
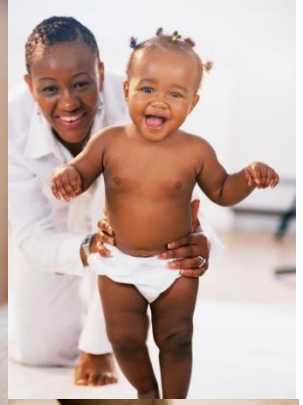



From Developmental Screening to Follow-Up

Lessons From A Community-Based Approach Engaging Primary Care, Early Intervention, and Early Learning System Providers

Child Care and Education Researchers Roundtable

October 25th, 2017

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Oregon Pediatric Improvement Partnership

Momentum Around Developmental Screening in Oregon

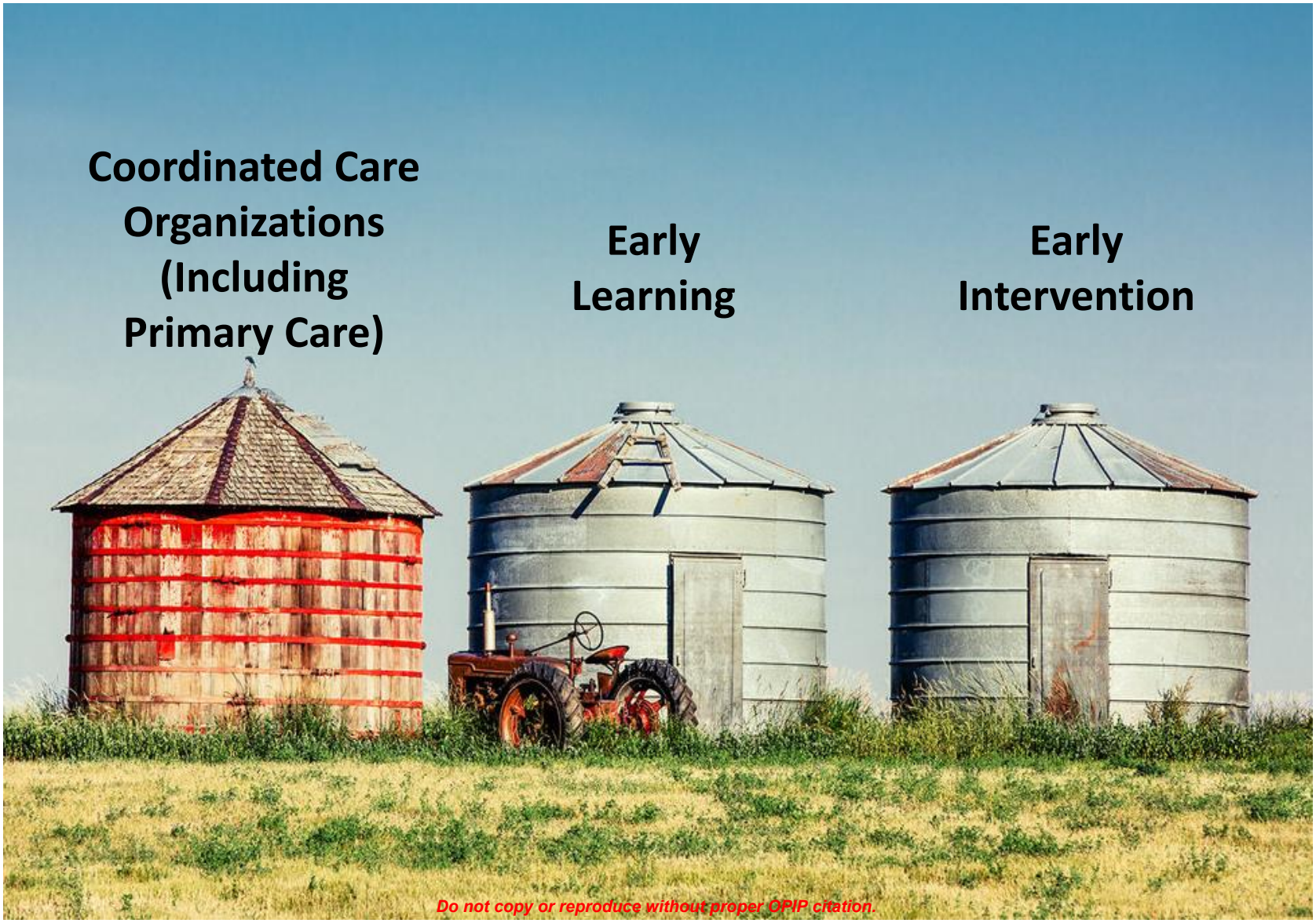
*Within **Health Care**:*

- Coordinated Care Organization Incentive Metric – Developmental Screening
- Oregon Patient Centered Primary Care Homes (PCPCH) Standards - Includes Developmental Screening as "Must Pass" Standard

