



Innovative Approaches to Preschool
Developmental Screening &
Follow Up Services Initiative
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Prepared by

Touch our Future 



ALBERTA CENTRE FOR
CHILD, FAMILY & COMMUNITY
RESEARCH

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Executive Summary

Funded by Alberta Health and Wellness, the Innovative Approaches to Preschool Developmental Screening and Follow-up Services Initiative includes five demonstration pilot projects, a knowledge mobilization strategy and provincial and site-specific evaluations. This report summarizes the initial findings of the five projects. The five projects achieved and surpassed all of the goals outlined in the Developmental Screening Initiative as they:

- Developed innovative, community-based, family-centered service delivery models to maximize resources.
- Increased access to coordinated preschool developmental screening, assessment and intervention services with reduced wait times.
- Established strong, collaborative partnerships with numerous community organizations to deliver services.
- Increased service provider knowledge and skills through on-going training.

- Enhanced family knowledge on early childhood development, developmental screening and resources available in their communities.

Common challenges faced by projects:

- Developing a comprehensive model to screening, assessment and intervention, including access to and coordination of services.
- Involving multiple stakeholders and partners.
- Engaging families, especially those that are culturally diverse.

All of the projects achieved their goals through different pathways to success. The evidence, knowledge and experience gained from the projects will support decision makers in identifying the most promising practices in preschool developmental screening, assessment and intervention services. Highlights of the lessons learned are included in the Summary of Findings section.

The Projects

- **Grow Along With Me (Partners in the former Chinook Health Region)**
- **Growing Together (Partners in the former David Thompson Health Region)**
- **Mill Woods Preschool Developmental Screening Project (Partners in the former Capital Health Region)**
- **East Central Preschool Developmental Screening Initiative (Partners in the former East Central Health Region)**
- **Teaming for Tots (Partners in the former Palliser Health Region)**

Introduction

The Importance of Developmental Screening

The majority of Alberta's children experience normal growth and development, however a significant number (10 - 15%) have developmental delays that if undetected and not addressed can influence their behaviour, social skill development, self esteem and success in school (Alberta Health and Wellness, 2006). Many infants and young children have significant developmental delays that are not detected until after the children are three years of age or older. Consequently, critical opportunities for early intervention are lost (Council on Children with Disabilities, 2006). For example, children in Alberta with mild or moderate delays are often not identified until entry into a school program (Alberta Health and Wellness, 2006).

Research has shown that preschool developmental screening can be an effective method for identifying children with developmental delays because it increases the probability of connecting children and their families to early intervention and follow-up services (Glascoe et al., 1997; Dobrez et al., 2001; Elbers et al., 2008).

The Preschool Developmental Screening Initiative

In 2005-2006, the Alberta Children and Youth Initiative identified developmental screening as a priority. Alternative strategies were required to overcome challenges related to access to services, coordination of services and workforce shortages of skilled professionals and auxiliary workers (Alberta Health and Wellness, 2006). In response, the Innovative Approaches to Preschool Developmental Screening and Follow-up Services Initiative was designed to include five demonstration projects, provincial and site-specific evaluations and a knowledge mobilization strategy.

On September 28, 2006, Alberta Health and Wellness Minister Iris Evans announced that there would be an opportunity to fund innovative approaches for preschool developmental screening and follow-up services in Alberta. In November 2006, regional health authorities were invited to submit proposals to implement innovative approaches to preschool developmental screening and follow-up services, with a budget of \$7.9 million over three years.

The purpose of the three-year projects was to develop innovative service delivery models to increase access to preschool developmental screening, assessment and intervention services.

All of the projects aimed to increase awareness about the positive ways that families and communities could support and enhance healthy early childhood development.

The Five Demonstration Projects

The five demonstration projects selected to implement and evaluate innovative developmental screening and follow-up services are:

Grow Along With Me (Partners in the former Chinook Health Region)

Growing Together (Partners in the former David Thompson Health Region)

Mill Woods Preschool Developmental Screening Project (Partners in the former Capital Health Region)

East Central Preschool Developmental Screening Initiative (Partners in the former East Central Health Region)

Teaming for Tots (Partners in the former Palliser Health Region)

These projects worked with multidisciplinary teams to collaborate and create innovative strategies for screening, assessments and interventions that are evidence-based and cost-effective.

Goals

The main goal of preschool developmental screening, assessment and intervention services is to identify children with developmental delays as early as possible so that they can receive services to increase their opportunity to achieve healthy outcomes in life. In addition, the following goals guided the development of the innovative approach to services to:

Increase the number of children receiving appropriate developmental screening and follow-up services between the ages of 18 months to three years

Try out new approaches and improve timely access to assessment for the children referred from screening

Provide parents with increased number of access points for screening and follow-up

Develop, implement and evaluate new models of coordinated community based screening/assessment/intervention approaches for preschool children

Test the use of a range of service providers (e.g. paraprofessionals) and alternative service provision (e.g. group interventions) to determine cost-effective approaches

Improve timely identification and referral of children eligible for educational programming

Try out new ways of providing intervention approaches and improve timely access to intervention for children identified as requiring services through assessment

Gather data and disseminate findings and evidence from the funded projects to inform decision-making regarding how to improve access to developmental screening and follow-up services in Alberta

Objectives

The five projects are working to achieve the following objectives:

- Improve accessibility to developmental screening, assessment and intervention services.
- Address coverage of services for children between the age of 18 months and 3 years of age.
- Demonstrate collaboration and partnering among the regional authorities and community partners to support the services required.
- Provide case management as part of the continuum of screening, assessment and intervention services.
- Establish collaborative models that will enhance coordination and timely access to services.

- Address how the screening and follow-up services can be sustained beyond the project funding.

The Ages and Stages Questionnaire (ASQ)

Given the current research evidence available, it was determined that all projects use the Ages and Stages Questionnaire screening tool to move towards a universal, standardized and comparable approach. The ASQ allows for the identification of children who are in need of further evaluation of communication, gross motor, fine motor, problem solving, personal-social skills and overall concerns. The projects focused on the eight questionnaires available for children 18 to 36 months of age.

The Projects

The following pages summarize the objectives, results, lessons learned, successes and challenges associated with each of the five projects.



Grow Along With Me (Partners in the former Chinook Health Region)

Crow Along With Me

This project is building a foundation for families to best support children by enhancing their readiness to learn and providing opportunities for them to maximize their potential.

The Project has two goals:

- To develop a comprehensive continuum of services providing the right level of service, at the right time, by the right person as near to the child’s residence as possible.
- To identify children with a developmental delay as early as possible.

