



Help Me Grow
ORANGE COUNTY



solutions

**Capturing Help Me Grow's Impact with a Simple Click:
STAR (System for Tracking Access and Referrals)**

PRESENTERS

Rebecca Hernandez
*Program Manager,
Help Me Grow Orange County*

Lacey Ginter
*Developmental Screening Coordinator,
Help Me Grow Orange County*

Jeremy Sutka
*Chief Executive Officer,
KJMB Solutions*

Webinar Objectives

Learn how STAR was developed

*Understand the core functions of STAR
and its expanded modules*

Realize the full range of reporting capacity

*Describe how STAR can enhance the work of
collecting data and reporting outcomes to
highlight the impact of a HMG System*

A Brief History

- STAR was developed for Help Me Grow Orange County and launched in 2009 for use at the Centralized Access Point
- The application was built to support staff in connecting children to services
- The tracking of referrals & follow-up care coordination was its initial core purpose
- The technology was created from existing service provision at HMG OC and enabled staff to more easily support this process

A Brief History

- STAR allows for the reporting of outcomes to key stakeholders and provides valuable data for evaluation purposes
- STAR expanded to include data collection for all HMG components including Family and Community Outreach and Child Health Provider Outreach
- Currently seven HMG Systems utilize STAR for Data Collection and Analysis

Introduction to KJMB Solutions

- KJMB Solutions is a technology consulting firm specializing in the management of full lifecycle application and database development, quality assurance, secure web hosting, training, and customer support
- KJMB Solutions has worked with the Help Me Grow Orange County team since 2007 to develop this data collection application to meet their dynamic needs
- KJMB Solutions will work with each Affiliate to customize STAR for the unique work and local preferences used for their individual site installation

What is STAR?

An online data collection portal that enables the easy gathering of data including but not limited to child and family demographics, developmental issues and concerns, referrals, care coordination, developmental screening, outreach and outcomes. STAR also provides a large suite of reports including but not limited to HMG National impact and common indicators.

STAR Technology

- Web based application, utilizing ASP.Net, SQL Server, and SSL Security
- Hosted in a HIPPA compliant data center in Irvine, CA and utilizes industry standard security practices to ensure your data is safe
- Developed, tested and optimized for use in Internet Explorer

Key Features

- Search function to match new entries to existing children in all STAR modules
- Can enter multiple children under one Intake to follow as a family unit
- Ability to input child as an Intake or Inquiry
- View of Active Case List right on the Main Menu
- Ticklers/reminders to do care coordination tasks and developmental screenings
- Care coordination log categorized by type of work and time utilized
- Ability to create referral and screening letters
- eFAX function to child health care provider and agencies
- Application Programming Interface linking ASQ Online to STAR screening module
- Online portal allows families to contact us all hours of the day via our website
- Allows for tracking of screening results using four different screening tools
- Live reports without the burden of a data download
- Data for the National Fidelity Assessment can be found directly from the live reports

STAR Main Menu



STAR

System for Tracking Access to Referrals

Welcome Lacey Ginter (0 login attempts since 12/4/2017 11:30:02 AM) [Change Password](#)

I Want To

My Open Cases

Report

Add Intake ←	Find Case	Reports Menu ←
Add Screening ←	View Web Requests ←	Configuration Menu
Add Inquiry ←	Outreach ←	ASQ Online ←

Brees, Mama	Go To Case
Brees, Baby Child ID: 19375	6 yrs.
Ginter, Lauren	Go To Case
Ginter, Lacey Child ID: 19425	3yrs. 9 mths.
Jones, Cindy	Go To Case
Jones, Ella Child ID: 19532	1yrs. 8 mths.
Lee, Sarah	Go To Case
Lee, Kaden Child ID: 19468	2yrs. 10 mths.
Smith, John	Go To Case
Doe, Alex Child ID: 19526	6 yrs.

My Tasks Due : **View Past Due** **Today**

Caregiver/Child Task	Best Number	Number Type	Best Time
Brown, Susan 11/30/2016-Activity: send out next ASQ <i>369 days past due.</i>			
Lee, Sarah 11/30/2016-Activity: Call mom about referrals <i>369 days past due.</i>	714-343-4343	Alternate	Afternoon
Smith, John 01/25/2017-Ref. Follow-up <i>313 days past due.</i>	999-999-9999	Primary	Anytime

Indicates a note was entered. Move your mouse over the image to view the note.

