ECCS State Advisory Team (SAT) Quarterly Meeting
June 14, 2019
10:00-11:00 am

If you’re having technical difficulties please contact Ciearra Norwood, ciearra.Norwood@ccf.ny.gov
Thank you to our State Advisory Team Organizational Members
Agenda:

• Introductions
• Year 4 Meeting Schedule
• A year in review
• Plans for Year 4
• Community Updates
SAT Year 4 Meeting Schedule

September 13, 2019

December 13, 2019

March 13, 2020

June 12, 2020
Please raise your hand to speak so we can unmute you or type in the chat box to share!
5 YEAR AIM
Improve developmental skills of 3 year old children by 25%
NYS ECCS Year 3 in Review

- Change in ECCS Measurement Strategy
- Impact Grantee and place-based communities attend Advancing Race Equity Symposium
- Quarterly State Advisory Team Meeting & Community CoIIN Meetings

Quarter 1

- Partner Tool distribution to SAT
- Selected reviewers for the Community Maturity Scale
- Quarterly State Advisory Team Meeting & Community CoIIN Meetings

Quarter 2

- Impact Grantee and place-based communities attend Help Me Grow National Forum
- Impact Grantee attends NYS ECLC’s Cost of Inequity Conference
- Work plan development year 4
- Quarterly State Advisory Team Meeting & Community CoIIN Meetings

Quarter 3

- Change in ECCS Measurement Strategy
- Partner Tool Results
- Virtual Learning Session Part 1
- Impact Grantee interviewed by NICHQ in featured article
- Participating on the Cross Systems Workgroup and the Workforce Workgroup for the Governor’s Child Care Availability Task Force
- Quarterly State Advisory Team Meeting & Community CoIIN Meetings

Quarter 4

- Change in ECCS Measurement Strategy
- Partner Tool Results
- Virtual Learning Session Part 1
- Impact Grantee interviewed by NICHQ in featured article
- Participating on the Cross Systems Workgroup and the Workforce Workgroup for the Governor’s Child Care Availability Task Force
- Quarterly State Advisory Team Meeting & Community CoIIN Meetings
NYS ECCS Year 3 in Review

Highlights
- Attending the Advancing Race Equity Symposium, the Prevention Science Forum on Innovative Practices in Prevention Science and the NYS Conference on Maternal Depression

Challenges
- Number of primary drivers changed from 6 drivers to 5 drivers
- Innovation and improvement measures replaced existing driver measures
- Placed-based communities only responsible for reporting data on driver 2

Quarter 1

Highlights
- Selected reviewers for the Community Readiness Scale

Challenges
- Partner Tool participation

Quarter 2
NYS ECCS Year 3 in Review

Highlights
• Placed-based community leads traveled to CCF to participate in the Virtual Learning Session
• Impact Grantee interviewed by NICHQ in featured article

Challenges
• Placed-based communities no longer responsible for reporting data on driver 2 if the data collection does not support their work

Highlights
• Impact Grantee and place-based communities attend Help Me Grow National Forum

Challenges
• Developing a measurement strategy for year 4
Plans for Year 4

- Finalize a measurement strategy
- Support placed-based communities with Learn the Signs. Act Early. materials
- Provide cultural competency and health literacy training in placed-based communities
- Partner Tool Survey
Please raise your hand to speak so we can unmute you or type in the chat box to share!
Place-Based Community Update: Nassau County

Liz Isakson, MD, FAAP
- Executive Director
- ECCS Place-Based Community Lead
- contact: liz@docsfortots.org

Melissa Passarelli, MS
- Director of Programs
- ECCS Place-Based Community Lead
- contact: melissa@docsfortots.org
Data since last time (3/4/19-6/3/19)

- HMG Entry Point
  - Health Care Provider Referral = 53% (up 140%)
  - Callers = 30% (down 26%)
  - 211 = 3.5% (down 64%)
  - Community partner referral = 7.1% (up 60%)