*Within **Early Learning**:*

- Early Learning Hub Metrics
  - 1st wave Included CCO Developmental Screening Incentive Metric
- High quality child care – part of highest level designation

From Developmental Screening To Services: Opportunity to Connect the Fantastic Individual Silos



Opportunity and Need to Focus on Follow-Up to Developmental Screening that is the Best Match for the Child & Family: Highlights from Our Baseline Data

- While there are increases in screening, most children identified at-risk in primary care providers (PCP) are not receiving follow-up aligned with recommendations
  - PCPs are not referring children identified at-risk
    - 60-80% of children identified at-risk for delays on the ASQ not referred for EI Services
- Referral rates to Early Intervention (EI) have increased, but not proportional to screening rates
- In these communities, the number children served by EI also did not increase in a way aligned with early identification through screening
  - 2 in 5 children referred by PCP to EI not ever able to be evaluated, no communication back to referring entity
  - Of those evaluated, 62% were found to be eligible for services, meaning 38% were ineligible for services (Rates lower for PCP-based referrals).

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Key Components of Community-Based Improvement Efforts to Increase the Number of Children Receiving Follow-Up

1. Community-level Stakeholder **Engagement** Across Six Sectors, Including Parent Advisors:
   - ❖ **Understand** Current Pathways,
   - ❖ Identify **existing community assets**
   - ❖ Prioritize **where** to focus pilots of improved follow-up
2. **Pilots to improve** the number of children who receive follow-up and coordination of care.

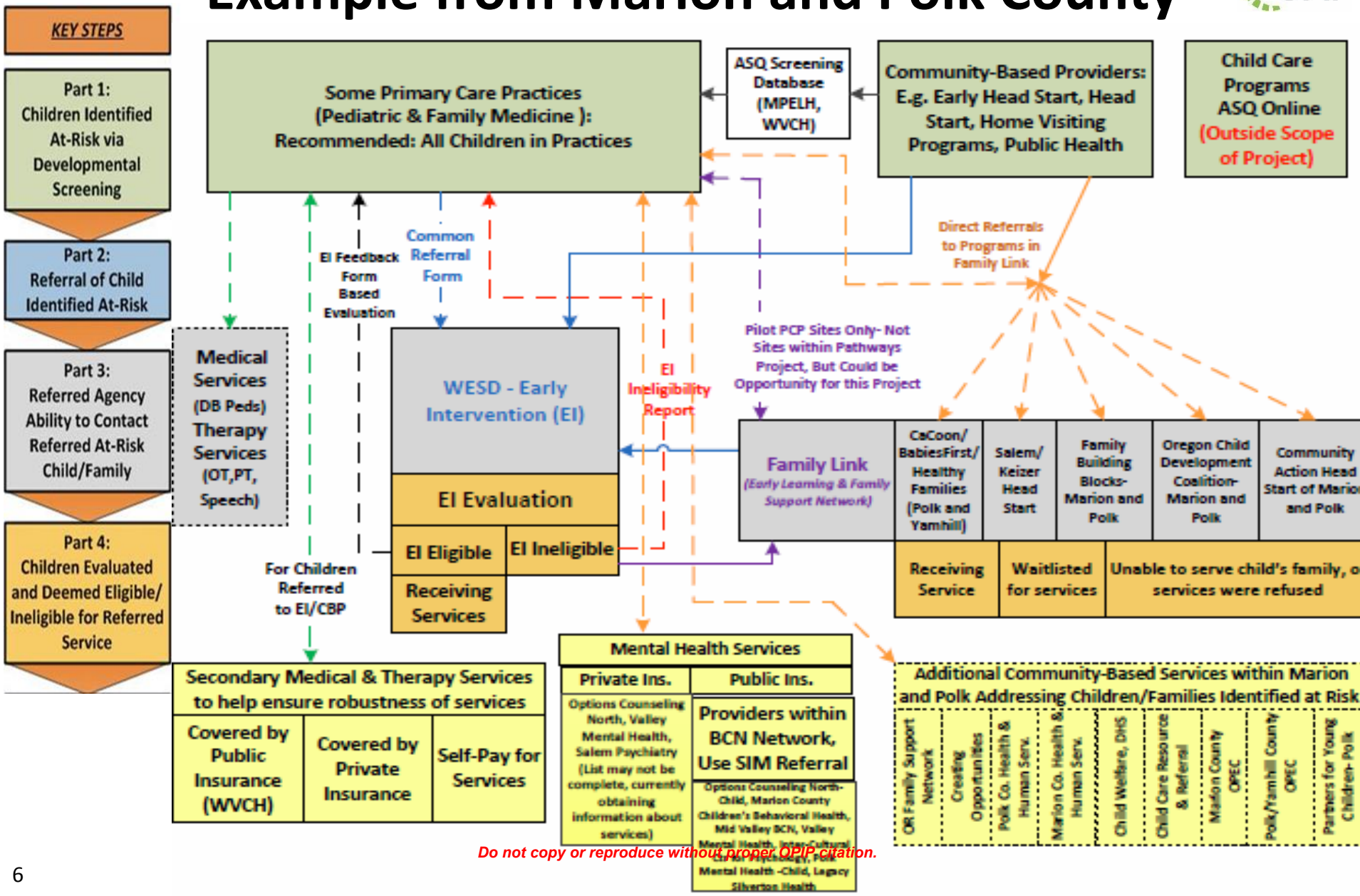
Key partners in implementing these pilots:

A. Primary Care Providers

B. Early Intervention

C. Early Learning

Current Pathways and Community Asset Map: Example from Marion and Polk County



Community-Based Improvement Opportunity: Pilot Sites Implementing Efforts to Improve Follow-Up

Primary Care Practices

1) Develop follow-up medical decision tree anchored to:
   A) ASQ scores, B) Child and family factors, C)Resources within the community
2) Parent education when referred to other services
3) CCO summary of follow-up services and providers who see children 0-3
4) Care coordination based on whether eligible for services and which services receiving

Early Intervention

1) Enhanced communication and coordination for children referred & not evaluated
2) Communication about evaluation results
   - For Ineligible Children: Referral to Early Learning supports
   - For Eligible Children: Communication about EI services being provided
3) Examination of EI Eligibility and Presenting ASQ Scores

Early Learning

1) Enhanced **developmental promotion using tool supported by the HUB** (e.g . VROOM, ACT Early, ASQ Learning Actvities)

2) NEW referrals from PCP/EI being to:
- Centralized home visiting referral
- **Evidence based parenting classes**

Development of Decision Support Tools for Primary Care Providers to Identify Best Match Services in Community

- Based on data and community engagement, **six priority referrals** were identified and collaborative partnerships established.
- Created a medical decision tree for providers about WHICH kids to refer and WHERE:

1. Medical and Therapy Services (developmental evaluation and therapy services)
2. Early Intervention (EI)
3. CaCoon/Babies First
4. Centralized Home Visiting Referral (Includes Early Head Start and Head Start)
5. Parenting Classes
6. Mental Health

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Leveraging the Early Intervention Universal Referral Form to Communicate Whether Children Referred But NOT Evaluated

EI/ECSE EVALUATION RESULTS TO REFERRING PROVIDER

EI/ESCE Services: ***please complete this portion, attach requested information, and return to the referral source above.***

☐ Family contacted on _____/_____/_____ The child was evaluated on _____/_____/_____ and was found to be:

☐ Eligible for services ☐ Not eligible for services at this time, referred to: _____

EI/ECSE County Contact/Phone: _____ Notes: _____

Attachments as requested above: _____

☐ Unable to contact parent ☐ Unable to complete evaluation EI/ECSE will close referral on _____/_____/_____

* The EI/ECSE Referral Form may be duplicated and downloaded at: http://www.ohsu.edu/xd/outreach/occyshn/programs-projects/dev-screening-and-referrals.cfm

Completed Example:

EI/ECSE EVALUATION RESULTS TO REFERRING PROVIDER

EI/ESCE Services: ***please complete this portion, attach requested information, and return to the referral source above.***

☒ Family contacted on ____/____/____ The child was evaluated on ____/____/____ and was found to be:

☐ Eligible for services ☐ Not eligible for services at this time, referred to: _____

EI/ECSE County Contact/Phone: _____ Notes: Contact attempts: 8/12/16, 8/20/16, 9/1/16

Attachments as requested above: Closure letter mailed 9/1/16

☒ Unable to contact parent ☐ Unable to complete evaluation EI/ECSE will close referral on 9/1/16 due to NO CONTACT

* The EI/ECSE Referral Form may be duplicated and downloaded at: http://www.ohsu.edu/xd/outreach/occyshn/programs-projects/dev-screening-and-referrals.cfm

Form Rev. 10/22/2013

RECEIVED
OCT 11 2016
BY: AM

8/12 vm 8/20 vm 9/1 Letter W13

Pilot EI Communication Form to Inform Possible Secondary Referral

A new Individual Family Service Plan (IFSP) was developed for your patient $Fname on $ifsp. These services will be reviewed again no later than $nextifsp.

IFSP Services:

Early Intervention Goal Areas:	Cognitive ☐	Social Emotional ☐	Motor ☐	Adaptive ☐	Communication ☐

	Services Provided by:	Frequency	Current Provider
☐	Early Intervention Specialist		
☐	Occupational Therapist		
☐	Physical Therapist		
☐	Speech Language Pathologist		
☐	Other		

Please contact $service coordinator with any questions

This document represents services determined by the IFSP to provide educational benefit.

Any services identified or recommended by medical providers are separate and not represented by this process.

Family Supports in Navigating Referrals

Informed by parent advisors, developed tools and processes to better support families

- Education Sheet for Parent and to Support Shared Decision Making
- Phone Follow-up for Children Referred

Follow-Up to Screening: How We Can Support Your Child

Why did we have you complete a questionnaire about your child's development?

Our goal is to help young brains and bodies develop and grow to their fullest potential. These support services can help prepare your child for kindergarten and beyond.

National recommendations call for specific tools to be used to assess a child's development, such as the one you completed. This tool helps identify kids who may be at-risk for delays. It is important to identify these delays early, as there are services that can address them.

Based on the results, we are referring your child to the services checked below:

☐ Early Intervention (EI)

EI helps babies and toddlers with their development. In your area, Willamette Education Service District (WESD) runs the EI program.

EI focuses on helping young children learn skills. EI services enhance language, social and physical development through play-based interventions and parent coaching. There is no charge (it is free) to families for EI services.

What to expect if your child was referred to EI:

- WESD will call you to set up an appointment for their team to assess your child.
- If you miss their call, you should call back to schedule a time for the evaluation. They have a limited time to set up the appointment. Their phone number is (503) 385-4714.
- The results from their assessment will be used to determine whether or not EI can provide services for your child.

Contact Information:
Tonya Coker, EI Program Coordinator
503-385-4586 | www.ode.state.or.us

☐ Parenting Support

Classes located in Marion County
Veronica Mendoza-Ochoa
(503) 967-1183
earlylearninghub.org

Classes located in Polk County
(503) 623-9664
midvalleyparenting.org

☐ Family Link

Family Link connects families with early childhood family support programs in Marion and Polk Counties. There is no charge (it is free) to families for Family Link services.

What to expect if your child was referred to Family Link:

The Family Link Referral Coordinator will call you to learn more about your child and family. They will work with you to find available services that best meet your needs, and link you to them based on eligibility.

Contact: Ivette Guevara
Referral Coordinator
503-990-7431 ext.122
familylink@familybuildingblocks.org

☐ CaCoon

CaCoon is a public health nursing program serving families. CaCoon public health nurses work with your family to support your child's health and development. A CaCoon nurse will meet with you in your home, or wherever works best for you and your child. There is no charge (it is free) to families for CaCoon services.