Clicking this image will take you to complete the task.

Indicates a case that has not been completed. More information is needed to complete and open the case.

STAR Intake

- Child information
- Developmental concerns, questions or issues
- Caregiver information
- Call back preferences
- Outcome measures
- Notes
- Care coordination log shortcut



STAR

System for Tracking Access to Referrals

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MENU ▾

FireFox Load

Case Information

Sarah Lee
714-343-4343 (Cell) Afternoon
sarahlee@yahoo.com

Kaden Lee (2yrs. 10 mths.)
Child ID:19468

ICR
Developmental Concerns

Caller Information

Are you the caregiver of the child(ren)?

Yes ▾

Children

Kaden Lee

Child's First Name: Child's Last Name:

DOB: 2yrs. 10 mths.

Referral: ▾

Referral Active

Screening: ▾

Screening Active

Was child more than 3 weeks premature? ▾

Child's Gender: ▾

Child's Race/Ethnicity: ▾

Primary Language: ▾

Child's Entry Point: ▾

*CSP Use Only

Enrolled in CSP:

End Date:

Caregiver Relationship to child: ▾

Other Caregiver Relationship to child: ▾

Has the child's custodial caregiver(s) served in any branch of the military? ▾

In which school district does the child reside? ▾

Consent to share:

Database: ▾*

Consent Given:

Medical Provider: ▾

HMG Staff Initials:

Additional Consents: ▾

Medical Information:

Health Care Provider 1: ▾

Provider First Name: Blanca Provider Last Name: Hampton

Title: Post Title:

Phone #: 714-999-9999 Fax #: --

Email Address: Address: 950 S. Euclid st Suite Number: 290

City: Anaheim State: CA Zip Code: 92801

Screening

Kaden Lee (2yrs. 10 mths.)

- Add New Results
- ASQ 16 month (06/09/2016)
- ASQ:SE-2 24 month (04/07/2017)

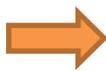
Case Menu

- Intake
- Care Coordination Log
- CSP Enrollment
- Intake Letters
- Screening Letters
- Files (0)
- Case Status (Open)

Referral Menu

- Add Referrals/Identify Gaps
- Referrals, Gaps, and Follow-ups
- 06/09/2016
- Followup 06/23/2016

Email Address: 950 S. Euclid st Suite Number: 290
City: Anaheim State: CA Zip Code: 92801
Provider's Group: Hoag
 Show Health Care Provider 2
Does the child have health insurance? Yes
Primary Insurance: Cal Optima (Medi-Cal assigned)
Secondary Insurance: None
Has the child been diagnosed with any developmental disorders or delays? No
Are there any health-related issues for the child? Don't Know



Kaden Lee -- Developmental Concerns
What are your concerns regarding the child?

Developmental Concerns *



Explain: This is mom's first child and she is concerned that Kaden might be delayed developmentally. Mom is not sure because Kaden is not around other children so mom does not have a comparison. Mom would like to see if he is meeting all his milestones on time.

How long have you been concerned about this issue? 1 month or less *
Have you sought any previous help regarding this issue? No *
Have you addressed this concern with your child's medical care provider? No *

+ Add another concern



+ Add another child



Caregiver Information

Case Assignment: Lacey Ginter, Dev Screening C *
Screening Assignment: Anna Lopez
Intake Date: 06/09/2016
Caregiver First Name: Sarah **Caregiver Last Name:** Lee
Child(ren)'s Address:
Street Address: 1234 South Street **Suite or Apt. No.:** #3
Zip Code: 92870 * **City:** Placentia
County: Orange **State:** CA *
Email Address: sarahlee@yahoo.com
Primary Phone #: 714-555-5555 * **Phone Type 1:** Home *
Alternate Phone #: 714-343-4343 **Phone Type 2:** Cell
Is the mailing address the same as the child(ren)'s address above? Yes *
Current Family Type: Single parent family **Caregiver's Language:** English

[+ Add another child](#)