- Main Concern
  - Basic need = 25% (down 23%)
  - Communication = 23% (up 32%)
  - Parental Support = 14% (up 900%)
  - Child Care = 12% (up 89%)

- Connection Rate
  - For 12/3/18-3/3/19, 94% of cases were connected; 4% not connected; 2% pending; 0% unknown
  - 3/4/19-6/3/19 (still working with families): 63.2% connected; 16.2% not connected; 20.6% unknown

- Caregiver Primary Language
  - English = 46% (up 33%)
  - Spanish = 50% (up 36%)

- Barriers
Data since last time (3/4/19-6/3/19)

• Barriers
  – Caregiver did not use referrals given= 24% (up 167%)
  – Eligibility- did not meet income criteria= 15% (up 150%)
  – Agency did not return call= 15% (up 150%)
  – Agency unable to provide service at this time= 12% (up 33%)
  – Transportation not available= 9% (no change)
  – Agency did not provide service= 6% (no change)
Developmental Screening Update

- Ages and Stages Questionnaires (ASQ-3 and ASQ-SE) and online data system
- Screening available for family through website (Family Access)
- Types of sites that screen through HMG-LI:
  - Early learning
    - HMG Community of Practice - Goal: Improve the process for sustainably recruiting, training, and proving ongoing support to early learning sites that want to screen through HMG-LI
    - In partnership with our two local CCR&Rs, QualityStarsNY, and the Long Island Pre-K Initiative
    - Home visiting
    - Infant mental health
- Books, Balls and Blocks events
ASQ-3 Scores (N=689)

- Monitoring: 18%
- Below: 17%
- Above: 65%
Learn the Signs, Act Early campaign

- Developed by CDC, in conjunction with the AAP
- Help parents become better partners in monitoring development
- Objective, research-based information may make visits more productive
Milestone Moments Booklet

Milestone Moments

Learn the Signs. Act Early.

You can follow your child’s development by watching how he or she plays, learns, speaks, and acts.

Look inside for milestones to watch for in your child and how you can help your child learn and grow.

Your Child at 18 Months

What children do at this age

Social/Emotional

- Likes to hand things to others as play
- May have temper tantrums
- May be afraid of strangers
- Shows affection to familiar people
- Plays simple pretend, such as feeding a doll

Language/Communication

- Says minimal single words
- Says and shakes head “no”
- Points to show something he wants

How you can help your child’s development:

- Provide a safe, loving environment. It’s important to be consistent and predictable.
- Praise good behaviors more than you praise bad behaviors (use only very brief time outs).
- Describe your emotions. For example, say, “you are happy when we read this book.”
- Encourage pretend play.
- Encourage empathy. For example, when he loves a child make a sad, encourage him to hug or pat the other child.
- Read books and talk about the pictures using simple words.
- Obey your child’s words.
- Use words that describe feelings and emotions.
- Use simple, clear phrases.
- Ask simple questions.

Learn the Signs. Act Early.

www.cdc.gov/ActEarly
Milestone Moments Booklet

- Includes:
  - Complete milestone checklists (2mo – 5yrs)
  - Activities to try at home
  - Space to write down questions
- Intended for parent use throughout a child’s early years
- Helps parents prepare for well-child visits; gives you a parent-friendly reference
Milestone Checklists

- Complete checklists address
  - Four domains of development
  - Developmental “red flags”

- How to use
  - Distribute to families at every well-child visit

- Can be printed with Spanish translation on reverse
Select milestones at a glance for ages 6 months to 4 years.
Free Continuing Education Opportunity

- Free online courses eligible for CME, CNE and CEU credits
- MOC (Part 2) Approved
  - Identifying
  - Diagnosing
  - Managing
- In-Class Curriculum
  - Teaching Guide
  - Video Library
Act Today!