Contact: Judy Cleave, Program Supervisor
503-361-2693
www.ohsu.edu/xd/outreach/occyshn/programs-projects/cacoon.cfm

Medical/Therapy Services

Your child's health care provider referred you to the following:

- ☐ **Speech Language Pathologist:** Specializes in speech, voice, and swallowing disorders
- ☐ **Audiologist:** Specializes in hearing and balance concerns
- ☐ **Occupational Therapist:** Specialize in performance activities necessary for daily life
- ☐ **Physical Therapist:** Specializes in range of movement and physical coordination
- ☐ **Developmental-Behavioral Pediatrician:** Specializes in child development areas including learning delays, feeding problems, behavior concerns, delayed development in speech, motor, or cognitive skills
- ☐ **Child Behavioral Health Services:** Specializes in mental health assessments, individual/family/group counseling, skills training and crisis intervention
- ☐ **Autism Specialist:** Specializes in providing a diagnosis and treatment plan for children with symptoms of Autism

Why did you sign a consent form?

As your child's primary care provider, we want to be informed about the care your child receives so that we can provide the best care possible. The consent you signed allows the programs to share information back to us. Different programs have different consent requirements. You will likely be asked to sign more of these to give permission for different providers to communicate about your child's care.

Any Questions?

At Childhood Health Associates of Salem, we are here to support you and your child. If you have any questions about the process please call our Referral Coordinators: **(503) 364-3170**

OPIP Designed and distributed by Oregon Pediatric Improvement Partnership. Version 2.0 1/31

For children referred, better parent support:

1) Sheet for parents to explain referrals to support shared decision making between primary care provider and parent
2) Phone follow-up within two days

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Follow-Up to Screening of Development: How We Can Support Your Child

Why did you complete a survey about your child's development?

Our goal is to help young brains and bodies develop and grow to their fullest potential. These support services can help prepare your child for kindergarten and beyond.

National recommendations call for specific tools to be used to assess a child's development, such as the one your child care team completed. This tool helps identify kids who may be at-risk for delays. It is important to identify these delays early, as there are services that can address them.

Completing the developmental screening questionnaire is a great first step!
Based on the results, we recommend that your child go to the following:

Early Intervention (EI)

Who is Early Intervention?

EI helps babies and toddlers with their development. In your area, Willamette Education Service District (WESD) runs the EI program.

EI focuses on helping young children learn skills. EI services enhance language, social and physical development through play-based interventions and parent coaching.

There is no charge (it is free) to families for EI services.

What can you expect if your child was referred to EI:

- WESD will call you to set up an appointment for their team to assess your child.
- If you miss their call, you should call back to schedule a time for the evaluation. They have a limited time to set up the appointment. Their phone number is 503-435-5918.
- The results from their assessment will be used to determine whether or not EI can provide services for your child.

Contact Information:
WESD Intake Coordinator
503-435-5918 | www.wesd.org

Your Child's Primary Care Doctor or Other Health Provider

Your child's doctor or other health provider is a key partner to you in supporting your child.

Discovery Zone is providing the results from the developmental screening tool to you. This is important information about your child' that should be shared with your child's doctor or other health provider.

When you call your child's doctor's office you may say something like:

"My child attends childcare at Discovery Zone Child Development Center and they completed a developmental screening tool called the Ages and Stages Questionnaire.

They suggested that I reach out to you to discuss the screening results and follow-up steps my child's doctor or other health provider would recommend."

Your child's doctor or other health provider may want to schedule an appointment to review the results.

Any Questions?

At Discovery Zone, we are here to support you and your child. If you have questions about this process please call us!
Phone Number: 503-435-1414

