

*Help Me Grow* Vermont (*HMG VT*) is a statewide system for improving access to existing resources and services for prenatal parents and families with young children through age eight. The *HMG VT* system is positioned to ensure effective, universal early surveillance, screening and linkage to existing resources and community-based services. *HMG VT* strives to connect systems, service providers and families to the range and breadth of services for young children and to build collaboration across health, education, and family support sectors. In addition, the *HMG VT* system works to identify gaps in and barriers to services and shares this service gap/barrier data with all Vermont stakeholders as a system's change strategy.

### Who is Supporting Developmental Promotion, Early Detection, and Intervention?

One of *HMG VT*'s key partners is a specialized contact center operated by Vermont 2-1-1, a program of the United Ways of Vermont. Child development specialists at the contact center help connect children and families to services they need. They also provide information about services, initiate referrals, and share resources about developmental milestones. In 2016, as part of a *Help Me Grow*® National Center Strengthening Families Protective Factors pilot project, child development specialists developed and implemented strategies to: 1) work collaboratively with parents to coordinate support for children's development, and 2) help parents to identify and mobilize their own resources to address their family's needs by providing information and guidance.

The number and range of providers prepared to promote developmental surveillance/monitoring, complete developmental screening, identify and address concerns, and seek resources is growing rapidly across the state. Since 2013, over 300 early care and education professionals (ECEPs) from 139 childcare programs have received developmental screening training by Vermont Child Health Improvement Program (VCHIP) staff<sup>1</sup>. These ECEPs are now actively assessing child development using validated tools provided during their training.

Improved screening practices has also been a goal at primary care practices across Vermont. Developmental screening was a focus of VCHIP's Child Health Advances Measured in Practice (CHAMP)<sup>2</sup> 49 primary care practice network in 2016. Clinicians and other staff from 32 pediatric and family practices attended the CHAMP Learning Session in September to learn techniques for managing developmental screening for their panels of young children. Seven of these practices engaged in additional education focused on recall and reminder systems and coding and billing for developmental screening. This group will continue to receive training in the areas of: positive screen follow-up, using a strengths-based approach when talking about results with families, and use of Vermont's new Universal Developmental Screening (UDS) Registry (in early 2017).

### WHAT ARE STAKEHOLDERS SAYING ABOUT THE *HMG VT* SYSTEM?

*HMG VT* system stakeholders observed how *HMG VT* helps families identify and access appropriate resources, leverage existing programs, and "develop," "strengthen," and "cement" relationships between organizations working on developmental promotion, developmental screening and early identification and intervention. They described how a centralized access point that all families of children prenatal through eight years of age can use is a major system strength, enabling many more families access to information about development and available services.

<sup>1</sup> This work has been funded through Vermont Birth to Five (VB5), a project of the Permanent Fund for Vermont's Children, a supporting organization of the Vermont Community Foundation and Building Bright Futures State Advisory Council Inc. Project LAUNCH (Linking Action of Unmet Needs of Children's Health).

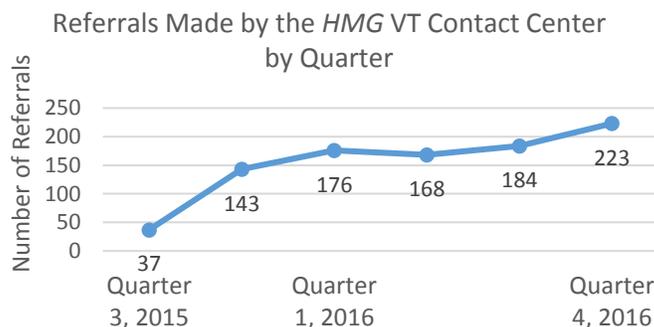
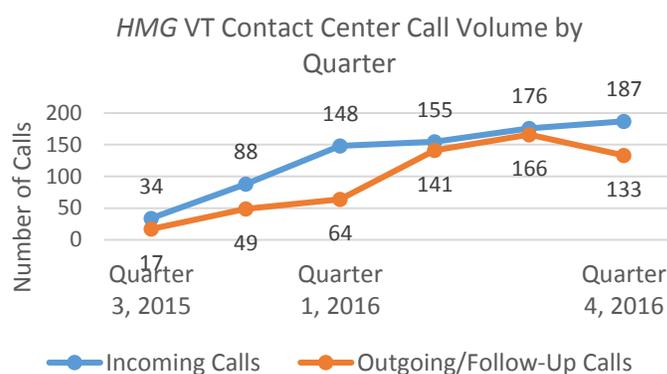
<sup>2</sup> CHAMP is funded through a grant from the Vermont Department of Health.