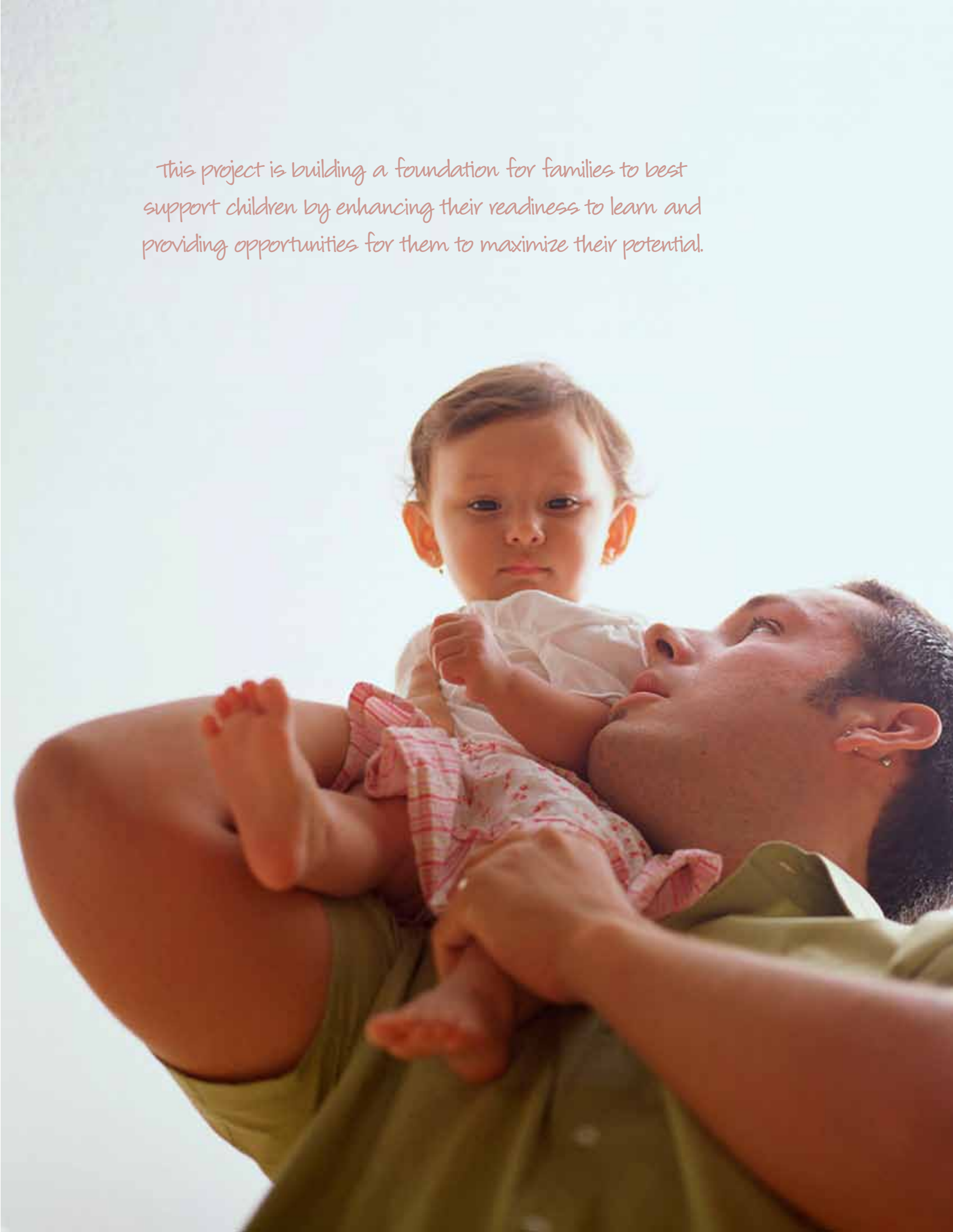
Awareness, education and access to developmental check-ups and related services is increasing through integrated partnerships with public health nurses, home visitation workers, Parent Link Centres, Parents as Teachers, University of Lethbridge, Community Links and educational organizations. Partnering agencies in Grow Along With Me support parents to optimize children’s emotional, social, communicative, intellectual, and physical development. The project has been increasing capacity to conduct developmental check-ups and to provide timely access to follow-up assessments and interventions through enhancing communication linkages between partners, recruitment of professional and paraprofessional staff, and on-going training opportunities.

Overview

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Increase awareness of and access to developmental screening for families.	<p>Trained 15 partner agency staff to deliver developmental screening and to communicate with parents regarding developmental concerns</p> <p>Implemented a comprehensive communications plan for parents and early childhood development service providers including:</p> <ul style="list-style-type: none"> • A Fall Newsletter • Articles on the importance of Developmental Screening and Follow-up Services • Radio segments, public service announcements • Advertising materials including posters, displays, brochures and magnets • The offer of home visitations 	<p>Nearly 500 participants attended a range of early childhood development educational sessions in 2008-09</p> <p>2014 developmental check-ups using the Ages and Stages Questionnaire (ASQ) were completed</p> <p>81% of parents indicated that screening was a positive experience</p> <p>It is critical to establish relationships between the parent and service provider, particularly for the first-time parent who may lack confidence in parenting skills</p> <p>Parents emphasized the importance of a safe, sensitive, non-judgmental approach in a comfortable, natural environment</p>

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Increase parent and partner agency staff knowledge about early childhood developmental screening and available support services	<p>A web page was developed to improve awareness of service options, best practices in developmental screening and interventions, and information on partnering organizations and project findings</p> <p>Grow Along With Me website: www.growalongwithme.ca</p> <p>Developed and provided training modules for parents, professionals and paraprofessionals in child developmental milestones: speech and language development, social, emotional, cognitive and motor development</p> <p>In-service education sessions were developed and delivered to address the identified needs of the community and partner organizations:</p> <ul style="list-style-type: none"> • Talking Takes Time • Taking a Closer Look at Communication • Sharing Concerns with Parents • Fine Motor Development in Toddlers • Partnering with Parents when using the Ages and Stages Questionnaire 	<p>The Grow Along With Me web site received 1933 visits in 2008 – 2009. 75% of hits were new visits</p> <p>75% of parents reported that the ASQ helped them to learn more about their children’s developmental milestones and, children’s abilities to complete certain activities or tasks</p> <p>81% of parents observed that the ASQ check-up gave them ideas, suggestions, and activities to further support their children’s development at home</p> <p>65 participants attended the “Grow Along With Me” sponsored Ages and Stages educational sessions</p> <p>Participants reported increased knowledge regarding the screening process and increased confidence in managing referrals following the educational sessions</p> <p>83% of public health nurses and 77% of multidisciplinary staff expressed confidence that services provided to families in response to the ASQ were appropriate</p>

This project is building a foundation for families to best support children by enhancing their readiness to learn and providing opportunities for them to maximize their potential.



OBJECTIVES	RESULTS	SUCCESSSES & LESSONS LEARNED
Adopt a consistent regional referral pathway across partnering service provider organizations	<p>An evaluation of the “journey of children through developmental screening, assessment and treatment services” was conducted</p> <p>Completed a final report outlining the referral pathway, the number of screenings, assessments and types of treatment provided for children</p> <p>Quality improvement activities were developed through this process</p> <p>Surveys were conducted with parents of children who had undergone a developmental check-up</p>	<p>Coordination of services and activities among diverse, geographically dispersed partners is essential for seamless service delivery and optimal quality of care for children and families</p> <p>Exploring developmental check-ups and service “client pathways” is a significant first step in improving service delivery and outcomes for the child and their family</p>

OBJECTIVES	RESULTS	SUCCESSSES & LESSONS LEARNED
Develop a comprehensive continuum of services that provides the right level of service, at the right time, by the right person as near to the child’s residence as possible	<p>A preliminary pathway audit was conducted to clarify the current flow or movement of children through the system and identify successes, misperceptions, inconsistencies and gaps</p> <p>Implemented a Short Term Assessment and Responsive Intervention Team (START), a group-based assessment by speech-language, audiology, physiotherapy and other professionals to provide timely services to children with mild/moderate delays</p> <p>START team members conducted weekly reviews of referrals. Based upon a review of the child’s history, Ages and Stages summary and/or identified concerns, a decision was made as to whether the child was appropriate for a START or a clinical assessment</p> <p>All parents who attended the START assessment group received home programs or activities to be practiced at home</p>	<p>Changes were introduced to consolidate and standardize practices and improve areas identified as being inefficient through the Client Pathway Audit and the clinical experiences of staff involved</p> <p>The START follow-up group has continued to be seen as an effective and efficient treatment option to reduce wait times, and to better meet the short term needs of families</p> <p>There was a marked increase in children referred for individual clinical services</p> <p>Decreased wait times were seen for Speech Language Pathology, Physiotherapy, and Audiology services</p>

OBJECTIVES	RESULTS	SUCCESSSES & LESSONS LEARNED
Enhance capacity by establishing strong partnerships with community agencies, increasing professional staff involvement and the utilization of paraprofessional staff	<p>Professional staff developed and presented learning modules for paraprofessionals and families through Parent Link Centres, licensed day cares and Community Links</p> <p>Partnerships were established in the former Chinook Health Region (Well Child clinics, public health nurses and home visitation workers), Parent Link Centres, Parents as Teachers, University of Lethbridge, Community Links and education partners</p>	<p>A clear vision, mission and goals statement, regular meetings, facilitative and supportive leadership, grassroots involvement and strong skill set of its members were foundational to partnerships</p> <p>It is important to periodically re-examine project goals, outcomes, partner and community assets, identify opportunities for improvement and celebrate successes</p> <p>While frequent evaluation of the child’s rapid development between 18-36 months is desirable, the need for communication between partners and parents is essential to minimize duplication and parent fatigue</p>

Challenges

Public health nursing staff successfully completed the majority of screening. Some parents expressed concerns regarding the administration of the Ages and Stages Questionnaire. Managing other children without assistance while trying to focus on the child’s immunization and fill out the ASQ proved to be difficult. Grow Along With Me strategized to provide the ASQ questions to parents in advance, post the ASQ on-line and offer in-home visitation services.

It served as a mechanism to identify what was working well and what needed to be focused on for improvement.

The Grow Along with Me Client Pathway was developed to examine the movement of children from the initial developmental check-up through to treatment and discharge for children with identified delays. The pathway described the current system, established standards of expected care and treatment and provided an opportunity to critically examine the service continuum.



Growing Together (Partners in the former David Thompson Health Region)

Growing Together

Growing Together is increasing access to developmental screening, assessment and intervention services for preschoolers in Red Deer, Olds, and Rocky Mountain House.