- View, print, or order FREE “Learn the Signs. Act Early.” resources at [www.cdc.gov/ActEarly](http://www.cdc.gov/ActEarly)
- If you’d like to customize these materials for your practice and print them locally, contact [ActEarly@cdc.gov](mailto:ActEarly@cdc.gov)
- Access free continuing education courses on autism spectrum disorder at [www.cdc.gov/AutismCaseTraining](http://www.cdc.gov/AutismCaseTraining)

Thank you!
Please raise your hand to speak so we can unmute you or type in the chat box to share!
Place-Based Community Update: Western New York

Dennis Kuo, MD, MHS
- Associate Professor and Division Chief, General Pediatrics, University at Buffalo
- Medical Director of Primary Care Services at Women & Children’s Hospital of Buffalo
- ECCS Place-Based Community Lead
- contact: dkuo@upa.chob.edu

Lea Passage, MHA
- Early Childhood/Population Health Project Coordinator, UBMD Pediatrics
- ECCS Place-Based Community Lead
- contact: lpassage@upa.chob.edu
Objectives
What do we want to accomplish?

Past

1. Screenings
2. Referrals

Present

1. System navigation
2. Culture change
3. Positive parenting practices

Promoting healthy growth and development for every child
Objectives
What do we want to accomplish cont.

1. System navigation
   – Identification of available services (211, HMG, CPSE, etc.)
   – Referral follow up
   – Addressing social determinants of health and connecting families to support

2. Culture change
   – Re-orient pediatric practices on social emotional development
   – Consistent screenings

3. Positive parenting practices
   – Pediatrics Supporting Parents Learning Collaborative
   – Reach Out and Read
   – Promotion, signage

4. Cultural Competency
   – Evaluate practice’s level of cultural competency in order to effectively communicate, provide services, and meet the needs of the population
ECCS Learning Collaborative Updates
Team Assessment Update

**Tonawanda Pediatrics**
- Completion rates declined: 78% January ➔ 76% February ➔ 73 % March ➔ 75% in April.
- Reach out to parents and collect data on why the questionnaires are not brought back in when mailed out to them prior to their appointment.

**Main Pediatrics**
- EMR adjustments to simplify data collection

**Niagara Street/Towne Gardens**
- Decline in ASQ completion rate from March (65%) to April (17%) at Niagara Street
- Lea to review data on why ASQs were not completed, and work with office manager, providers, and staff.

**Jericho Road**
- No ASQ data yet
- ASQs will be administered during home visits by Parents as Teachers program

**Neighborhood Health Center**
- No data for the month of April
ECCS Learning Collaborative Updates

Data

Niagara Street Completed ASQs

<table>
<thead>
<tr>
<th>Month</th>
<th>Percent Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>70%</td>
</tr>
<tr>
<td>February</td>
<td>60%</td>
</tr>
<tr>
<td>March</td>
<td>50%</td>
</tr>
<tr>
<td>April</td>
<td>20%</td>
</tr>
</tbody>
</table>

Towne Gardens Completed ASQs

<table>
<thead>
<tr>
<th>Month</th>
<th>Percent Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td>10%</td>
</tr>
<tr>
<td>February</td>
<td>20%</td>
</tr>
<tr>
<td>March</td>
<td>30%</td>
</tr>
<tr>
<td>April</td>
<td>40%</td>
</tr>
</tbody>
</table>
ECCS Learning Collaborative Updates Data

Incomplete ASQ Data Niagara Street and Towne Gardens

Number of ASQs

Reason

Not handed out | Not scored by provider | Parent refusal | Language barrier | Patient no show | Patient rescheduled

Niagara St. | Towne Gardens
ECCS Learning Collaborative Updates

Data

ASQ Completion Rates by Practice Site

- Main Peds
- Tonawanda Peds
- NHC

Completion Percentage

Month

ECCS Learning Collaborative Updates

Data

ASQ Completion Rates by Practice Site

- Main Peds
- Tonawanda Peds
- NHC

Completion Percentage

Month
Universal Referral Form

The purpose of this form is to provide a basic assessment for the child’s developmental needs, gather information to refer to appropriate services, and to keep a record of where the child was referred for follow up. A universal referral form creates the greatest ease of practice for all parties involved, to ensure a timely and accurate referral system with the least identifiable barriers.

