



NATIONAL CENTER ON  
Early Childhood Quality Assurance

# Developmental Promotion, Early Detection, Referral, and Linkage to Services

National Center on Early Childhood Quality  
Assurance and the American Academy of  
Pediatrics

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



# Funding for the National Center on Early Childhood Quality Assurance



# Welcome and Purpose of Today's Webinar



# Objectives

- ◆ Recognize the impact of the pandemic on reducing access to developmental screenings
- ◆ Understand the importance of increasing access to developmental screenings, resources, and services for all
- ◆ Discuss the need to be intentional when selecting culturally sensitive developmental screening tools and understand how adult behavior may influence screening outcomes
- ◆ Examine opportunities to collaborate with health and other early childhood system partners to increase access to developmental screenings for all children



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# The Importance of Developmental and Behavioral Screening

Jeanne VanOrsdal, Quality Assurance  
Specialist

# Developmental Screening

- ◆ Use of standardized tools for identifying children at risk for disorders or developmental delays
- ◆ A process for identifying concerns about development through partnerships with families

Sources: American Academy of Pediatrics, American Public Health Association, & National Resource Center for Health and Safety in Child Care and Early Education. (2020). 2.1.1.4: Monitoring children's development/obtaining consent for screening. *Caring for Our Children Online Database*. Retrieved June 2, 2021, from <https://nrckids.org/CFOC/Database/2.1.1.4>

Early Childhood Learning & Knowledge Center. (2020). *Developmental screening for children ages birth to 5*. U.S. Department of Health and Human Services, Administration of Children and Families, Office of Head Start. <https://eclkc.ohs.acf.hhs.gov/child-screening-assessment/article/developmental-screening-children-ages-birth-5>

# Pieces of the Puzzle

- ◆ Developmental monitoring
- ◆ Developmental surveillance
- ◆ Screenings
  - Developmental
  - Health (vision, hearing, oral, and others)



# Additional Types of Screenings



- ◆ Behavioral and social-emotional
- ◆ Trauma
- ◆ Hearing
- ◆ Vision
- ◆ Oral health
- ◆ Maternal health



# Why This? Why Now?

- ◆ Increased social-emotional needs
  - Break in continuity of care and routines
  - Regression
  - Potential delays
- ◆ Break in continuity of health care
  - Reduced screening services during the pandemic
- ◆ Increased recognition of disparities that exist in developmental screenings

# Disparities in Screenings

- ◆ Reduced access to screenings
- ◆ Cultural relevance
- ◆ Referral for services
- ◆ Screening tool bias
- ◆ Screener bias



# Increasing Access to Screenings

- ◆ Connecting children and families to access points
  - Child care providers
  - Medical home and health providers
  - Home visiting programs
  - Head Start and Early Head Start programs
  - Title V programs
  - Early intervention programs
  - Others

# Connecting to Resources



# Parental Consent

- ◆ Consent is required to share information across the system.
- ◆ Build parental consent into program policies and procedures.





# NATIONAL CENTER ON Early Childhood Quality Assurance

## Increasing Access: Available Resources and Screening Models

Florence Rivera, Facilitator

American Academy of Pediatrics  
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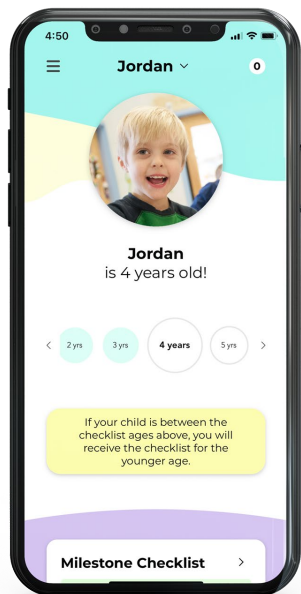
# OPPORTUNITIES - AAP

Partner with us!