The project is a coordinated, community-based screening, assessment and intervention model focused on supporting families as they facilitate healthy development for their children.

Partnerships are key to the initiative and include: Parent Link Centres, the Central Alberta Child and Family Services Authority

and

Alberta Health Services Community Speech-Language Pathology Services, Public Health and the Pediatric Rehabilitation Program.

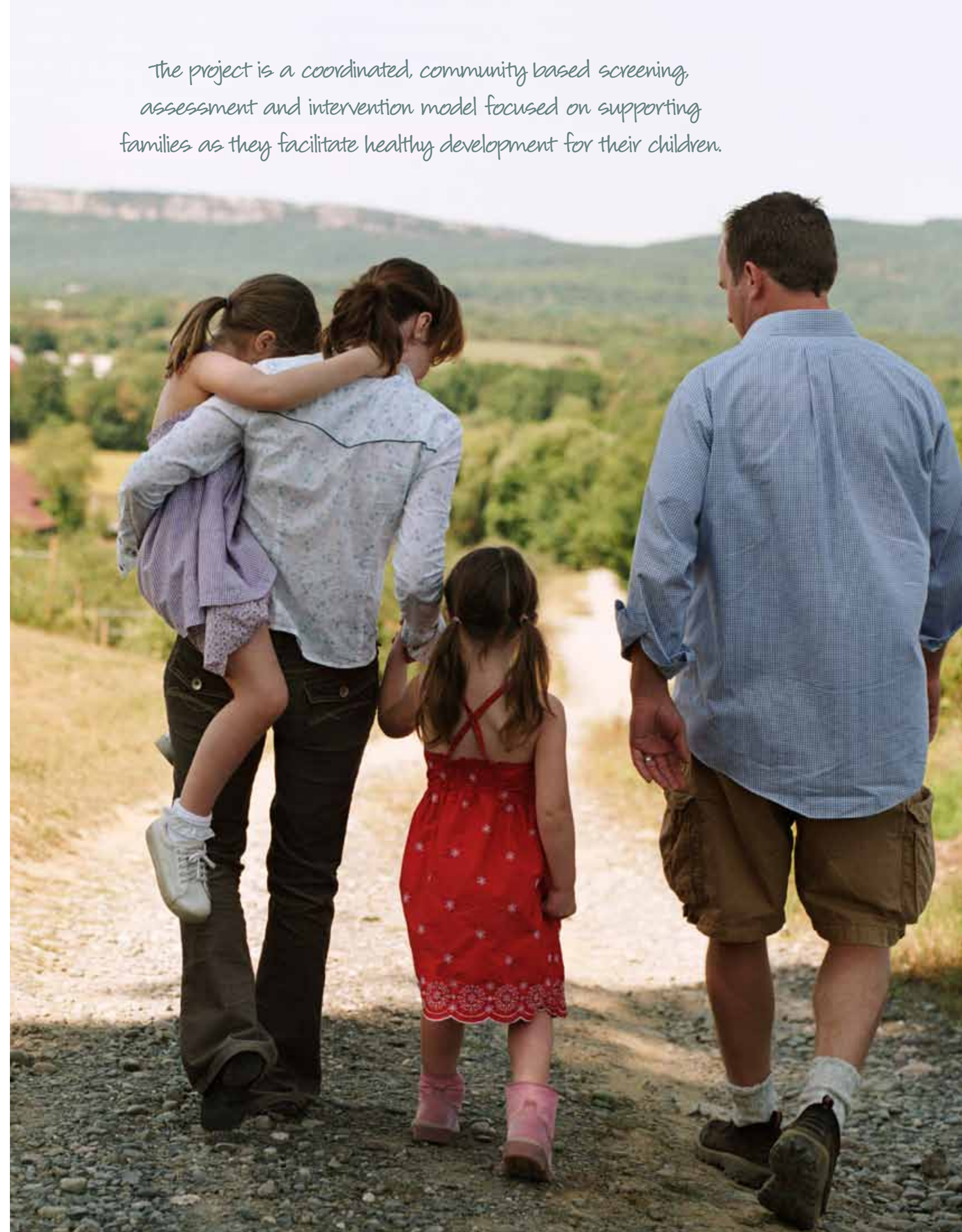
The innovative model is increasing knowledge of preschool development milestones through increased awareness of and access to developmental screening. By enhancing the coordination of services, families are receiving timely assessments and effective interventions delivered by the most appropriate professionals.

Overview

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Increase the number of children receiving developmental screenings by increasing awareness and the number of access points for screening	<p>1146 screenings completed with 82% delivered through immunization clinics</p> <p>Increased awareness of preschool child development and the availability of screening and follow-up services through:</p> <ul style="list-style-type: none"> Public Information Sessions Poster Campaigns Growing Together Newsletter <p>A Growing Together video was developed describing the process/experiences that a family can expect (www.hutv.ca). It was played in the waiting rooms at Community Health Centres in Red Deer, Rocky Mountain House and Olds, as well as on the Maternity Ward at Red Deer Regional Hospital</p> <p>Three television stations, two radio stations, and the Red Deer Advocate participated in a media event to promote and celebrate the project</p> <p>42 Physicians met with Growing Together staff to learn more about the project</p> <p>Growing Together participated in 12 different community events to increase awareness of screening opportunities</p>	<p>Previously screening was only available at Parent Link Centres</p> <p>Screening is now available through: immunization clinics, home visitation programs, early intervention programs, the Paediatric Rehabilitation Program, Central Alberta Women's Emergency Shelter, Red Deer and Rocky Mountain House Native Friendship Centres, Sunchild and O'Chiese First Nations Reserves</p> <p>82% of parents arrived at immunization clinic appointments with a completed ASQ ready for their child's developmental check-up</p> <p>88% of parents stated that they were satisfied with the developmental check-up that they received for their child</p> <p>89% of parents felt their questions were answered to their satisfaction at the developmental check-up</p> <p>Families were very appreciative of the childcare services provided and indicated they could not have attended project programs without it</p>

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Increase parental knowledge of preschool development and key milestones	<p>The "Growing Together with Kevin" booklet was given to all parents after they completed a debrief about their child's screening results. The booklet served as a guide for child development milestones and included simple home activities to stimulate child development</p> <p>A list of community resources including parenting courses and activities for children available in their community was given to all families during the screening debrief</p> <p>The Parent Coach role was developed to assist parents with concerns about social-emotional development or behavior issues</p>	<p>100% of parents felt that their child's assessment results were clearly explained to them</p> <p>52% of parents found the 'Growing Together with Kevin' booklet helpful</p> <p>55% of parents reported using the suggested home activities</p> <p>Some of the parent's concerns included sleep, picky eating, tantrums and aggression. They were offered additional strategies and connected with community resources</p> <p>82 families have utilized the services provided by the Parent Coach</p> <p>100% of parents accessing the Parent Coach support identified increased confidence in managing these issues</p> <p>Parents appreciated that the Parent Coach scheduled individual time with them</p>

The project is a coordinated, community based screening, assessment and intervention model focused on supporting families as they facilitate healthy development for their children.



OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Provide a family centered, single point of entry for coordinated referrals and reduce wait times for assessment and treatment	<p>Developed an Intake Coordinator position whose role included ASQ scoring and debrief with families, coordination of referrals, intervention services, follow-up and support for challenged families</p> <p>Implemented a data management system for the purpose of tracking information and coordinating services for all partners involved</p> <p>209 children received Speech Language Pathology assessment and 64 started treatment</p> <p>48 children received Occupational Therapy assessments and 22 started therapy</p> <p>49 children received Physical Therapy assessments and 23 started treatment</p> <p>87 children have completed 106 reassessments</p>	<p>91% of parents felt that the wait time for assessment was short or acceptable</p> <p>87% of families who received treatment felt the therapist adequately explained goals to them</p> <p>79% of children who came in for a reassessment showed significant improvement in their skill level</p> <p>81% of children achieved 100% of their treatment goals</p> <p>100% of parents stated that they were satisfied with their treatment and would recommend the Growing Together Project to other families</p>

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Develop and implement a new model of coordinated community based screening, assessment and intervention	<p>Developed a collaborative, effective partnership model</p> <p>29 community agency staff and 19 Public Health Nurses received ASQ training</p> <p>An innovative group intervention was developed by utilizing paraprofessionals through increased training</p> <p>13 group interventions have been completed</p> <p>68% of children who attended Growing Together groups completed a reassessment</p> <p>68% of those reassessed were determined to have age appropriate skills</p>	<p>On average the wait time for an Occupation Therapy assessment was reduced by 55 days</p> <p>On average the wait time for a Physical Therapy assessment was reduced by 62 days</p> <p>For children receiving Speech Language Pathology services only, the average number of days waiting for treatment was reduced in Red Deer by 132 days, 74 days in Olds and 67 days in Rocky Mountain House</p> <p>76% of parents reported starting treatment within 4 weeks from their assessment</p> <p>91% of families reported being satisfied with the wait times</p>

Challenges

The number of children accessing the Growing Together project was much larger than anticipated. As a result, the Intake Coordinator position was provided with additional support to effectively manage the increased demand for services.