**Goal:** Reflect the concerns people have about the child, using human centered design to meet the needs of children and their families
<table>
<thead>
<tr>
<th>(1) Please select: (COMPLETED BY PERSON MAKING REFERRAL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Help Me Grow WNY (Fax to 833-464-5439)</td>
</tr>
<tr>
<td>[ ] Erie County EI (Fax to 716-858-6892)</td>
</tr>
<tr>
<td>[ ] Niagara County EI (Fax to 716-278-8288)</td>
</tr>
<tr>
<td>[ ] Other</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(2) Referral Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Referral: ____________________</td>
</tr>
<tr>
<td>IFSP Due Date (to be completed by EI): _______________</td>
</tr>
<tr>
<td>Practice Site:</td>
</tr>
<tr>
<td>Provider Name:</td>
</tr>
<tr>
<td>Contact Person:</td>
</tr>
<tr>
<td>Address: ____________________ City: ____________________ Zip: _______________</td>
</tr>
<tr>
<td>Phone: ____________________ Fax: ____________________ Email: ____________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(3) Referral Info.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reason for Referral:</td>
</tr>
<tr>
<td>[ ] Cognitive</td>
</tr>
<tr>
<td>[ ] Social Emotional</td>
</tr>
<tr>
<td>[ ] Communication</td>
</tr>
<tr>
<td>[ ] Adaptive/ADL</td>
</tr>
<tr>
<td>[ ] Physical</td>
</tr>
<tr>
<td>[ ] Fine motor</td>
</tr>
<tr>
<td>[ ] gross motor</td>
</tr>
<tr>
<td>[ ] Other ________</td>
</tr>
<tr>
<td>Answer all questions below:</td>
</tr>
<tr>
<td>• Difficulties eating/swallowing: □ □ N</td>
</tr>
<tr>
<td>• Medical Diagnosis/other medical concerns</td>
</tr>
<tr>
<td>[ ] □ □ □ □ □ □ □ □</td>
</tr>
<tr>
<td>[ ] Include social determinants of health:</td>
</tr>
<tr>
<td>[ ] □ □ □ □ □ □ □ □</td>
</tr>
<tr>
<td>• Is there a concern about autism?: □ □ N</td>
</tr>
<tr>
<td>• Discussed screening with family?: □ □ □ □ □ □ □ □ □ □</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(4) Child/Parent Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Last Name: ____________________ Child First Name: ____________________</td>
</tr>
<tr>
<td>DOB: ______________ Sex: □M □F Best Contact Language: ____________________</td>
</tr>
<tr>
<td>Person with Whom Child Resides (first and last name): ____________________</td>
</tr>
<tr>
<td>Relationship to Child: □ Parent □ Guardian □ Foster Parent □ Other: ____________________</td>
</tr>
<tr>
<td>Race: (check all that apply) □ White □ African American □ Asian □ Native American □ Hawaiian/Pacific Islander</td>
</tr>
<tr>
<td>Ethnicity: (check one) □ Hispanic □ Non-Hispanic</td>
</tr>
<tr>
<td>Address: ____________________ City: ____________________ Zip: _______________</td>
</tr>
<tr>
<td>Phone: ____________________ Email: ____________________ Best Form of Contact: □ email □ phone</td>
</tr>
<tr>
<td>Parent Contact Information (if different than above):</td>
</tr>
<tr>
<td>Address: ____________________ City: ____________________ Zip: _______________</td>
</tr>
<tr>
<td>Phone: ____________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(5) Parental Consent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Guardian Consent: by signing below, I consent to the referral of my child to the agency noted above by my provider. I give permission for specific information concerning my child’s condition to be released to the county. I also provide consent for the evaluating agency to release information regarding the outcome back to the referral source.</td>
</tr>
<tr>
<td>Name of Referral Source: ____________________</td>
</tr>
<tr>
<td>Parent/Guardian Signature: ____________________ Date: _______________</td>
</tr>
<tr>
<td>If parent signature is not present, did parent object referral?: □ □ □ □</td>
</tr>
</tbody>
</table>

