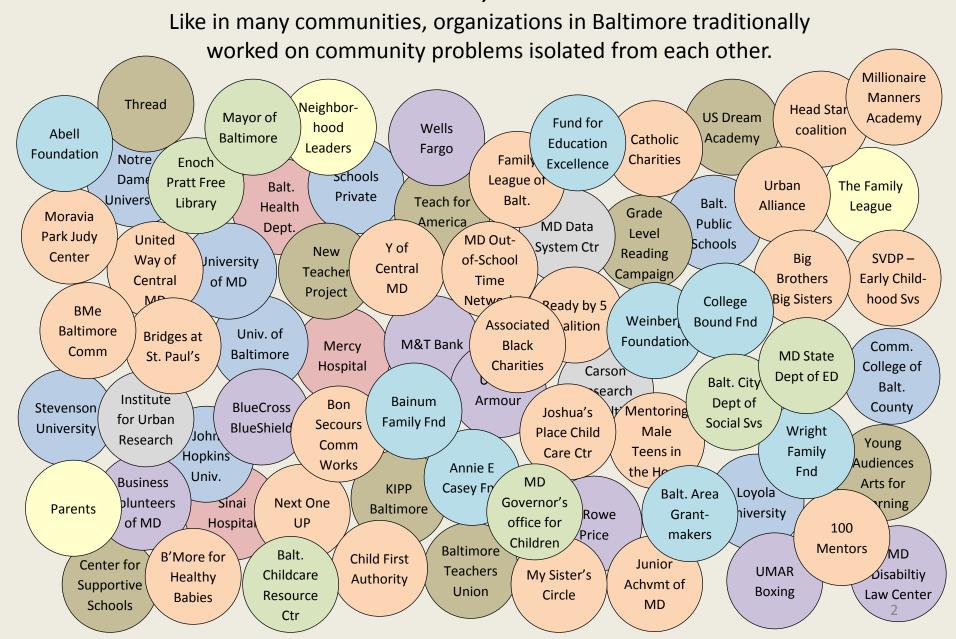
SYSTEMIC CHANGE USING COLLECTIVE IMPACT

Baltimore, Maryland

BALTIMORE, MARYLAND



COMPLEX COMMUNITY PROBLEM

Baltimore has experienced a daunting combination of challenges during the past several decades, including ...

- population decline,
- deterioration of the economic base,
- loss of corporate headquarters, as well as
- poverty and crime.

These challenges fall disproportionately on Baltimore's children, who experience multiple threats to their health and well-being that severely constrain their opportunities and potential.

What Happened ...

Individuals and organizations became concerned. In the fall of 2012, an **URGENCY FOR CHANGE** was voiced by multiple actors including local funders who wanted more impact on problems than they were seeing by only funding isolated programs.

An **INFLUENCIAL CHAMPION**, Annie E. Casey Foundation and other civic leaders, stepped forward to say, "We must make changes in the way we address services to children in Baltimore."

From the rally around the problem, a **MINDSET SHIFT** occurred in the community. "Let's work together to support Baltimore children's health and education from birth through the time when they are college and/or career ready."

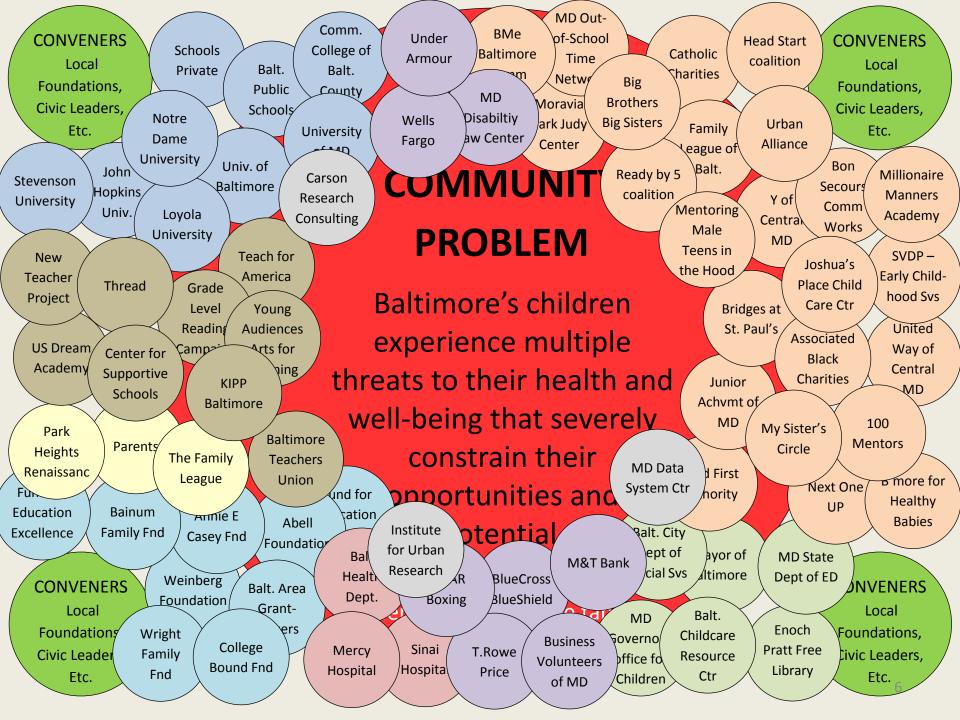
Baltimore is the home to many Foundations. The pull of potential **FINANCIAL RESOURCES** helped bring the multiple stakeholders to the table and keeps them there.