Caregiver Information

Case Assignment: Lacey Ginter, Dev Screening C
Screening Assignment: Anna Lopez
Intake Date: 06/09/2016
Caregiver First Name: Sarah
Caregiver Last Name: Lee
Child(ren)'s Address:
Street Address: 1234 South Street
Suite or Apt. No.: #3
Zip Code: 92870
City: Placentia
County: Orange
State: CA
Email Address: sarahlee@yahoo.com
Primary Phone #: 714-555-5555
Phone Type 1: Home
Alternate Phone #: 714-343-4343
Phone Type 2: Cell
Is the mailing address the same as the child(ren)'s address above? Yes
Current Family Type: Single parent family
Caregiver's Language: English
Other Caregiver First:
Other Caregiver Last:
How did you hear about Help Me Grow? Friend

Call Back Preferences

We will be calling you back in a few weeks to see how you are doing with the referrals we gave you. (Confirm 'Yes' or 'No' if Referrals were provided. Select 'Information Only' if Referrals were NOT provided.) Yes
What is the best number at which to reach you? Alternate Phone # from Intake
Preferred phone number: 714-343-4343
What is the best time to reach you? Afternoon

Outcome Measure

Would you say that your needs were met today, yes or no?:

Additional Comments:

Notes

Additional notes/concerns about call or family situation:

Other Caregiver First:

Other Caregiver Last:

How did you hear about Help Me Grow?

Call Back Preferences

We will be calling you back in a few weeks to see how you are doing with the referrals we gave you. (Confirm 'Yes' or 'No' if Referrals were provided. Select 'Information Only' if Referrals were NOT provided.)

What is the best number at which to reach you?

Preferred phone number:

What is the best time to reach you?

Outcome Measure

Would you say that your needs were met today, yes or no?:

*

Additional Comments:

Notes

Additional notes/concerns about call or family situation:

Care Coordination Log

Save Care Coordination Record

Date:

Time:

Duration: Minutes

HMG Staff:

Type of Work:

Notes:

Save

Care Coordination Log



STAR

System for Tracking Access to Referrals

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MENU ▼

Case Information

Sarah Lee
714-343-4343 (Cell) Afternoon
sarahlee@yahoo.com

Kaden Lee (2yrs. 10 mths.)
Child ID:19468

ICR
Developmental Concerns

Screening

Kaden Lee (2yrs. 10 mths.)

- Add New Results
- ASQ 16 month (06/09/2016)
- ASQ:SE-2 24 month (04/07/2017)

Case Menu

- Intake
- Care Coordination Log
- CSP Enrollment
- Intake Letters
- Screening Letters
- Files (0)
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Referral Menu

- Add Referrals/Identify Gaps

Referrals, Gaps, and Follow-ups

- 06/09/2016
- Followup 06/23/2016

Care Coordination Log

Schedule Activity On: Optional - Makes activity appear in Attention Items on Home Page.

Scheduled Activity:

Completed Date: Time: 12:45 PM Duration: Minutes

HMG Staff: Lacey Ginter, Dev Screening Coordinator

Type of Work Performed:

Notes:

Save

Care Coordination Log

[+ Add](#)

Scheduled Date	Completed Date	Time	Duration	Type of Work Performed	By	Notes	Edit	Delete
11/30/2016			0 Minutes.		LG		Edit	Delete
	06/13/2016	09:45 AM	5 Minutes.	Sent OUTCOME letter/fax to MD	LG		Edit	Delete
	06/13/2016	09:45 AM	10 Minutes.	Follow-up with caregiver	LG	Ig called mom to follow up. Mom said she completed the screening and that Kaden scored above the cutoff in all areas so she was not concerned about his development. She thanked Ig for her help.	Edit	Delete
	06/13/2016	09:30 AM	5 Minutes.	Sent typically developing letter to parent	AL		Edit	Delete
	06/13/2016	09:30 AM	5 Minutes.	Sent typically dev.letter/fax to MD	AL		Edit	Delete
	06/13/2016	09:30 AM	15 Minutes.	Discussed results with family	AL	AL called and went over the results of the ASQ with mom. At this time there are no concerns with development	Edit	Delete
	06/13/2016	09:30 AM	5 Minutes.	Uploaded signed consent	AL		Edit	Delete
	06/13/2016	09:30 AM	5 Minutes.	Uploaded documents	AL	16 mos ASQ	Edit	Delete
	06/13/2016	09:30 AM	5 Minutes.	Entered results	AL	Kaden scored above the cutoff in all areas on the ASQ.	Edit	Delete
	06/06/2016	09:30	5	Sent referral	LG		Edit	Delete



Provide Referrals
and
Identify Gaps



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System for Tracking Access to Referrals

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MENU ▾

Case Information

Sarah Lee
714-343-4343 (Cell) Afternoon
sarahlee@yahoo.com

Kaden Lee (2yrs. 10 mths.)
Child ID:19468
ICR
Developmental Concerns

Referral and Gaps

Date referrals made/gaps identified:

Start Follow-up After:

Notes:

Screening

Kaden Lee (2yrs. 10 mths.)