NYS Early Childhood Comprehensive Systems
New York State Council on Children and Families
Referral Tracking

Pilot testing referral tracking data collection in 3 outpatient pediatric practices:
1. Niagara Street Pediatrics
2. Towne Gardens Pediatrics
3. Tonawanda Pediatrics

1. **Patient receives a positive ASQ screen (18 month)**
   - Lea checks the Referral Tracking Spreadsheet on the 1st of every month

2. **Social Work completes Referral Form and obtains parent consent signature**
   - Lea fills out the name, DOB, and referral source on the Referral Tracking Information Form and faxes to Service Coordinator (Debbie) at EI 60 days after referral was made

3. **Social Work faxes Referral Form to EI**

4. **Social Work enters name and DOB of referred patient into Referral Tracking Spreadsheet in the shared drive**
   - Debbie completes the Referral Tracking Information Form and faxes back to Social Work of the referral source

5. **Social Work receives the completed Referral Tracking Information Form and enters the data into the Referral Tracking Spreadsheet**
## Referral Tracking

<table>
<thead>
<tr>
<th>Patient Name</th>
<th>DOB</th>
<th>(1) Date of referral</th>
<th>(2) Reason for referral</th>
<th>(3) Evaluating agency</th>
<th>(4) Was eval completed? If “No,” go to #5</th>
<th>(5) Reason eval not completed</th>
<th>(6) Eligible for services (Y/N)</th>
<th>(7) Services to be provided</th>
<th>(8) Did patient receive services (Y/N) If “No,” go to #9</th>
<th>(9) Service delayed reason</th>
</tr>
</thead>
</table>

### Notes:
- **Eligible for services (Y/N):** Indicates whether the patient is eligible for services.
- **Services to be provided:** Details the services that are to be provided.
- **Did patient receive services (Y/N):** Indicates whether the patient received the services.
- **Service delayed reason:** Reasons for any delays in service provision.
Cultural Competency

Cultural competence is the ability to understand, communicate with and effectively interact with people across cultures. Cultural competence encompasses being aware of one's own world view, developing positive attitudes towards cultural differences, and gaining knowledge of different cultural practices and world views.

JERICHO ROAD CULTURAL COMPETENCY ASSESSMENT

A - Things I do frequently, or statement applies to me a great degree
B - Things I do occasionally, or statement applies to me a moderate degree
C - Things I do rarely or never, or statement applies to me minimal degree or not at all
Cultural Competency

How will assessing help us and our patients?

1. Provide culturally appropriate waiting room materials that reflect our population
2. Provide language services, including on-site translators
3. Data collection training
   - One size does not fit all
4. Creation of a family advisory board
Next Steps

1. Pediatrics Supporting Parents
   - Begin data collection for Pediatrics Supporting Parents and ECCS using new record review tool
   - Incorporate positive parenting practices in outpatient pediatric settings
     • Promote 211, HMG, and other resources
     • Implement Reach Out and Read

2. Continue to collect referral tracking data

3. Implement Cultural Competency Assessments

4. Finalize universal referral form
Please raise your hand to speak so we can unmute you or type in the chat box to share!
Needs Assessment Survey

If you are an early childhood teacher, provider of care, administrator or parent of a child birth – 5 years?

Please take the State’s Needs Assessment Survey!

Statewide Parent Leadership Conference Bid Opportunity

• CCF is seeking bids for planning and hosting a Statewide Parent Leadership Conference as a part of the B5 Grant

• The conference is intended to further parents’ knowledge about the NYS early childhood system and help administrators, policy makers and service providers understand the needs of parents

Bids are due Friday, June 21, 2019 by 4:00 pm via email (ciearra.Norwood@ccf.ny.gov)
Contact:

Ciearra Norwood, Project Coordinator
ciearra.norwood@ccf.ny.gov
(518) 408-4107

Vicki Robert, Early Childhood Social Emotional Coordinator
vicki.robert@ccf.ny.gov
(518) 474-9023

Website
www.ccf.ny.gov