Stakeholders were convened by the champion(s) to discuss the problem.

COMPLEX COMMUNITY PROBLEM

Baltimore's children
experience multiple
threats to their health and
well-being that severely
constrain their
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potential.

Multiple conveners brought different groups to the table to discuss the problem.



Next Steps ...

The group researched the problem and assessed the current services in search of gaps and new approaches.

A common **AGENDA** was agreed upon ...

All Baltimore City youth will travel a safe, healthy, and successful educational path from cradle to career.

A **BACKBONE** was created. In Baltimore, the Annie E. Casey Foundation was instrumental in creating a new 501 (c)(3), Baltimore's Promise, to be the Backbone.

The Plan of Action was created that outlines **MUTUALLY REINFORCING ACTIVITIES** for participants.

A Data Analysis Work Group was formed as one of the goals. This work group, designs and monitors the data system and how to **MEASURE** the success.

COMMUNICATION is ongoing. Website, social media, newsletters, annual reports, etc. are ways that Baltimore's Promise keeps the stakeholders and larger community informed of their progress. Work groups communicate directly with the Backbone, Operations Committee, and Board of Directors.

New non-profit formed for Backbone Support

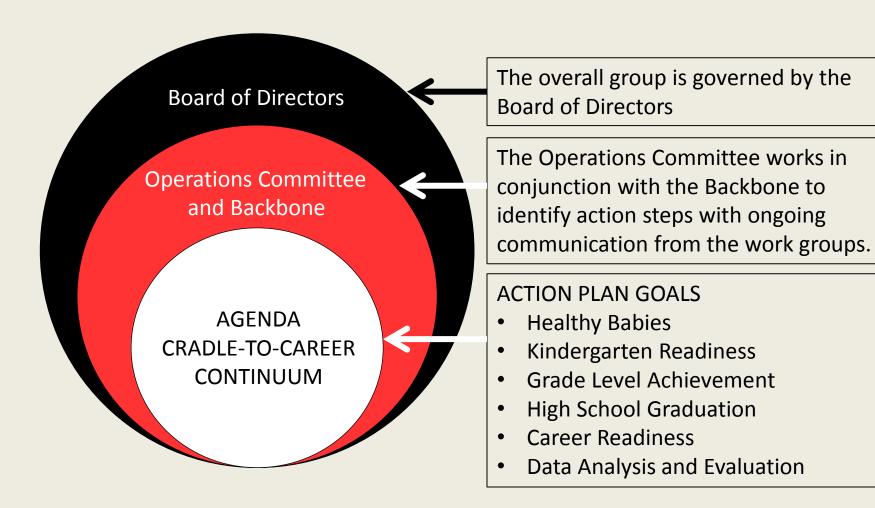
BALTIM RE'S PR MISE

Baltimore's Promise is a city-wide collaborative, composed of public, business, higher education, nonprofit and philanthropic leaders that serves as a catalyst for organizing efforts and resources around a shared community vision that <u>all</u>

<u>Baltimore City youth will travel a safe, healthy, and successful educational path from cradle to career.</u>

The Backbone's mission is to ...

- coordinate strategy,
- identify quality programs,
- support alignment activities,
- establish shared measures for meaningful results,
- build public will, and
- advance policy on behalf of Baltimore City's youth.