- Add New Results
- ASQ 16 month (06/09/2016)
- ASQ:SE-2 24 month (04/07/2017)

Referrals/Gaps

Referral type: Referral Gap **X Remove Referral/Gap**

Referral Category:

Agency / Program Name:

Agency Phone #: - Ext.:

English Details for Letter:

Spanish Details for Letter:

Provider Details for Letter:

Concerns for Child: Kaden Lee

Developmental Concerns

+ Add Another Referral or Gap

Case Menu

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Referral Menu

- Add Referrals/Identify Gaps
- Referrals, Gaps, and Follow-ups
- 06/09/2016
- Followup 06/23/2016

Care Coordination Log

Save Care Coordination Record

Date: Time: Duration: Minutes

HMG Staff:

Type of Work:

Notes:

Delete

Save

MENU ▾

Case Information

Sarah Lee
714-343-4343 (Cell) Afternoon
sarahlee@yahoo.com

Kaden Lee (2yrs. 10 mths.)
Child ID:19468

ICR
Developmental Concerns

Follow-up to Referral Made 6/9/2016

Date of follow-up call: 06/23/2016

Time of follow-up call: 09:15 AM

Status of Follow-up: Closed with Outcomes

Why is the follow-up closed? Spoke to caregiver

If closed, spoke with: Sarah Lee

Other:

Notes:

Screening

Kaden Lee (2yrs. 10 mths.)

- Add New Results
- ASQ 16 month (06/09/2016)
- ASQ:SE-2 24 month (04/07/2017)

Referral Category: Developmental Screening

Agency / Program Name: Help Me Grow Developmental Screening Agency Phone #: (866)476-9025

Details for Letter: Please complete the screening and consent and mail back to Help Me Grow in self addressed envelope

Kaden Lee -- Developmental Concerns Share =

Referral Outcome: Provided service

Information Source: Caregiver report

Agency / Program Name: Regional Center of Orange Agency Phone #: (666)666-6666
County: Early Start

Kaden Lee -- Developmental Concerns Share =

Referral Outcome:

Information Source:

Case Menu

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Referral Menu

- Add Referrals/Identify Gaps

Referrals, Gaps, and Follow-ups

- 06/09/2016
- Followup 06/23/2016

Category Disposition: Provided service

Outcomes

Kaden Lee - Developmental Concerns

Connected

Barriers

Was there a barrier to receiving service for this concern? No

Built in Communication

Referral Letters

Screening Letters

eFax



12/04/2017

Sarah Lee
1234 South Street, #3
Placentia, CA 92870



Re: Kaden Lee
DOB: 02/08/2015

Dear Sarah Lee,

Thank you for your recent call to Help Me Grow. At that time, we may have given you a referral(s) to address your needs. With this letter, we are providing you a written copy of these suggestions. We hope you are able to connect with one or more of these resources.

Referral	Phone Number
Developmental Concerns	
Help Me Grow Developmental Screening Please complete the screening and consent and mail back to Help Me Grow in self addressed envelope	866-476-9025
Regional Center of Orange County: Early Start	666-666-6666



We are interested in finding out if these referrals are helpful to you and your family. In the next few weeks we will be calling to see if you are satisfied with the referrals provided and to see if you need any further assistance.

Please feel free to call us at 1.866.GROW.025 (1.866.476.9025) if you have any additional questions.

Sincerely,

Help Me Grow Staff

cc:

Blanca Hampton
Hoag
950 S. Euclid st, 290
Anaheim, CA 92801





12/04/2017

Sarah Lee
1234 South Street, #3
Placentia, CA 92870

Re: Kaden Lee
DOB: 02/08/2015

Dear Sarah,

Thank you for completing the Ages and Stages Questionnaire (ASQ) through Help Me Grow. As discussed on the phone on 12/04/2017, Kaden's ASQ scores in the area/s of Communication, Fine Motor, Problem Solving, and Personal Social indicate typical development. Kaden's scores in the area/s of Gross Motor indicate additional developmental support and/or further evaluation may help your child at this time.