- Local pediatricians
- AAP State Chapters
- Early Childhood Champions



# *Learn the Signs. Act Early.*



**“Developmental Screening:  
Access for All Children” Webinar  
June 16, 2021**

**Julia Abercrombie, MPH  
Behavioral Scientist**





# Learn the Signs. Act Early. for Early Childhood Educators

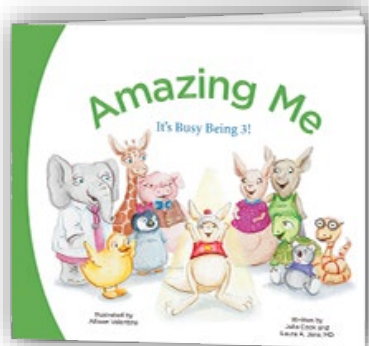
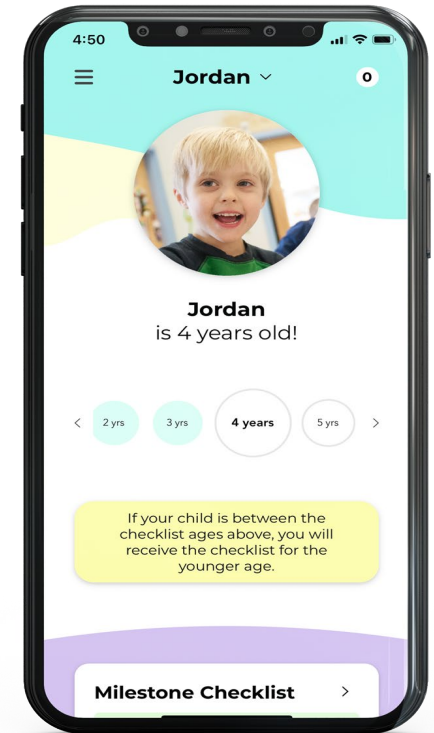
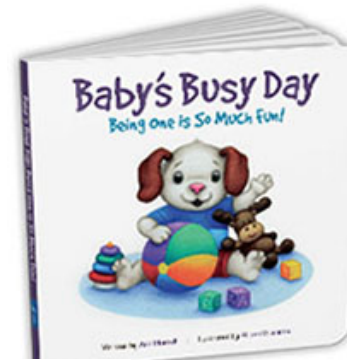
- Developmental milestones resources
  - [cdc.gov/ActEarly/Materials](https://cdc.gov/ActEarly/Materials)
- *Watch Me! Celebrating Milestones and Sharing Concerns* online training
  - [cdc.gov/WatchMeTraining](https://cdc.gov/WatchMeTraining)
- Act Early Ambassadors and Response to COVID-19 Teams
  - [cdc.gov/ActEarly/Ambassadors](https://cdc.gov/ActEarly/Ambassadors)
  - [www.aucd.org/template/page.cfm?id=1185](https://www.aucd.org/template/page.cfm?id=1185)



# Learn the Signs. Act Early. for Families

- Milestone checklists
- *Milestone Tracker* app
- Children's books
- *Milestones in Action* photo and video library
- Much more!

[cdc.gov/ActEarly/Materials](https://cdc.gov/ActEarly/Materials)



# Early Detection, Help Me Grow, Early Childhood Systems, and QRIS



## Paul H. Dworkin, MD

Executive Vice President, Community  
Child Health  
Founding Director, Help Me Grow National  
Center  
Connecticut Children's Medical Center

Professor of Pediatrics  
University of Connecticut School of  
Medicine



# Developmental Surveillance and Screening

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



- Flexible, longitudinal, continuous process
- Knowledgeable practitioners perform skilled observations during child health encounters
- Components:
  - eliciting/attending to parents' concerns
  - obtaining a relevant developmental history
  - making accurate observations of children
  - identifying risk and resiliency factors
  - maintaining record of process and findings
  - sharing opinions with other professionals
- Periodic administration of formal screening tools to enhance effectiveness
- View child within context of overall well-being

# Developmental Surveillance and Screening

## Caveat:

Detection without referral/intervention is ineffective and may be judged unethical

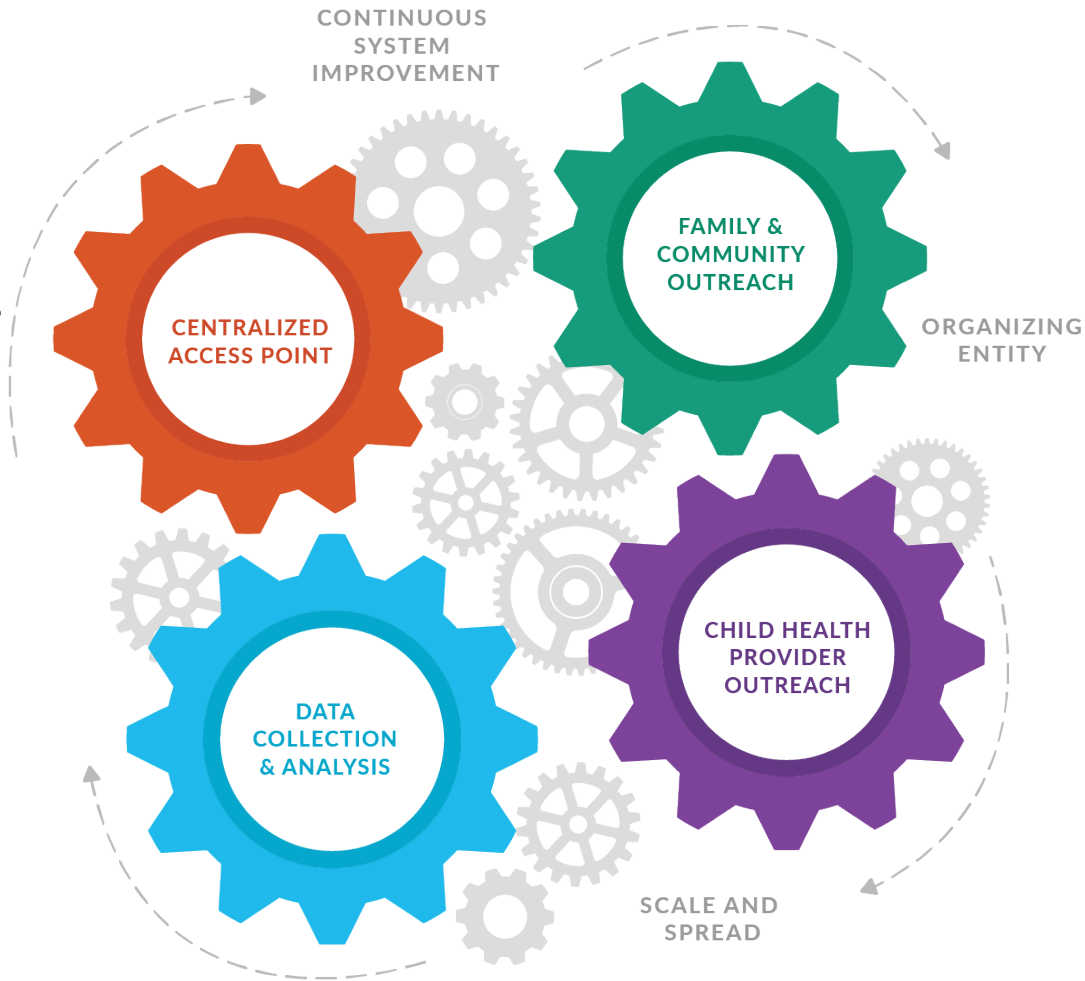
(Perrin E. Ethical questions about screening. *J Dev Behav Pediatr* 1998;19:350-352)