Some families expressed the need for childcare support while they participated in screening, assessment and intervention services. Childcare was subsequently provided through partnering Parent Link Centres and the City of Red Deer.

Strategies require further development to increase engagement with Aboriginal families and improve their access to developmental screening. Enhancing existing relationships with Parent Link and Native Friendship Centres and exploring opportunities to offer

on site developmental check-ups through the Aboriginal Head Start program are being pursued.

Parents present at developmental check-ups were expressing frustration with a variety of typical toddler behaviors. Due to this identified need, the Parent Coach role was established to assist parents with concerns about social, emotional development and behavior issues.



Mill Woods Preschool Developmental Screening Project

(Partners in the former Capital Health Region)

Mill Woods Preschool Developmental Screening Project

Centered in the Mill Woods area of Edmonton, this preschool developmental screening project is a collaboration of nine partners working across health, children’s services and education. Partners were added as the project progressed in a cascading partnership model.

The project is maximizing resources to increase access to screening, intervention and assessment services for families through an integrated screening program built on family and community strengths. A Primary Coaching model is leveraging the scope of practice for paraprofessionals who engage with and build on the skills of families. Professionals provide regular case conferencing to support the key workers and are accessible when

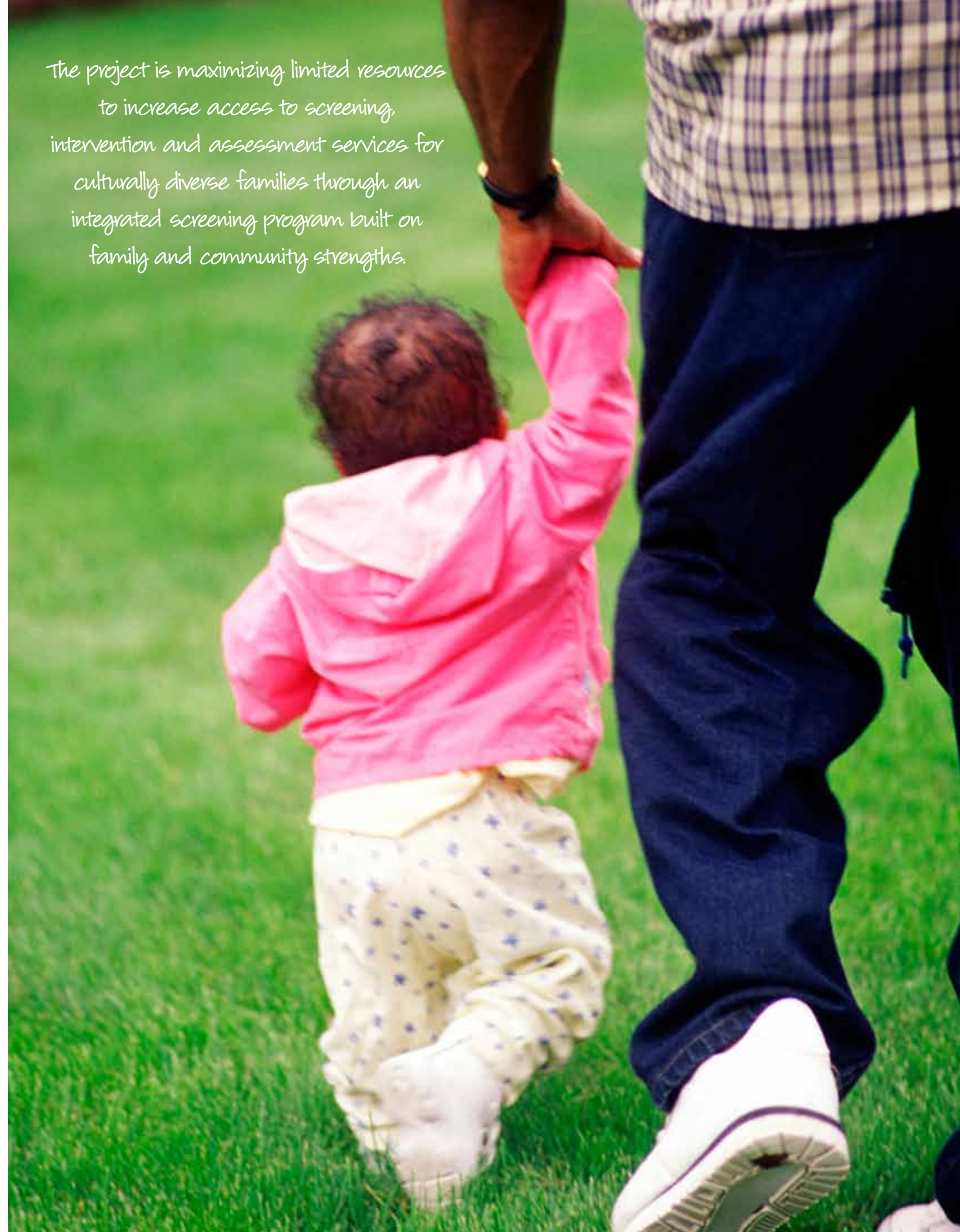
children are referred for more in-depth assessments and treatments. The Mill Woods community includes families from a variety of cultural backgrounds and this project is providing culturally specific services for these families.

The emphasis is on embedding services within existing community resources to develop community and family capacity to promote healthy early childhood development. As a result, children and families are developing a stronger system of community supports such as library and recreation programs, community schools, early learning and care facilities, Parent Link Centres and places of worship. Information and services are accessible for parents where and when they need it.

Overview

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Increase families’ timely access to screening and intervention services	<p>Screening was offered at 18-month immunization appointments, clerical staff provided the screening tool to parents to complete</p> <p>All families were bridged to existing Parent Link Centres, specialist services, early education programs, early childhood service programs, public libraries, recreation venues and playgrounds as appropriate</p> <p>Para-professional staff were supported by professional training, regular case conferencing and coaching to provide intervention services prior to a formal professional assessment and diagnosis (Primary Coaching Model)</p> <p>This practice established a key contact for families to facilitate seamless access to services providing secondary screens, assessment and intervention to existing service providers</p> <p>Home visits were offered</p> <p>Collaborated with Multicultural Health Brokers (MCHB) to provide ‘cultural brokerage’ and language translation, complete and interpret the screen and provide follow-up and intervention services in a culturally appropriate manner for families</p> <p>Additional health aides, clerical support, speech, occupational therapy, and occupational health professionals were hired to address the anticipated increased need for assessment and follow-up services</p>	<p>2300 children were screened in 2008 – 2009, compared to approximately 80 children who were annually screened before the project was initiated</p> <p>84% of screenings took place at immunization clinics</p> <p>48% of Immigrant/Refugee screening took place at immunization clinics and 43% were facilitated through Multicultural Health Brokers. Brokers recruited families and once the word was out, other families wanted to become involved</p> <p>44% of families received a home visit</p> <p>32% of children with concerns had secondary screens (the secondary screening process reduced the number of false positive children referred to specialists)</p> <p>12% were referred for clinical speech, audiology and occupational therapy services after secondary screens</p> <p>100% of families received community resource information</p> <p>100% of staff participated in regular case conferencing and coaching</p> <p>100% of families with concerns were assigned a key worker who followed up with them regarding the results of the screen and visits as appropriate</p> <p>Immigrant and Refugee parents expressed satisfaction and appreciation of the services and the process of engagement provided by Multicultural Health Brokers</p> <p>Multi-cultural conversion of activities and screening was provided to South Asian, Somali, Spanish, Phillipino and Sudanese communities</p>

The project is maximizing limited resources to increase access to screening, intervention and assessment services for culturally diverse families through an integrated screening program built on family and community strengths.



OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Enhance families' knowledge and skills to nurture healthy child development and increase family links with community resources	<p>Professionals developed child development workshops and trained key workers, Parent Link staff, Multicultural Health Brokers and other partners to provide workshops for parents</p> <p>340 parents have attended learning events on a variety of healthy child development topics. These were offered to all parents in the Mill Woods community</p> <p>Engaged a graphic artist to assist in developing posters, advertisements and display boards for brand recognition</p> <p>Multicultural Health Brokers worked with professional staff to develop and deliver culturally sensitive and interactive workshops in the families' primary language</p> <p>Reinforced positive steps families are already taking to promote healthy child development (this is the strengths-based service philosophy)</p> <p>Worked as a team of partners to identify gaps and collaboratively remove barriers to family participation in community resources</p> <p>Obtained feedback from families on the type of information they wanted to receive</p> <p>The Parent Link Centre developed a series of information sessions for families based on their involvement and learning from the project</p>	<p>88% of parents reported increased knowledge of early childhood development as a result of completing the ASQ screen</p> <p>86% reported linkages to community resources. Social cohesion is an important factor for early childhood development</p> <p>74% of parents reported feeling better informed about their child's development after completing the ASQ</p> <p>86% of parents would recommend using the ASQ to other parents to learn more about their child's development</p> <p>Parents indicated the workshops reinforced what they were already doing well</p> <p>48% of parents felt that the use of email updates and handouts were the best methods for receiving more information regarding their child's developmental health</p> <p>Immigrant and Refugee parent responses: 80% identified increased learning opportunities 75% identified the use of culturally appropriate processes</p> <p>Relationship building is essential when working with multicultural families and it takes several visits to build trust before introducing the ASQ screen</p> <p>Depending on the care-giving environment, grandparents, siblings and parents may need to be consulted together when completing the ASQ and in determining how to support healthy development of preschoolers</p>

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Enhance service providers' knowledge of child development, cultural context, and community resources among those engaged in follow-up services	<p>Professionals developed four key messages about child development strategies and provided this information to community agencies, child care centres, day homes and others who work with young children to increase knowledge of child development</p> <p>Provided staff training on child development, motivational interviewing, responsive teaching, coaching, ASQ administration and interpretation</p> <p>Paraprofessional staff were established as the primary contact for families and coordinated recommendations and interventions with numerous different professionals (Primary Coaching Model)</p> <p>Provided cross-cultural staff training to raise awareness, build knowledge and skills and create opportunities for cultural encounters to develop more culturally-responsive services</p> <p>Parents were considered as the primary interventionist with the child. As a result, children received many more hours of experience with intervention strategies throughout the day and across many settings that are part of the families' lives</p>	<p>Staff were systematically led through the Science of Early Childhood Development modules and continued to attend professional development events suited to their individual needs</p> <p>On-going support in evidence-based practices, emphasizing a coaching approach to build on strengths and develop capacity is recommended</p> <p>Paraprofessional staff developed positive relationships with parents and based intervention on the child and family strengths and interests which promoted parent learning</p> <p>Multicultural Health Brokers met regularly with co-workers and provided support and coaching regarding culturally appropriate practices for families to support interventions</p> <p>Built capacity among staff to help families use and interpret a variety of screening tools and child development and family empowerment strategies</p>

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Increase collaboration among community partners to maximize early identification of developmental concerns and service delivery	<p>Articulated a common partnership vision, guiding principles, common language, a means of shared decision-making, shared program planning, development and conflict resolution processes</p> <p>A number of partners incorporated the project's key messages into their programs and one partner changed their program process based on learnings from the project</p> <p>Wait times for services did not exist because service strategies utilizing community resources were planned at the initial point of contact and the secondary screening process identified children who may have otherwise been referred for unnecessary services</p>	<p>64% of partners involved in the project believed the partnerships were beneficial in enhancing the services offered to the families</p> <p>79% of the partners were able to name or describe the project model of service delivery</p> <p>21% could speak partially to the model and collaborative decision making process</p> <p>93% of the partners were able to name at least one new partner/ agency that they came to know or worked with through the project</p> <p>71% of the partners were able to identify two or more new partners they came to know or worked with through the project</p> <p>21% of the partners reported that they already had established partnerships but felt that these were enhanced through the project</p>

Challenges

Engaging parents of 36 month old children is challenging because an existing system or universal point of contact for this group does not exist. In addition, Mill Woods is culturally diverse with large numbers of Chinese, South East Asian and Sudanese families. Many families are socially isolated and marginalized by income, level of education and language barriers.

Challenges were experienced in terms of communicating with multiple partners. To remedy this, monthly meetings of all staff and partners took place to increase the consistency of messaging. These interactive meetings provided opportunities for information sharing, collaborative project development and issues identification and resolution.

Well-intentioned screening processes can create anxiety for all families including immigrant, refugee, Aboriginal and low income parents due to fear of judgment, labeling and interventions to remove children from their homes. Therefore cultural adaptations of screening tools, materials and workshops were developed.

Ensuring that partner agency staff and Alberta Health Services staff all had the same training and information was also challenging. This was partially addressed through joint training opportunities.

Accessing hard to reach families to gain their perspectives on developmental screening and identifying relevant information that would be useful for these parents was challenging. These challenges were mitigated by consulting with cultural agencies to conduct parent focus groups on developmental screening and early learning opportunities.

Similar to other projects, 85% of parents agreed that childcare provision was a barrier for attending workshops or parent groups. Facilitating childcare arrangements will be a focus in the upcoming year.

East Central Preschool Developmental Screening Initiative (Partners in the former East Central Health Region)

Pediatric Regional Integrated Services Model (PRISM)

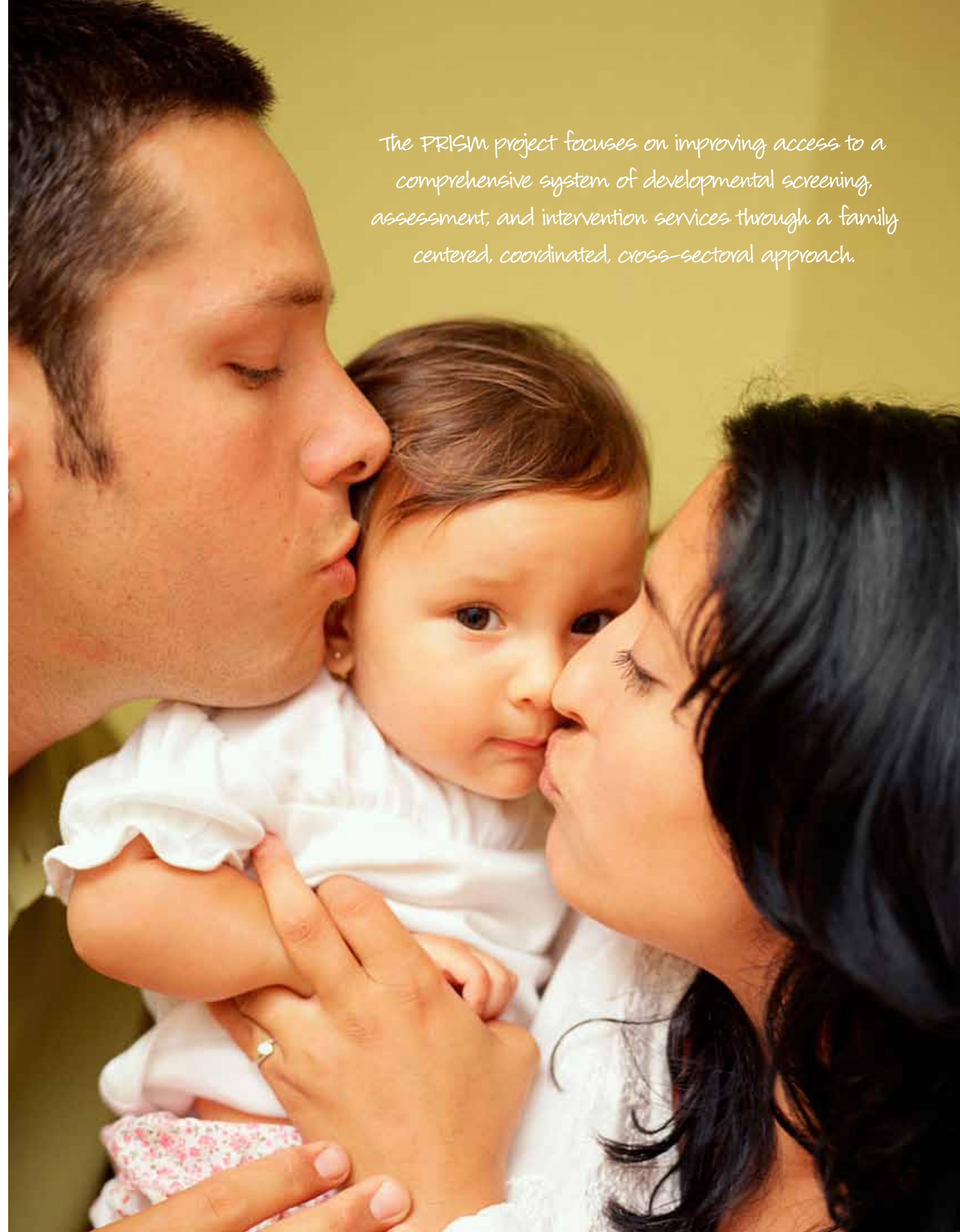
Preschool developmental screening has been integrated into an existing service model provided to children across the former region, in all nine counties and municipal districts. This project focuses on improving access to a comprehensive system of developmental screening, assessment, and intervention through a family centered, coordinated, cross-sectoral approach. The service model was developed through collaborative efforts with Alberta Health Services, and the Ministries of Children & Youth Services and Education through regional school divisions.