To ensure that your child's developmental needs are met, you may want to raise the indicated concerns with your child's primary health care provider. The referrals listed below were provided during our phone conversation.

Referral	Phone Number
Developmental Concerns	
Help Me Grow Developmental Screening Please complete the screening and consent and mail back to Help Me Grow in self addressed envelope	866-476-9025
Regional Center of Orange County: Early Start	666-666-6666

I will be calling you to follow up on these referrals. If you have any questions before then, please feel free to call me at 949.267.0360. A copy of this letter is being sent to your child's primary health care provider for their records.

Enclosed are fun, age appropriate activities that you can do with your child.

Sincerely,

Lacey Ginter
Developmental Screening Coordinator
Help Me Grow Orange County
949.267.0360

cc:

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Fax Letters to Agency/Program

Fax 'ASQ - Monitoring Risk' (12/04/2017) to the following:

Child	Medical Provider	Fax	Last Sent Details
<input type="checkbox"/> Preview Kaden Lee	Blanca Hampton		

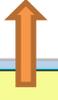
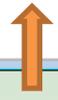
Find Agency/Program

Agency/Program:
 Fax:

Fax Letter to Agency/Program

Go to Fax Letter to Medical Provider

Close



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Referral Menu

- Add Referrals/Identify Gaps
- Referrals, Gaps, and Follow-ups
- 06/09/2016
- Followup 06/23/2016

Child	Concerns	Agency Program	Referral Date
<input checked="" type="checkbox"/> Kaden Lee	Developmental Concerns	Help Me Grow Developmental Screening	06/09/2016
<input checked="" type="checkbox"/> Kaden Lee	Developmental Concerns	Regional Center of Orange County: Early Start	06/09/2016

Letter

Mailing Labels

Fax Letter

Envelopes

Letter History By Date

New Letter

sh

Stages Questionnaire (ASQ) through Help

these referrals. If you have any
 e to call me at 949.267.0360. A copy of
 d's primary health care provider for

Inquiry

*Required fields

- Caller Type
- Child's First Name
- Child's Gender
- Child's Age (can be DOB or Age Range)
- Caregiver's Language
- Caregiver First Name
- Zip code
- Entry Point
- How did you hear about Help Me Grow?
- Concern & explanation
- How long have you been concerned about this issue?
- Have you sought any previous help regarding this issue?
- Have You addressed this concern with your child's medical care provider?
- Would you say that your needs were met today, yes or no?

MENU ▾

FireFox Load

Caller Information

Are you the caregiver of the child(ren)? ▾

Do you have permission from the child(ren)'s caregiver to share their information with us? ▾

Caller First Name: Caller Last Name:

Email Address: Caller Type: ▾ *

Phone #: Phone Type: ▾

Caller Agency/Organization:

Web Request Agency:

Web Request Provider Type:

Children

Delete

Child's First Name: * Child's Last Name:

DOB: Or Age Range: ▾ *

Referral: Referral Active

Child's Gender: ▾ *

Child's Race/Ethnicity: ▾

Primary Language: ▾ Child's Entry Point: ▾ *

***CSP Use Only**

Enrolled in CSP: End Date:

Caregiver Relationship to child: ▾

Other Caregiver Relationship to child: ▾

Has the child's custodial caregiver(s) served in any branch of the military? ▾

In which school district does the child reside? ▾

Consent to share:

Database: ▾ Consent Given:

Medical Provider: ▾ HMG Staff Initials:

Additional Consents: ▾

Medical Information:

Health Care Provider 1: ▾ Add

Provider First Name: Provider Last Name:

Title: Post Title:

Primary Insurance: Cal Optima (Medi-Cal assigned) [v]
Secondary Insurance: [v]
Has the child been diagnosed with any developmental disorders or delays? No [v]
Are there any health-related issues for the child? No [v]

Sam Jones -- Behavioral X Delete

What are your concerns regarding the child?

Behavioral [v]*
Explain: He has long tantrums that last up to an hour daily. He has a really hard time transiting and doing things out of his normal routine.