# Help Me Grow (HMG): System Model

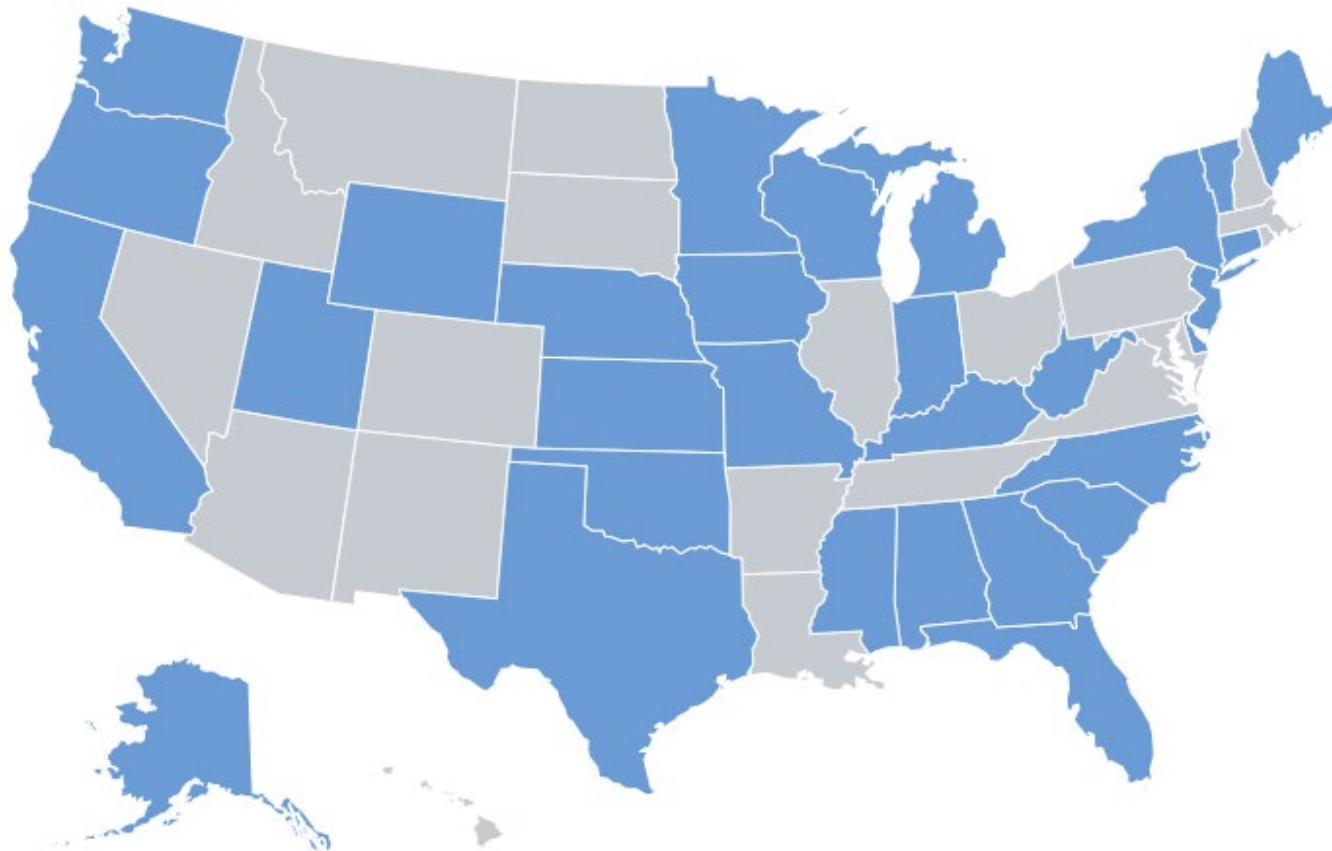
HMG is the only nationally recognized, evidence-based early childhood system model. Our Model leverages and enhances existing resources in order to develop and enhance a comprehensive approach to early childhood system building in any given community.