The PRISM model builds on the strengths of existing infrastructure and further developed pediatric services through a centralized system of access to screening, assessment and follow up services. Families are integral decision makers within the service team.

Overview

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Enhance access to developmental screening, assessment and intervention services through an integrated, collaborative community-based case management model	<p>Screening was expanded from Public Health and Parent Link Centre sites to include Daycare Centres, Family Day Homes, Preschools, Home Visitation programs rehabilitation services and some Early Childhood Services classes</p> <p>236 staff were provided with ASQ training and 367 participated in the PRISM orientation</p> <p>New intervention services included walk-in clinics, classroom programs, group programs and parent education sessions provided by Parent Link Centres, public health nurses, home visitors, early intervention workers, speech-language pathologists and others</p> <p>Two newspaper releases were distributed across the region. In addition, Frequently Asked Questions' (FAQ) sheets for distribution to parents and service providers, to further explain the screening initiative were provided</p>	<p>Screening was made available in all nine counties/municipal districts, the number of access points increased from 16 to 88 sites</p> <p>1522 screenings were delivered in comparison to 125 completed in the previous year</p> <p>51% of children required single discipline referrals</p> <p>49% of children needed multiple agency referrals</p> <p>91% of parents indicated that they had been referred to the right service providers in their community</p>

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OBJECTIVES	RESULTS	SUCCESSSES & LESSONS LEARNED
Increase parent's capacity to maximize their child's potential to function in their natural environment where they live, play and learn	<p>Involved families in ASQ screening by making it available in a variety of service sectors/locations</p> <p>Developed and circulated brochures/information sheets on community supports, early learning opportunities and parenting programs in the community</p> <p>Provided individualized coaching for parents as well as Family Group Education sessions</p> <p>Home visitations provided individual and group learning opportunities for parents based on individual and community need</p> <p>Baby Talk classes were offered throughout the region aimed at supporting new parents</p> <p>EIP staff participated in Walk in Clinic services facilitated by Pediatric Rehab staff in Vegreville and Camrose</p> <p>Active Babies program facilitated by Speech-Language Pathologist was held at the Parent Link Centre in Wainwright</p> <p>Drop in Clinic services were offered in Kitscoty, Sedgewick, Camrose, Wainwright and Vegreville</p>	<p>92 % of parents indicated they have increased knowledge of child development, as a result of participation in pediatric services</p> <p>85% of parents indicated an increased confidence in handling their child's needs</p> <p>86% felt better informed about play activities to promote development</p> <p>85% felt better informed about their child's next developmental steps</p> <p>93% of parents agreed they had more knowledge of their child's strengths</p> <p>92% had more knowledge of their child's developmental needs</p> <p>73% of parents reported an increased knowledge of community supports</p> <p>The increase in number of screening locations enabled more parents to access developmental screening within their communities</p> <p>70% of parents accessed services within 30 minutes from their home</p>

OBJECTIVES	RESULTS	SUCCESSSES & LESSONS LEARNED
Provide a family centered, single point of entry for coordinated referrals and reduce wait times for assessment and treatment	<p>A single point of entry was established through a central intake office with access to a Regional Case Coordinator</p> <p>A toll free line was established to support access to services</p> <p>Each child referred was assigned a Local Service Coordinator to assist with navigating the referral, assessment and intervention steps</p> <p>Offered increased training for all disciplines on roles of case coordination and Family Service Planning</p> <p>Families were actively engaged in service planning</p> <p>A consistent file review was conducted by Regional Case Coordinators to facilitate the flow of information to service providers in order to establish a coordinated response to families</p>	<p>108 Family Service Plans have been developed by the designated Local Service Coordinator (LSC), in conjunction with the family and other service providers</p> <p>96% of parents agreed the review of ASQ results was scheduled at a time that facilitated their involvement</p> <p>97% indicated their child's routines were considered when assessment was scheduled</p> <p>97% felt that staff valued their opinions and their questions and concerns were addressed during the meetings</p> <p>93% of parents agreed that they were involved in setting meaningful goals and felt like an active member of the team in making decisions about the family</p>

OBJECTIVES	RESULTS	SUCCESSSES & LESSONS LEARNED
Increase collaboration among community partners to maximize early identification of developmental concerns and service delivery	<p>Advisory Committee members were surveyed about perceived shifts in practice towards increased collaboration and reported:</p> <ul style="list-style-type: none"> a shift to a broader perspective at the program level an increase in intersectoral delivery of services at the child and family level an increase in the use of multidisciplinary teams positive changes in practice <p>Partner organizations noted a positive shift as they worked together to come up with innovative and flexible ways to offer service, especially in areas where there are limited services</p> <p>Service providers described an enhanced ability to identify family strengths and needs by working with other programs and getting a context of the holistic environment, rather than just being very treatment oriented</p>	<p>Partnerships with others in the community were effective in providing information and services to parents</p> <p>Increased involvement in the community rather than a focus on bringing people in to the health centre has enhanced emphasis on building capacity within the whole community</p> <p>Intersectoral service delivery for children and families has influenced a change in practice to be more inclusive of families</p> <p>Central Intake has facilitated a multi-disciplinary approach to service delivery</p> <p>To make a collaborative project succeed, a lot of time needs to be invested in making connections to strengthen relationships and coordinate people, organizations and activities</p>

Challenges

Service providers identified needs for further education and support in the development and facilitation of Family Service Plans and family centered service delivery. As a result, front line staff were provided with increased training and tools to better prepare them to work in collaboration with families.

Service providers also expressed concerns of lengthy wait times between referral and receiving information back at the onset of the project. This was an issue particularly when the family was at risk however, there have been improvements made in this area.

Some families in rural areas reported difficulty in accessing services. This was addressed by bringing in resources from other parts of the region and working with partners to provide service options. Creative and flexible mobilization of services is now occurring. Rural families may now access consultation from a

travelling therapist, attend a walk-in clinic, travel to neighboring service sites, participate in group treatment, or attend local education sessions.

Human resources shortages in the Communications Department resulted in a lack of positive media involvement in the project. Central Intake also experienced considerable administrative support staff turnover.

The ASQ database had severe limitations and was not compatible with partnering information systems. Although there continues to be limited Information Technology expertise needed to support the use of multiple databases, the Central Intake database is now well positioned to be able to meet the demand for program statistics.

Teaming for Tots (Partners in the former Palliser Health Region)

Teaming for Tots

The two year Teaming for Tots project is strengthening community capacity to deliver preschool developmental screening and intervention services for newcomer families including refugees and immigrants to Canada.

In Brooks and Newell County, partnerships have been forged with employers, daycares, schools, cultural support groups, religious groups, family service agencies, health care providers and other organizations to create linkages to support newcomer families.

Multidisciplinary teams are collaborating to increase awareness of and access to screening, assessment and intervention services.

Key strategic initiatives include implementing a strong social marketing campaign and establishing a Newcomer Cultural Navigator/Early Interventionist. This position increased parental knowledge and skills related to child development and coordinated resources to assist families in a culturally appropriate manner.