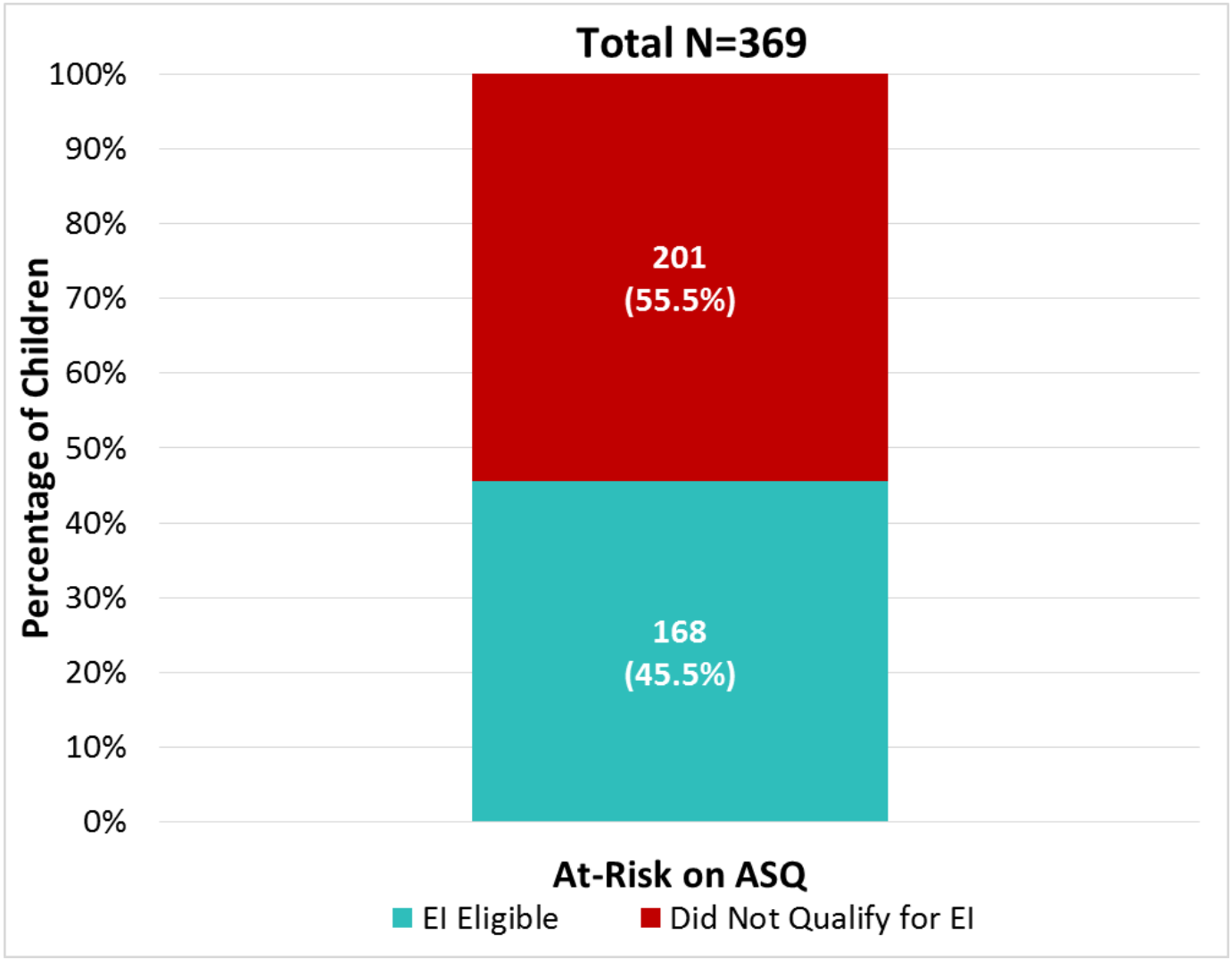
Version 2.0: 12/15

Education Sheet for Discovery Zone (Childcare Site) for Parents Developed by OPIP

Key Findings from the Pilot

- The pilots within primary care clinics, EI, and priority early learning providers **improved knowledge and awareness of follow-up** pathways.
- Value and need to focus on specific ways to **coordinate and communicate** in a timely manner across sectors. Requires time, methods and motivation.
- For children identified within the primary care setting:
  - Increase in the number of at-risk children receiving targeted **developmental promotion**,
  - Increase in **referrals to early intervention** of the more delayed children
  - Increase in referrals to **home visiting**
  - However:
    - No increase children referred from primary care who were evaluated and eligible for EI services.
    - A significant number of children referred to home visiting not able to be contacted OR not eligible for home visiting services.
- Observed barriers to implementation, receipt of follow-up services
  - Gaps for younger children and children with moderate delays.
  - Barriers to accessing early childhood mental health
  - Ability to implement timely communication

Children Identified as At-Risk on ASQ by Referring Provider & EI Eligibility



At-Risk on ASQ, Across Five Domains:

- **2 STDs from Normal on One Domain (Black)**
  or
- **1.5 STD from Normal on Two Domains (Grey)**