It is the **Co-operation** of its Core Components that defines the Model.



# HMG: Core Components

MODEL CORE COMPONENT	KEY ACTIVITIES
Centralized Access Point	<ul style="list-style-type: none"> <li>• Specialized child development line</li> <li>• Linkage and follow-up</li> <li>• Researching resources</li> <li>• Real-time directory maintenance</li> </ul>
Family and Community Outreach	<ul style="list-style-type: none"> <li>• Engaged community partners</li> <li>• Networking</li> <li>• Community events and trainings</li> <li>• Marketing</li> </ul>
Child Health Provider Outreach	<ul style="list-style-type: none"> <li>• Physician champion</li> <li>• Training on surveillance and screening</li> <li>• Training on referral and linkage</li> <li>• Closing the feedback loop</li> </ul>
Data Collection and Analysis	<ul style="list-style-type: none"> <li>• Data monitoring</li> <li>• Sharing data across partners</li> <li>• Continuous quality improvement</li> <li>• Community change through data</li> </ul>

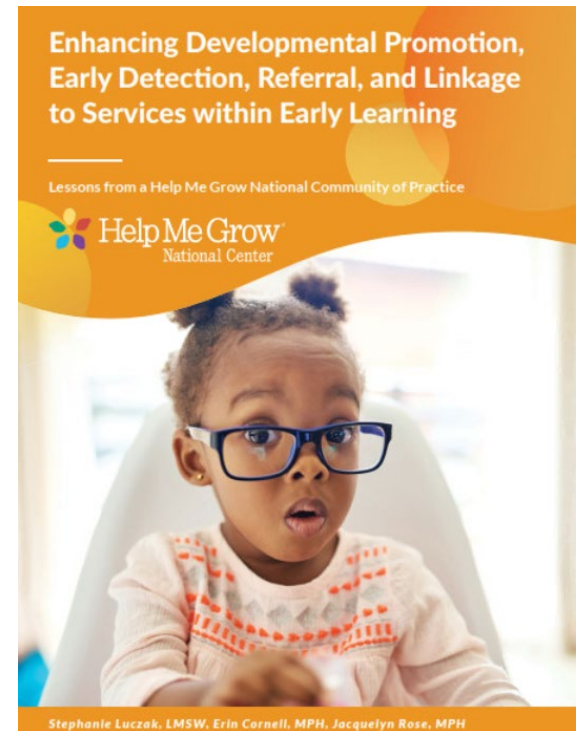


 **Help Me Grow**<sup>®</sup>  
National Center



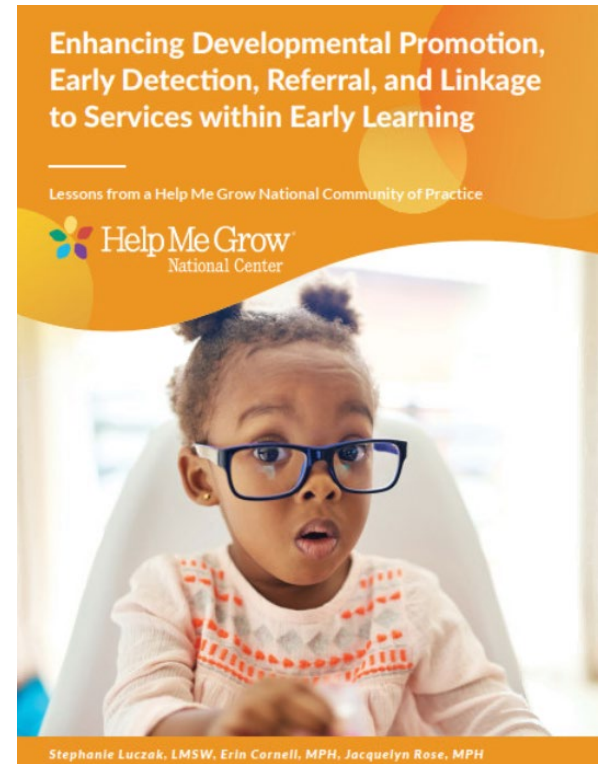
# HMG and the ECE Sector

- ◆ In 2017, with support from the W.K. Kellogg Foundation, the HMG National Center organized an “Innovation Challenge” designed to solicit promising innovations from across the network.
- ◆ Many of the leading innovations focused on system building, specifically focusing on how to strengthen developmental promotion, early detection, referral and linkage through engaging the early learning sector.
- ◆ These initiatives served as justification for organizing a more structured, multi-site Community of Practice from 2019-2020.
- ◆ Led by HMG Orange County and HMG Vermont.
- ◆ Nine HMG affiliates participated in the HMG-EL Community of Practice.