Overview of Results and Outcomes

OBJECTIVES	RESULTS	SUCCESSES & LESSONS LEARNED
Increase the number of self/family newcomer referrals for pre-school screening or assessment in the Brooks area	<p>Social marketing campaigns aimed at newcomer parents were effective in connecting children with early childhood screening, assessment and intervention services</p> <p>One single entry point by phone was established to access the screening program</p> <p>Newcomer Cultural Navigator/Early Interventionist positions were established</p> <p>Two television segments were developed and aired:</p> <ul style="list-style-type: none"> Health Watch on CHAT Television demonstrated how an assessment is conducted, showing that the screening is short and easy Making Health Happen on Shaw Cable introduced the screening program and explained what the program can do 	<p>210 screenings were completed in 2008 -2009</p> <p>In one year, Teaming for Tots increased family referrals by 10%</p> <p>Newcomer families preferred in home screening visits and these were arranged</p> <p>Home visits with newcomer families must provide adequate time to complete the screen and ensure that the tool is not misinterpreted due to culture or language</p>

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OBJECTIVES	RESULTS	SUCCESES & LESSONS LEARNED
Increase the number of newcomer family referrals by working with community agencies	<p>Culturally appropriate posters and pamphlets were produced with inclusive images to emphasize that the purpose of screening is to help the child/family prepare for school</p> <p>These posters and pamphlets were made available at physician's offices, hospital, the SPEC Association for Children and Families (SPEC), McDonalds, IGA, African Supermarket, Parent Link, Lakeside Packers and at the Toy Lending Library at the Public Library</p> <p>Open screenings were initiated at the Parent Link Centre</p>	<p>20 % of referrals have been received from Parent Link and SPEC</p> <p>Face to face meetings with child and adult serving agencies to promote the project and share referral forms have been effective</p> <p>70% of referrals were from Community Public Health Nurses who provide immunization and emergency services</p> <p>Screening should be aligned with the 18-month immunizations due to the high response rate for this immunization</p> <p>It is important for child serving agencies to share the following key messages with families:</p> <ul style="list-style-type: none"> • Children need regular and abundant exposure to both their first and second language to become successfully bilingual • Learning to read and write in the first language supports success with reading and writing in the second language • Maintaining the first/home language is just as important as learning English to support a child's cultural identity and ties with the family • All caregivers must acknowledge the importance and value of both languages • Provide incentives and supports to newcomer families to bring children to screening sites. Incentives may include taxi coupons, healthy snacks and small toy prizes

OBJECTIVES	RESULTS	SUCCESES & LESSONS LEARNED
Increase the number of preschool newcomer children and parents provided with intervention services	<p>Group intervention services were successfully provided through Children's Health and Developmental Services, Global Immigration and the Brooks library</p> <p>Educated newcomer parents on early intervention strategies through Lakeside Packers, Global Immigration, SPEC, Parent Link, the Adult Learning Council and church groups increased access to intervention services</p>	<p>Out of 210 screenings, 51 children were identified with developmental delays</p> <p>20 children were referred to Home Based Development for further services</p> <p>30 children were referred to Speech/Language services</p> <p>1 child was referred for Physical Therapy</p>
Develop multi-disciplinary, cross-ministry teams to deliver evidence-based, innovative, and affordable interventions in a culturally sensitive manner to children of newcomer families	<p>The Cultural Navigator/Early Interventionist developed a service plan in partnership with SPEC, Global, Brooks Parent Link Centre and the Adult Learning Council</p> <p>A multiagency committee was established to engage newcomer families and ensure culturally appropriate screening practices</p>	<p>One key learning was that the screening tool used is not culturally diverse in terms of looking at developmental milestones</p> <p>It is important to review screening and assessment tools used to determine cultural appropriateness</p> <p>Recruiting champions from within cultural communities to share information and act as a resource person for early childhood development is effective</p> <p>Literacy cards are effective educational "gifts" for children after completing the screening</p>

OBJECTIVES	RESULTS	SUCCESES & LESSONS LEARNED
Promote a strengths based approach to assist newcomer families and preschool children	<p>The Cultural Navigator/Early Interventionist worked in community gathering places to deliver positive messages related to early childhood development</p> <p>Daycares and preschools were also educated with strategies to support strength based approaches for newcomer children</p>	<p>Families need to be encouraged to:</p> <ul style="list-style-type: none"> • Read storybooks written in their home language • Tell their children stories in their first language and make up rhymes and songs in the home language • Connect with other families that speak their home language to promote the use of the home language <p>It is important to encourage families not to worry about the difference between English and home language vocabularies</p> <p>Families need to be advised that being bilingual or trilingual is an advantage to good brain development and economic success</p> <p>Daycares and preschools need to be encouraged to:</p> <ul style="list-style-type: none"> • Incorporate stories from other languages by inviting speakers who speak other languages • Invite newcomer children to tell stories using a picture book with words from their home language • Add books from other cultures to their libraries • Post images of people from other countries in their centres • Engage newcomer children to write words from their home language in special cards for their family • Incorporate traditional activities such as dancing into their programs • Reassure the children how lucky they all are to have a diverse classroom

Challenges

The major challenge Teaming for Tots faced was the fact that 38 different languages and at least 70 dialects are spoken in the community.

Language barriers were addressed by positioning a Cultural Navigator/Early Interventionist in community gathering places to deliver positive messages related to early childhood development in partnership with SPEC, Global, Brooks Parent Link Center and the Adult Learning Council.

The existing assessment tools were not always appropriate or aligned with the cultural diversity in the community. For example, many cultures do not think about "counting" the number of words a child is using. A great number of families are afraid to mark their child as not meeting a developmental milestone due to fears of perceived negative consequences with an agency.

The tools used during the assessment such as toys, pictures or books need to be re-used and are not left behind with the families. Some cultures perceive these items as gifts and do not find it acceptable to take away something after it is given.

The Provincial Evaluation

The Alberta Centre for Child, Family and Community Research (The Centre) is facilitating a provincial evaluation of the five early childhood developmental screening and follow-up services projects. Development of the provincial evaluation framework was completed in December, 2008. The framework presents the purpose, objectives and methodology of the provincial evaluation. Essentially, the evaluation framework describes how the formative and summative evaluation will be conducted based on examining the structure, processes and outcomes associated with the projects.

Phase one of the provincial evaluation was an important and critical step in the success of the initiative. Building relationships with the government agencies involved, and the individual demonstration projects, was key in understanding not only the importance and direction of the initiative but the hard work and commitment demonstrated within the projects. The evaluation framework laid down the building blocks of how the provincial evaluation would unfold and what specific questions needed to be addressed.

The provincial evaluation team is currently investigating the following questions:

- What impact has the implementation of the projects had on the access of children and families to screening and follow-up services?
- What factors facilitated access to services?
- How were the projects innovative in their approaches to service delivery?
- How were the barriers that impeded access to services addressed?
- What practices enhanced or hindered communication and coordination between service delivery partners?
- What were the most effective ways of coordinating movement of children and their families through the continuum of services within and outside of those offered by the demonstration projects?
- What impact did the innovative approaches have on parent knowledge, practices, morale and satisfaction with services?

The evaluation team will also examine these questions through a cultural lens for the projects that have implemented strategies and tested different approaches to engage families in diverse communities. Policy recommendations will be developed based on the results of the provincial evaluation. This final report will be completed in June, 2010.

Knowledge Mobilization Strategy

Learning Events

The Centre committed to plan and host learning events throughout the duration of the Innovative Approaches to Preschool Developmental Screening and Follow-Up Services Initiative. The objective of these events is to share learnings about the demonstration projects with a diverse audience interested in preschool developmental screening and early childhood development.

The first Learning Event Symposium, Collaborations for Preschool Development was held in Edmonton, Alberta on November 29, 2007. The purpose of the event was to introduce and provide an overview of the projects. The symposium was attended by 200 participants and was also broadcast to 18 videoconferencing sites across the province.

Over 144 people attended the second Learning Event Symposium held April 20 – 22, 2009 in Lethbridge, Alberta. In addition, 228 sites across the province attended the event by live webcast. Updates on the projects were presented as well as early lessons learned.

Website

The Alberta Centre for Child, Family and Community Research has dedicated a section of their website to post information on the initiative. The Centre continues to update the public web page with information on the projects along with new and emerging research on developmental screening. Links to resources and presentations from the Learning Events are downloadable and the entire second Learning Event is accessible through a recorded web cast.

(<http://www.research4children.com/admin/contentx/default.cfm?PageId=7891>)



Economic Analysis Study

The Alberta Centre for Child, Family and Community Research contracted with the Institute of Health Economics to determine the costs, and expected impact of implementing the most promising practices in preschool developmental screening and follow-up services throughout the province. The study will include results in terms of increased access to developmental screening and follow up services and how the projects addressed the challenges related to coordinating services while maximizing existing resources.

Policy implications will be developed based in the results of each of the five projects. Since each program has chosen to address different community needs, and to implement a mix of different approaches to screening, assessment, coordination, and intervention, there will be a wide range of policy implications to consider. In addition, given the challenges of implementing new procedures such as developmental screening and follow-up services, there may be implications for effective policy implementation processes. The final report will be completed by September, 2010.

Summary of Findings

Creating Awareness

All of the projects implemented extensive social marketing and communication strategies to create awareness about preschool developmental screening and follow up services for families. Multi media approaches included: newsletters, television and radio segments, posters, newspaper articles, brochures, websites, videos and promotions at community events. Culturally appropriate information was made available in various community locations including: places of employment, libraries, grocery stores, restaurants, recreation facilities and Parent Link Centres.