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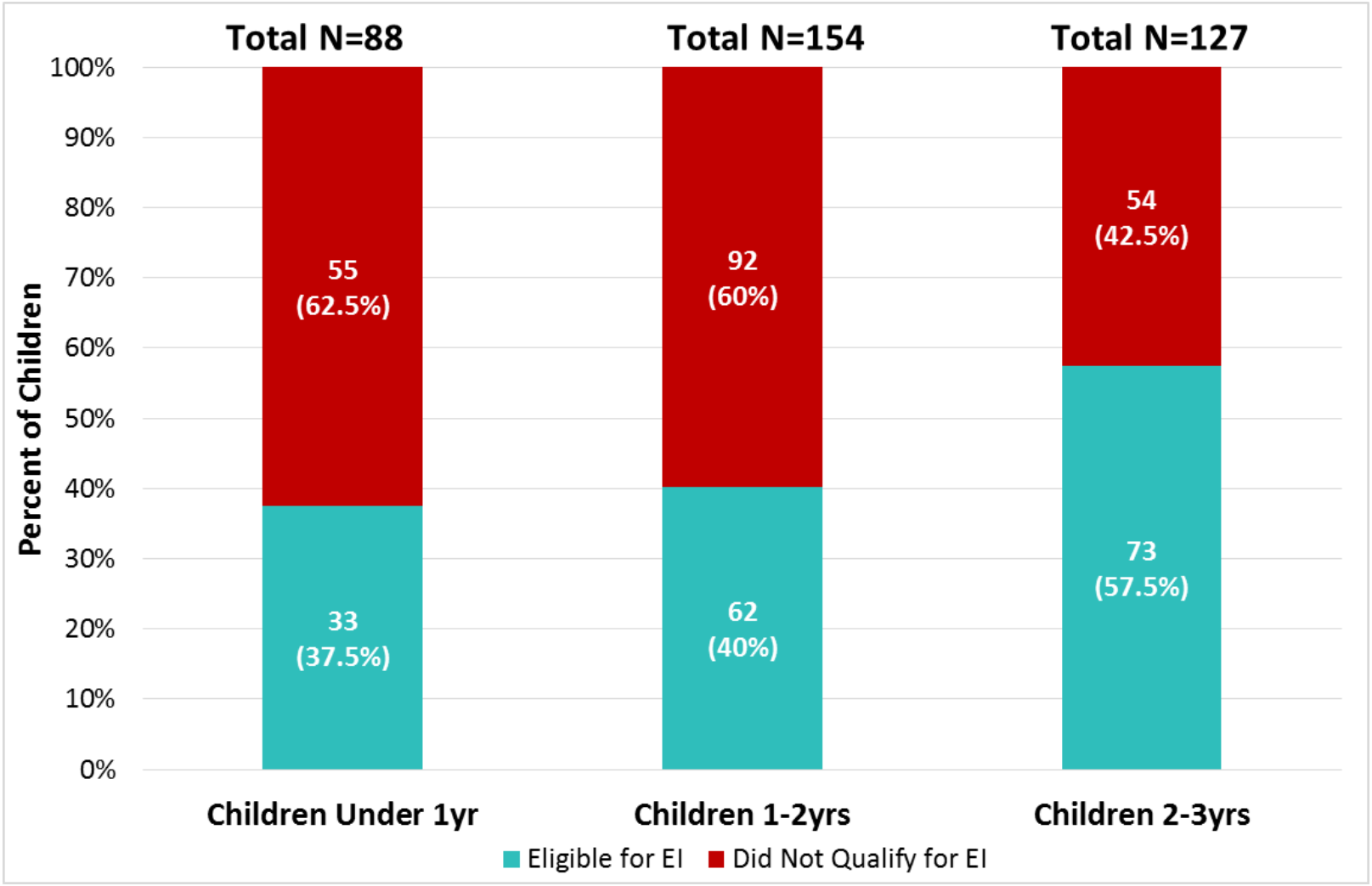
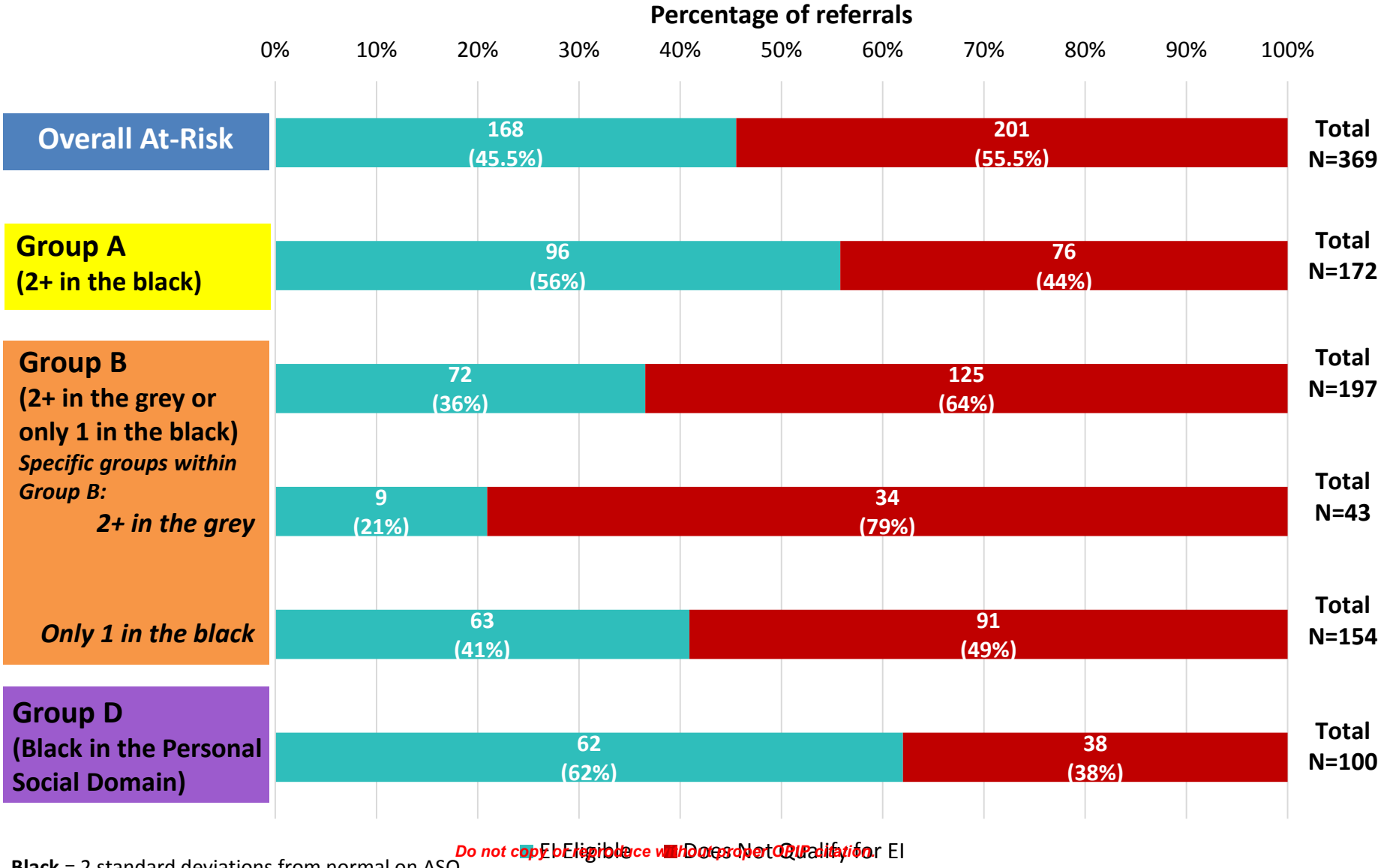
Children Identified as At-Risk on ASQ by Referring Provider and EI Eligibility: By Age



EI Eligibility by ASQ Scores: By Medical Decision Tree Groups



Black = 2 standard deviations from normal on ASQ
Grey = 1.5 standard deviations from normal on ASQ

More Information

1. **Colleen Reuland**
   - reulandc@ohsu.edu
   - 503-494-0456
2. **www.oregon-pip.org**

   Section focused on Follow-Up to Developmental Screening:

   http://oregon-pip.org/focus/FollowUpDS.html
   - Examples of the specific tools available on the website:
     - Asset map to document community pathways from screening to services
     - Follow-up decision tree for primary care providers based on screening result and child and family factors linking to six follow-up resources,
     - Phone follow-up script for referrals made
     - Parent Education Sheet