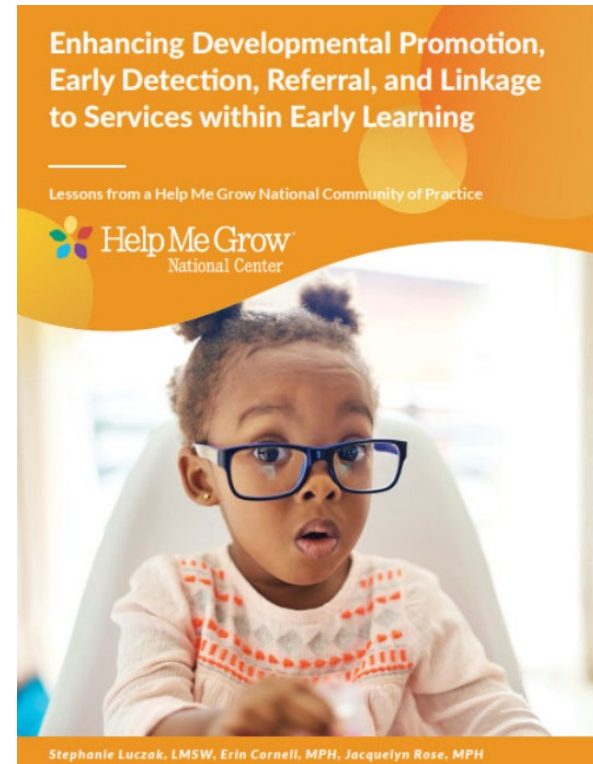
# HMG, ECE, and QRIS

- ◆ Quality Rating Improvement System (QRIS), which is “a method to assess, improve and communicate the level of quality in early care and education settings.”
- ◆ The **BUILD Initiative's [QRIS National Learning Network](#)** helps BUILD states and others develop and improve their QRIS.
- ◆ The partnerships between HMG and QRIS were viewed as naturally synergistic, and the efforts throughout this project reinforced the importance of including developmental screening, referral, and linkage as a part of a quality rating standards.



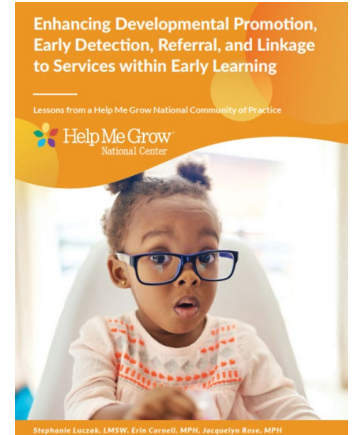
# Learning Collaborative Smart Goals

- Increasing the number of early learning programs conducting developmental screenings and subsequent referrals to the HMG Centralized Access Point;
- Utilizing technology platforms to increase family engagement and provider capacity to conduct developmental screening;
- Embedding developmental screening and linkage to services into QRIS standards; and
- Supporting early learning professionals through increased professional development.



# Select Results Based on Aggregated Metrics

- ◆ A notable increase in **developmental screenings**, beginning at approximately 450 (an average of 100 per HMG community) and increasing to 1,200 (an average of 300 screenings per HMG community).
- ◆ The number of **referrals** from early learning settings to the Help Me Grow Centralized Access Point increased from a baseline number of referrals of 150 compared to a cumulative total number of referrals throughout the project of 450.
- ◆ 5 affiliates reported that they collectively conducted 82 **outreach activities** and provided 204 **professional development activities** specifically to early learning providers throughout the course of this project.



# Integration of Developmental Screening in QRIS - HMG Alaska

“Alaska is a tight-knit state so organizations often work closely together, but sometimes it can take a catalyst to spark the next phase of a partnership. Help Me Grow Alaska and the QRIS system, Learn and Grow, have always been closely linked, but as a part of this Community of Practice, regular meetings started taking place that began a more structured collaboration. Through this work, and through the facilitated technical assistance calls, we were supported in leveraging Preschool Development Grant funds to design a developmental screening training platform to better meet the needs of Alaskan early childhood education providers in anticipation of the upcoming levels of quality through the QRIS.”

– Carmen Wenger, MPH, Program Director, **HMG Alaska**

## Strengthening of Relationship with EL Partners-HMG Alameda County

“Through this project, we deepened our engagement and relationships with our EL partners, learned about their needs of support from our phone line staff and have begun a thoughtful process for changing our feedback protocols for referrals from EL. We are also exploring additional use of technology to streamline the referrals for our EL partners, such as developing an online referral protocol.”

– Vincent Cheng, Community Liaison, **HMG Alameda County**

## Integration of Developmental Screening in QRIS – HMG Orange County

**HMG Orange County**, CA identified a problem in that existing quality rating and improvement system (QRIS) strategies to promote developmental screening and referral to Help Me Grow that worked for center-based programs were not effective with family child care. Through impact of the HMG-ECE innovation, family child care providers achieve a QRIS high rating by utilizing HMG to conduct screening and linkage to needed services.