Education and Training

The projects initiated several ongoing training sessions on early child development for parents, professionals, paraprofessionals and community partner organizations. Workshops, in service education, information and family group sessions were frequently offered in several locations. All of the projects engaged, educated and supported parents by linking families to local resources to build community capacity.

Ages and Stages Questionnaire (ASQ) Administration

Several learnings were generated regarding the process of administering the ASQ. Depending on the care giving environment, grandparents, siblings and parents may need to be consulted together when completing the ASQ. One key learning was that the screening tool is not culturally diverse in terms of looking at developmental milestones. It was important to review and adapt screening and assessment tools to ensure cultural appropriateness. Home visits with newcomer families needed extra time to complete the screening process to ensure that the tool was not misinterpreted due to culture and language. Formal training in administering the ASQ was not provided to staff in every project. The need for formal training may be a factor in analyzing and interpreting the results.

Establishing New Roles

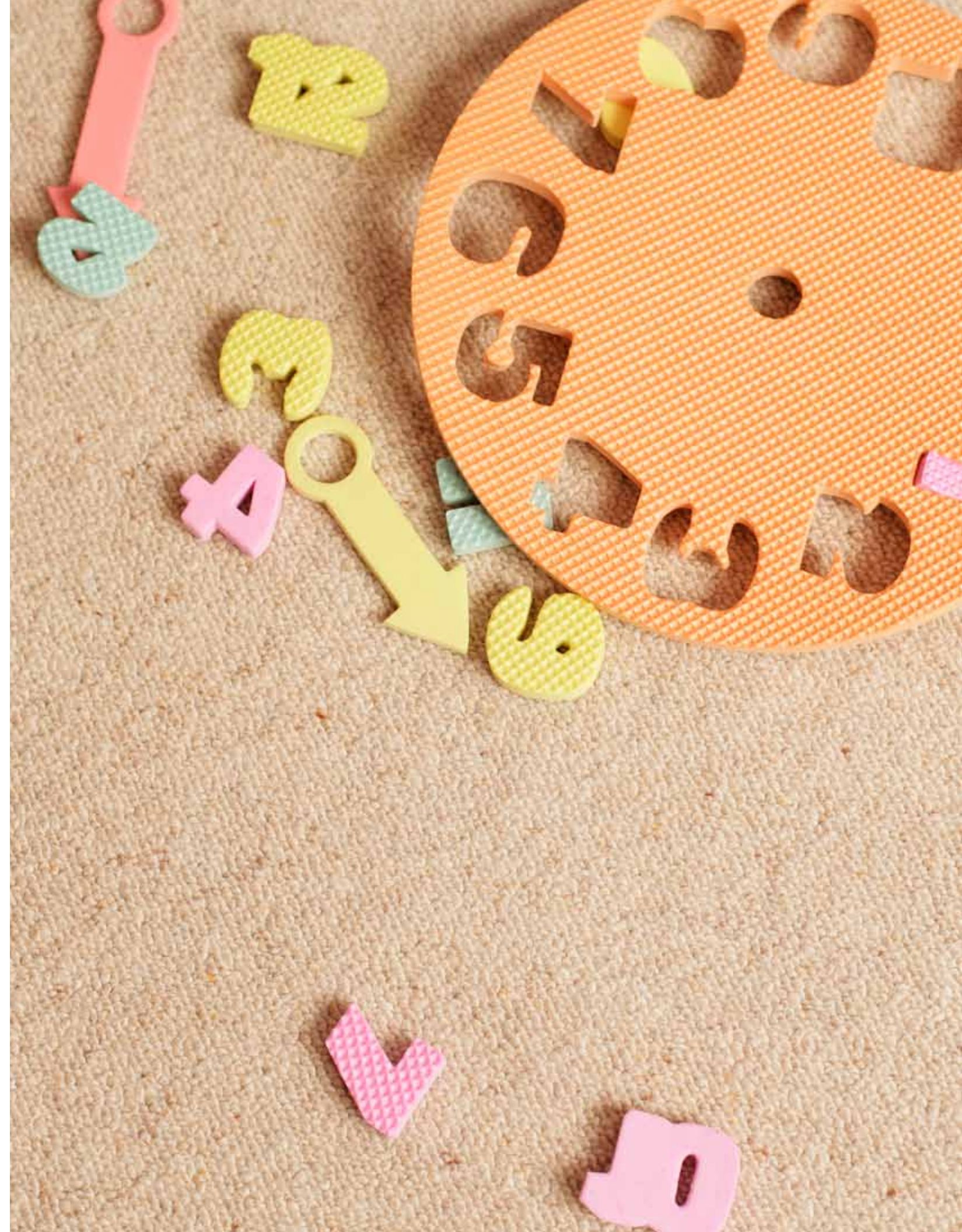
Several new roles were introduced in order to reduce wait times, reach culturally diverse families, manage the demand and provide seamless access to services. These included utilizing paraprofessionals, and establishing Parent Coaches, Intake and Regional Case Coordinators, Multicultural Health Brokers, and Newcomer Cultural Navigators/Early Interventionists. Multidisciplinary team approaches were also initiated, such as the Short Term Assessment and Responsive Intervention Team (START).

Access to Coordinated Services

Immunization clinics served as the primary sites for screening. Many projects expanded access points to deliver screening and intervention services in other settings including: day care centres, preschools, family day homes, Parent Link Centres and home visitation programs. Coordination of services among diverse, geographically dispersed partners was essential for seamless service delivery and optimal quality of care. Central intake or a single point of entry was important for communicating with families, coordinating referrals, intervention services and providing follow up support.

Engaging with Families

Families were actively engaged in service planning, setting meaningful goals and making decisions. Strength based service philosophies were used to reinforce positive steps that families were already taking to promote healthy child development. Intervention strategies were developed based on child and family strengths and



interests, which promoted parent learning. Immigrant and refugee parents expressed satisfaction and appreciation of the services and the processes of engagement provided by Multicultural Health Brokers and Cultural Navigators.

Establishing Relationships with Families

Relationship building between parents and service providers was essential, particularly for first time parents who may lack confidence in parenting skills. Well-intentioned screening processes can create anxiety for some families. In some cases, it took several visits to build trust before introducing the ASQ. Parents emphasized the importance of a safe, sensitive, non-judgmental approach to screening within a comfortable environment.

Identifying Parent Needs

Lack of child care to attend screening, assessment and intervention services was an issue for many parents. Providing the ASQ to parents in advance, organizing child care and home visitations increased access to services. Some parents expressed concerns about their children's fussy eating habits, sleeping patterns, tantrums and displays of aggression. In one project, a Parent Coach was established to assist parents with concerns about social-emotional development and behaviour issues.

Increasing Parent's Knowledge and Confidence

The majority of parents who participated in the projects reported that screening helped them to learn more about their children's developmental milestones and their children's ability to complete certain activities. Parents also agreed that they had increased confidence in managing their child's needs and felt better informed about play activities to promote healthy development. In addition, families also stated that they had increased knowledge of community supports.

Respecting Language and Culture

Consulting with cultural agencies and working with interpreters was necessary to engage hard to reach families. Multicultural Health Brokers and Cultural Navigators were essential to projects conducted in culturally diverse communities. Staff participated in cross-cultural training sessions on child development to raise awareness and to build knowledge and skills to provide culturally

responsive services. Recruiting champions from within culturally diverse communities to share information and act as resource people for early childhood development was found to be effective.

Collaborating with Multiple Partners

All of the projects are collaborating with multiple community partners and building on interagency relationships. Establishing strong communication, a single point of entry and effectively coordinating referrals and services are paramount. A clear vision, mission, and goals statement, regular meetings, supportive leadership, grassroots involvement and ongoing training opportunities are foundational for partnerships.

Next Steps

The Alberta Centre for Child, Family and Community Research is hosting a forum in April 2010. The event will bring together the projects leads, local and provincial evaluators and the economic analysis research team to review the results of the five pilot projects. The purpose of the forum is to discuss the challenges, successes and lessons learned and to identify best practices. The intention is to collectively develop and recommend a preschool developmental service model that may be considered for provincial implementation.

Acknowledgements



The success of these projects is due of the hard work, dedication and collaboration of numerous individuals, organizations and agencies. Alberta Health and Wellness thanks everyone who has been involved in the Innovative Approaches to Preschool Developmental Screening and Follow Up Services Initiative.

The five leads who coordinated and managed the implementation of these projects in their communities deserve recognition.

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