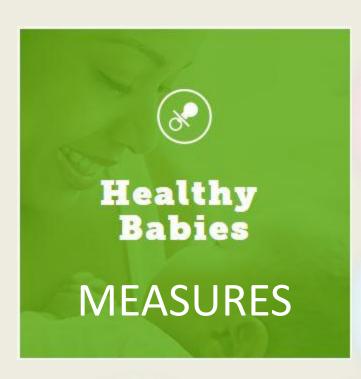


BALTIM RE'S PR MISE

"This is not just about adding up the sum total of our independent work, it's about acting together in new and powerful ways to achieve large-scale, systemic change."



^{*}Other Baltimore's Promise goals are Kindergarten Readiness, Grade Level Achievement, High School Graduation, Career Readiness and Data Analysis and Evaluation (see page 9).



All Babies Are Born Healthy

Health conditions affect a child's ability to learn and develop, starting in the earliest days and months of life. Children born pre-term or low birthweight have lower cognitive scores, increased incidence of ADHD, and more behavioral problems at school age. Very low birth weight (<750g or 1.65 pounds) children face similar problems of social, behavioral, and attention problems throughout childhood. Additionally, being born at low birthweight increases the chances of mortality and morbidity. Baltimore City mothers continue to have a higher percentage of babies born at a low birthweight compared to the State's average.

Key Metrics (2011)

Infant mortality rate: In 2011, 9.7 infants died per 1,000 live births.

Low birthweight: In 2011, 11.6% of births were infants weighing less than 5.5lbs.

Teen birth rate: In 2011, there were 50.7 live births per 1,000 females aged 15-19.



RECOMMENDATION 1

Propose an automatic cross-check system for all pregnant women who are uninsured or on Medicaid and visit a hospital emergency department to determine if they have a prenatal risk assessment filed with the City. This could be done through Maryland's Health Information Exchange. The Baltimore City Health Department (BCHD) would then be able to reach out to women who are not in obstetrics care immediately, which in turn would set in motion the process of care and the risk assessment.

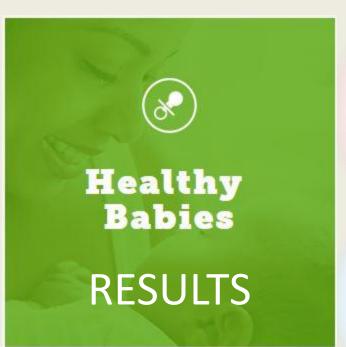
RECOMMENDATION 2

Work with Maryland's Department of Health and Mental Hygiene (DHMH) to create, as soon as possible, an easy online

path to generate Prenatal Risk Assessments (PRAs) through the state's Health Information Exchange. The online path would include a feedback measure that would ensure that providers who fill out the PRA are aware of where women are in the process. The feedback measure would also provide data on the source of PRAs.

RECOMMENDATION 3

Propose a citywide policy that no granting agency, public or private, will make a grant for health to an organization that does not have a written policy on promoting smoking cessation. This policy should, at a minimum, prominently provide information on services available to Marylanders through the quitline. This should include all organizations that provide instructions in child safety seats.



Baltimore's Promise joined together with B'More for Healthy Babies, whose vision is that "all of Baltimore's babies are born at a healthy weight, full term, and ready to thrive in healthy families."

Key Metrics (2014)

Results below show change from 2011-2014

	Maryland	Baltimore	3 Yr Change in Baltimore
2014 Infant Mortality Rate Infant deaths per 1,000 live births	4.4	7.6	2.1
2014 Low Birthweight % of births with infants weighing < 5.5lbs.	8.6%	11.5%	0.1
2014 Teen Birth Rate Live births per 1,000 females aged 15-19	17.8	41.0	9.7

BALTIM RE'S PR MISE

Together, we can accomplish more for children and youth than by working independently. To this end, we utilize a Collective Impact model in which stakeholders from different sectors have made a long-term commitment to support comprehensive solutions to complex issues through structured collaboration. Service providers, policy makers, funders, and community leaders are building upon the success of individual organizations to collectively improve education and health outcomes for Baltimore City's youth while also creating broader, sustainable impact.

All information in this presentation is taken from public information produced by Baltimore's Promise, specifically their website, 2015 Baseline Report, Connecting Baltimore's Opportunity Youth to Careers, Expanding Sector Employment Opportunities for Young Adults in Baltimore 2016, and Baltimore City's Investments in Children and Families 2014.