# Integration of Developmental Screening in QRIS (Supported by Quality Improvement Funds from Child Care and Development Block Grant Act of 2014)

## ◆ **New Mexico**

- Well child visit
- Developmental screening
- Vision, oral, and hearing screenings

## ◆ **Rhode Island**

- Child Assessment (surveillance and screening)

## ◆ **Nevada**

- Use of a short screening tool that can be used to identify children with delays



# Lessons Learned from HMG and Quality Rating Improvement Systems

Theme	Recommendations for HMG	Recommendations for QRIS
<p>The value of HMG as a resource to provide information about child development and resources within the community to both home- and center-based early learning providers, who families often view as a “trusted messenger” within early childhood systems.</p>	<p>Partner with state or local quality and QRIS entities to contribute to improving the quality of early learning experiences.</p>	<p>Include developmental screening, linkage, and referral within quality rating standards across settings as well as age groups.</p>
<p>The benefits of HMG providing professional development opportunities to early learning providers.</p>	<p>Focus on partnerships across the early childhood sector to build a more comprehensive, integrated early learning sector that is a part of a larger early childhood system.</p>	<p>Utilize HMG to ensure a continuum of care in practice and prevent screening in isolation.</p>
<p>The importance of a robust QRIS approach to improving quality within early learning settings, inclusive of developmental screening and linkage to services.</p>	<p>Understand the developmental screening landscape across the early childhood system to prevent and respond, respectively, to duplication and gaps in screening.</p> <p>Maximize the window of opportunity to provide scalable, sustainable professional development opportunities to early learning providers.</p>	<p>Include developmental screening, linkage, and referral within quality rating standards across settings as well as age groups.</p> <p>Utilize HMG to ensure a continuum of care in practice and prevent screening in isolation.</p>

# HMG: Impact of the Pandemic



**Increase in calls to the HMG Centralized Access Point.** Nearly 50 percent of responses to the survey identified that the HMG Centralized Access Point has seen an increase in calls in response to the conditions of COVID-19.



**Connecting families to resources.** As COVID-19 rapidly impacts families' health, economic, and social well-being, HMG affiliates have reported connecting families to resources during this time.

# Essential Infant & Toddler Basic Needs During the Covid-19 Pandemic

## Supplemental \$500,000 Emergency Response Grant

### Highlights include:



Over **2.8 million** resources distributed to families with infants and toddlers



**33,205** unique interactions with families with infants and toddlers



**1,167,470** diapers distributed



**1,537,302** baby wipes distributed



**16,270 ounces** of formula distributed



**93,406** additional baby items distributed

### Participating Affiliates

- Long Island, New York
- Marion, Florida
- Missouri
- New Jersey
- Oregon
- Orange County, California
- Pierce County, Washington
- Sacramento County, California
- Skagit County, Washington
- South Carolina
- Tarrant County, Texas

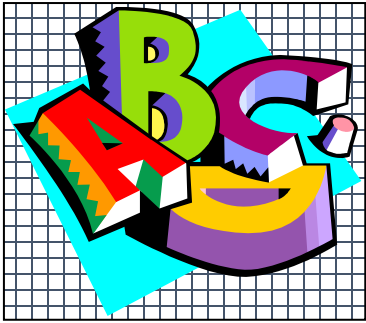


# HMG and the Family Support Sector [National Home Visiting Collaborative]

- ◆ The percent of children with an identified developmental concern who received support increased from 70% to 82%.
- ◆ Parents were asked about developmental concerns at 95% of visits (baseline=75%).
- ◆ 90% of children were screened every 6 months (baseline=51%).

# 7 Model Elements to Support Families' Needs

- 1 Ensuring Equity Through Targeted Universalism
- 2 Connecting to Families Through Outreach Efforts
- 3 Maintaining a Comprehensive, Up-To-Date Resource Directory
- 4 Linking Families to Community-Based Services
- 5 Providing Ongoing Support to Families
- 6 Partnering with Physicians Through Systematic Feedback Loops
- 7 Leveraging Technology to Sustain Support for Families



# Partnership with Pediatric Practices

The NC ABCD (Assuring Better Child Health &  
Development) Project



Marian F Earls, MD, MTS, FAAP



# NC ABCD Project

- In North Carolina, we have had the NC ABCD Program from 2000-2020.
  - initially funded by the Commonwealth Fund, and was integrated into the work of Community Care of NC.
  - now transitioned to a social-emotional health initiative called **Early Well** funded by Duke Endowment.
- From the outset, we convened a cross-sector ABCD State Advisory Group, focused on collective impact, which met quarterly for 19 years. The ABCD State Advisory Group has transitioned to the **Early Well** Steering Committee.

# NC ABCD Project

- Includes general D&B screening, autism screening, postpartum depression screening. Now expanding to include social-emotional and social determinants of health screening (a 2-generational approach to prevent/ameliorate toxic stress)
- State Advisory and QI groups - active since 2001
  - **ABCD State Advisory Group** (Part C, Part B preschool, Smart Start, Family Support Network, Head Start, NC AAP, NCAFP, Medicaid, Public Health, Division of Child Development and Early Education, Child First, Mental Health, NC Autism Alliance, NC Infant Mental Health Alliance, Care Coordination for Children (CC4C), Child Care Health Consultants, CCR&R, Reach Out and Read, NC ECF, NC Child) meets quarterly to build consensus, address administrative and policy barriers.
  - **ABCD QI Group** (QI staff from all CCNC networks and Smart Start) also met quarterly for strategizing, reviewing screening data
- IECMH Team – DC:0-5 inclusion in Medicaid Policy; DC:0-5 trainings



# NC ABCD Priorities for Collaboration

- Standardized communication among:
  - primary care,
  - Part C,
  - Part B,
  - Head Start and other early childhood settings,
  - Title V Care Coordination for Children 0-5,
  - IECMH (Infant and Early Childhood Mental Health is an essential part of a systems serving young children and families.
- There was not then, and not now, integrated data systems that facilitate such communication. The goal is to achieve that exchange, but we did not allow "the perfect to be the enemy of the good" and developed standardized communication processes.