*HMG* VT system building has leveraged these developmental promotion and early identification efforts underway at childcare programs and primary care practices. Additionally, *HMG* VT is partnering with Building Bright Futures (BBF) Regional Councils, Vermont’s Early Childhood Advisory Councils to the governor, administration and legislature<sup>3</sup> to bring developmental promotion resources and activities, early identification and developmental screening to community events for families across Vermont.

*HMG* VT was also selected to participate in a *Help Me Grow*® National Center 3-year, multi-site initiative to enhance the capacity of pediatric primary care practices to promote resiliency and mitigate the impact of toxic stress. *HMG* staff are working in partnership with a local Parent Child Center, whose staff provide developmental screening through home visiting activities, and with whom the Clinic had been wanting to strengthen its collaboration and communication, to bring academic detailing to providers at the University of Vermont Medical Center Pediatric and Pediatric New American Clinics<sup>4</sup>. Providers will seek to improve postpartum depression screening, child mental health history, developmental screening, the frequency with which parent concerns are elicited and the proportion of children that are connected to intervention services for the approximately 7,500 patients they serve.

### Who is *Help Me Grow* Reaching?

Child development specialists at the *HMG* VT contact center help connect children and families to services they need. The contact center received 666 (incoming) calls in 2016 and made 504 follow up (outgoing) calls. Calls were received from across Vermont and were received roughly in proportion with the state’s population. These calls resulted in over 825 referrals, most frequently having to do with basic needs, childcare, parenting/education, legal assistance, developmental screening, and parent/caregiver support. Based on a limited number of interviews with contact center users, this service has been effective at supporting families and getting them the resources they need. When child development specialists used specific strategies outlined in a National Center pilot, over half of the clients were connected to resources. ECEPs have shared information on well over 1000 screenings. Of these, over 100 met the threshold for further evaluation for developmental concerns and over 400 required further monitoring and follow-up. It is likely that a significant number of additional screenings have gone unreported to VCHIP.



Developmental screening data was gathered on 725 children seeking primary care at CHAMP practices in 2015<sup>5</sup>. In the year prior to the network’s focus on developmental screening (2015), 58% had been screened using a validated tool at

<sup>3</sup> This work is funded through Vermont’s federally funded Early Learning Challenge – Race to the Top grant

<sup>4</sup> This work is funded through the Jeffrey and Barbara Picower Foundation.

<sup>5</sup> Wasserman, RC, Walsh, JK, Richardson, SV, Pellegrino, C, Brownlow, K. (2016). *CHAMP 2015 Network Data Summary Report*.

Vermont Child Health Improvement Program [VCHIP]. University of Vermont, College of Medicine. Accessible from: [www.vchip.org](http://www.vchip.org)

nine months of age, 53% at 18 months, and 66% had been screened at 24 or 30 months. One third had received three screenings by 30 months of age. Data about screenings conducted in 2016 will be conducted in 2017.

### HOW IS *HMG* VT IMPACTING FAMILIES?

**7** out of **8** families that were interviewed about their experiences with the *HMG* VT system answered “quite a bit” or “extremely” to questions asking if they are able to *access services if they need them* and if they *have people who can provide assistance if needed*.

Vermont’s new UDS Registry is prepared to receive data from community providers, ECEPs and primary care practices across the state. This statewide Registry will provide a better window into both the number of children being screened and the results of screenings. A pediatric practice, ECE center, and Children’s Integrated Services (CIS) team in one region of the state was trained and began entering data in 2016. Several primary care practices from additional communities have requested (and been granted) access to view developmental screening data in the Registry. Plans are in place to spread training and data entry to several additional regions.

BBF regional councils are beginning to track data about the children and families who attend community outreach and networking events. Starting in 2017, we will learn how BBF is reaching families, the number of children and families they are impacting, as well as what developmental promotion information they are sharing and how many children are screened at community outreach events.

Stakeholders described the benefit of ECEPs conducting developmental screenings and of having a UDS Registry. With more people screening children, and with a system to track screenings completed across settings and encourage communication and follow-up, we are much more likely to identify children who need additional supports than through traditional screening efforts.