# NC ABCD Project Collaboration Results

- **Consensus** on statewide forms for referral, Release Of Information, feedback to practice from Part C and Part B preschool.
- Consensus on a 2-way release form meeting HIPPA and FERPA, **always involving the family as part of the care team.**
- Referral guidance for primary care clinicians led to higher rates of referral
- Medicaid Claims Data
  - General Developmental & Behavioral & Autism Screening Rate – **94%**
  - Maternal depression screening data (most recent measure **89%** at the 1 month well visit)



# Collaboration with Early Childhood Educators

## Recognition that:

- Early childhood teachers are with a child 6 + hours of the day and have valuable observations about development to share
- Early childhood teachers desire and appreciate communication
- Early childhood teachers would like recommendations for promotion of development
- If part of Head Start, there was also access to IECMH consultants
- The early childhood setting may also be screening

Maximizing the role of CCHC, Child Care Health Consultants, as liaisons between primary care and child care can enhance/facilitate communication.



## Building Resilience Engaging Families Empowering Communities

Sherri L. Alderman, MD, MPH, IMHM-E Policy & Clinical, FAAP

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National Center on Early Childhood Quality Assurance  
June 16, 2021

**Act Early** Oregon

# Disclaimer

- **Neither I nor my immediate family have any financial interests to disclose.**
- **I do not intend to discuss any unapproved or investigative use of commercial products or devices.**
- **Reasonable attempts have been made to provide accurate and complete information.**
- **The practitioner or provider is responsible for use of this educational material; any information provided should not be a substitution for the professional judgement of the practitioner or provider.**

# Strengthening Resilience Skills, Behaviors, and Resources Among Latinx and Migrant and Seasonal Farm-Working Families Essential for COVID-19 recovery in Oregon

- **Funded by the Association of University Centers on Disabilities**
- **In collaboration with the National Center on Birth Defects and Developmental Disabilities at the Center for Disease Control and Prevention**



# Strengthening Resilience Skills, Behaviors, and Resources Among Latinx and Migrant and Seasonal Farm-Working Families Essential for COVID-19 recovery in Oregon

- **An culturally sensitive and responsive approach to promoting self-efficacy, resilience, and social capital within the migrant and seasonal farm-working community**







*We engage with families not just work  
with them.*

Donalda Dodson  
Executive Director  
Oregon Child Development Coalition

## Backdrop

34% of Oregon Latinx children live in poverty

20 percentage points higher than Whites non-Hispanic

23% of all Oregon's children <6 yo live in poverty



National Center for Children in Poverty  
US Census

# Backdrop

Oregon estimates:

172.6k migrant and seasonal agricultural workers and family members

86k dependents

21k migrant children & youth

Calculated using Census of Agriculture, patient health clinic, DOE, and unemployment records



## Backdrop

40% of COVID-19 cases in Oregon are Hispanic

13.4% of Oregon's 4.2 million total population are Latinx

Hispanics are 4 times more likely to be hospitalized compared to White non-Hispanic



OHA website, September 19, 2020  
US Census  
MMWR August 14, 2020

# Backdrop

## Oregon County COVID-19 Cases by Race and Ethnicity (per 10,000 population)

Race/Ethnicity	County				
	Washington	Umatilla	Deschutes	Multnomah	Marion
White	6	4	3	8	17
Latinx	32	30	12	29	27
<b>Latinx:White</b>	<b>10.3</b>	<b>7.5</b>	<b>4</b>	<b>3.6</b>	<b>1.6</b>

Center for Disease Control and Prevention  
NYT July 5, 2020

## Backdrop

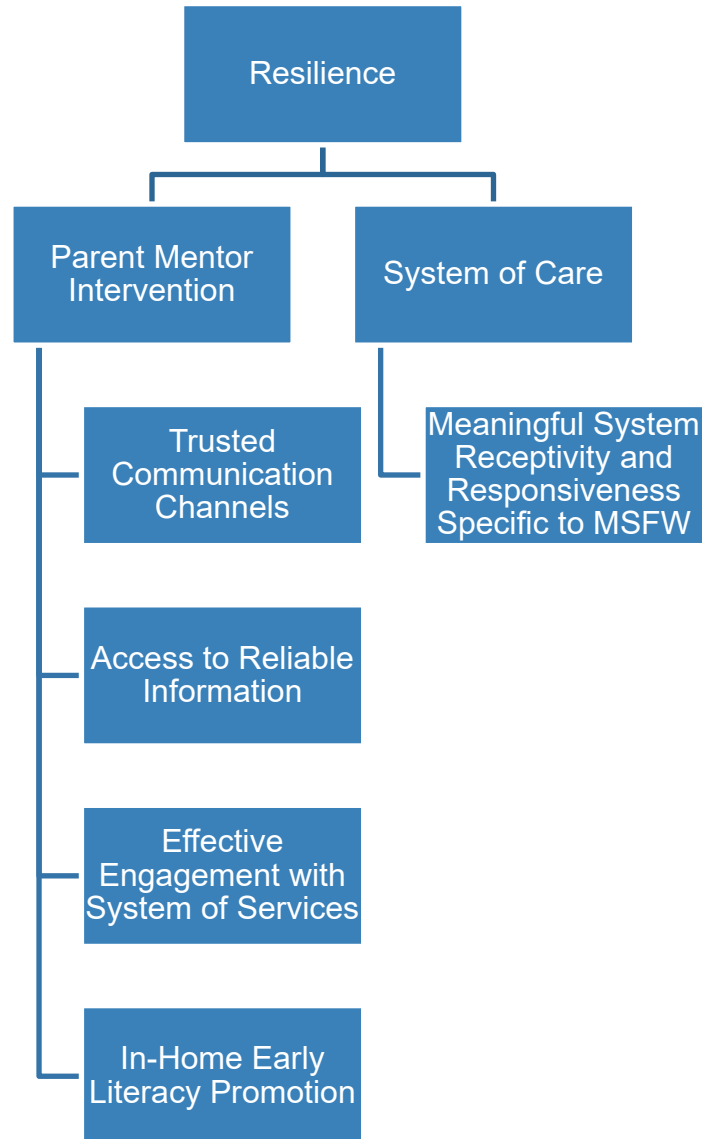
<b>County</b>	<b>Total MSFW</b>	<b>Migrant Workers</b>	<b>Seasonal Workers</b>	<b>Non-Farm-workers in Migrant Households</b>	<b>Non-Farm-workers in Seasonal Households</b>	<b>Total MSFW Workers &amp; Non-Workers</b>
Polk	3,328	1,115	2,213	989	2,332	6,650
Washington	7,463	2,500	4,963	2,219	5,230	14,911
Total	10,791	3,615	7,176	3,208	7,562	21,561

# Act Early Oregon Parent Mentor Project

This project is designed to build individual self-efficacy, resilience, and community social capital by promotion of optimal early childhood development while:

- honoring a family's culture and heritage
- cultivating knowledge, autonomy, and control
- building community leadership and empowerment
  
- influencing intentional development of meaningful system receptivity and responsiveness to MSFW

# Act Early Oregon Pilot





# Array of Concepts

## Strengths

- Community
- Resilience
- Social capital
- Social integration
- Social networks
- Interpersonal care, trust & respect
- Self-determination

## Guiding Principles

- Empowerment
- Self-efficacy
- Family engagement
- Human rights
- Human dignity
- Cultural sensitivity & responsiveness
- Parallel process
- Child development

## Challenges

- Racism
- Marginalized
- Poverty
- Trauma
- COVID
- Social constructs
- Financial Systems

**Ecological approaches** emphasize the importance of the **social context** within which individuals live & work .

**Close-knit networks** exchange more affective and instrumental support

**Social supports** are key psychosocial **protective** factors that **reduce individuals' vulnerability** to the deleterious effects of stress.

**Strengthening social networks** and enhancing the exchange of **social supports** may increase a community's ability to garner its resources and solve problems

Intentional **network building** and strengthening social support within communities are associated with enhanced **community capacity and control**.

# Resiliency

## Individual

- Problem-solving capacity
- Access to trusted channels of communication
- Access to reliable information
- Awareness of control capacity

## Community

- Empowerment
- Competence
- Confidence



*Oregon's Parent Mentor Project promotes early identification of children with development delays by focusing on empowering migrant seasonal farmworking families to engage in developmental monitoring through partnering with Oregon Child Development Coalition and using their evidence-based Parent Mentor Program.*



**Thank you!**

**Questions:**

**[actearlyoregon@gmail.com](mailto:actearlyoregon@gmail.com)**

# Resources

- Birth to Five Watch Me Thrive: Compendium of Measures  
[https://www.acf.hhs.gov/sites/default/files/documents/ecd/screening\\_compendium\\_march2014.pdf](https://www.acf.hhs.gov/sites/default/files/documents/ecd/screening_compendium_march2014.pdf)
- Head Start Tip Sheet for Grantee Planning: Developmental Screening for Children Ages Birth to 5 <https://eclkc.ohs.acf.hhs.gov/child-screening-assessment/article/developmental-screening-children-ages-birth-5>
- Screening is the First Step in Getting to Know the Child  
<https://eclkc.ohs.acf.hhs.gov/physical-health/article/screening-first-step-getting-know-child>
- Special Considerations: Developmental Screening of Children Ages Birth to 5 Who Are Dual Language Learners (DLLs) <https://eclkc.ohs.acf.hhs.gov/child-screening-assessment/article/special-considerations-developmental-screening-children-ages-birth-5-who-are-dual-language-learners>
- Training Module for Child Care Consultants  
<https://www.zerotothree.org/resources/72-infant-and-toddler-development-screening-and-assessment>.

# Upcoming Events

- ◆ August 2021 webinar
  - Perspectives from the Field: State Stories of Collaboration on Developmental Screening
- ◆ 2021 Community of Practice
  - Expanding Developmental Screening Initiatives

# Contact Information



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