How long have you been concerned about this issue? 2-3 months [v]*
Have you sought any previous help regarding this issue? No [v]*
Have you addressed this concern with your child's medical care provider? No [v]*

+ Add another concern 

+ Add another child 

Caregiver Information

Case Assignment: Lacey Ginter, Dev Screening C [v]* Intake Date: 12/05/2017 [calendar icon]
Caregiver First Name: Sue Caregiver Last Name: Jones
Child(ren)'s Address:
Street Address: 2100 Red Hill Suite or Apt. No.:
Zip Code: 92870 * City: Placentia
County: Orange State: CA [v]
Email Address:
Primary Phone #: 714-555-5555 Phone Type 1: Home [v]
Alternate Phone #: Phone Type 2:
Is the mailing address the same as the child(ren)'s address above? No [v]
Mailing Street Address: Mailing Suite or Apt. No.:
Mailing Zip Code: Mailing City:
Mailing County: Mailing State: [v]
Current Family Type: Single parent family [v] Caregiver's Language: English [v]
Other Caregiver First: Other Caregiver Last:

Outcome Measure

Would you say that your needs were met today, yes or no?:

Yes

Additional Comments:

Notes

Additional notes/concerns about call or family situation:

Care Coordination Log

Save Care Coordination Record

Date: 12/05/2017



Time: 09:00 AM

Duration: Minutes

HMG Staff: Lacey Ginter, Dev Screening Coordinator

Type of Work: Education/Information-no referrals given

Notes:

Save

Developmental Screening Tools Embedded in STAR

Ages and Stages Questionnaires-3

ASQ: Social Emotional-2

Parents Evaluation of Developmental Status

Modified Checklist for Autism in Toddlers-R/F



STAR

System for Tracking Access to Referrals

Welcome Lacey Ginter (0 login attempts since 12/5/2017 9:03:59 AM) [Change Password](#)

MENU ▼

Case Information

Mama Brees
 777-777-7777 (Work) Anytime
 Baby Brees (6 yrs.)
 Child ID:19375
 ICR
 Childcare

Screening

Baby Brees (6 yrs.)
 • [Add New Results](#)

Case Menu

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- Care Coordination Log
- CSP Enrollment
- Intake Letters
- Screening Letters
- Files (1)
- Case Status (Open)

Referral Menu

- Add Referrals/Identify Gaps

Referrals, Gaps, and Follow-ups

- 07/29/2016
 - Followup 07/29/2016
- 10/14/2016
 - Followup 10/15/2016

Developmental Screening Results

Child: Baby Brees

Select Developmental Screening Tool:
 Completed On:

Date Entered:

Completed By:

Relationship to Child:

Screening Results

Screening Outcome: ▼*



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System for Tracking Access to Referrals

Welcome Lacey Ginter (0 login attempts since 12/5/2017 9:03:59 AM) [Change Password](#)

MENU ▼

Case Information

Mama Brees
777-777-7777 (Work) **Anytime**
Baby Brees (6 yrs.)
Child ID:19375
ICR
Childcare

Screening

Baby Brees (6 yrs.)
• [Add New Results](#)

Case Menu

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Referral Menu

- Add Referrals/Identify Gaps
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- 07/29/2016
- Followup 07/29/2016
- 10/14/2016
- Followup 10/15/2016

Developmental Screening Results

Child: **Baby Brees**

Select Developmental Screening Tool: ASQ

Completed On: 12/05/2016

Select Screening Interval: 60 month

Date Entered: 12/05/2017

Completed By:

Relationship to Child:

Screening Results

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Instrument:	Score:	Cutoff:	Summary:
ASQ: Communication	50	33.19	Above Cutoff
ASQ: Gross Motor	45	31.28	Above Cutoff
ASQ: Fine Motor	30	26.54	Monitoring
ASQ: Problem Solving	55	29.99	Above Cutoff
ASQ: Personal Social	60	39.07	Above Cutoff

Hearing concerns? No

Vision concerns? No

Motor or neurological concerns? (able to use both sides of body equally well? feet flat?) Yes

Behavior concerns? Yes

tantrums, does not listen, has a hard time transitioning.

General medical concerns or health problems?

Expressive language concerns?

Articulation concerns?



STAR

System for Tracking Access to Referrals

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MENU ▼

Case Information

Mama Brees
 777-777-7777 (Work) Anytime
 Baby Brees (6 yrs.)
 Child ID:19375
 ICR
 Childcare

Screening

Baby Brees (6 yrs.)

- Add New Results
- ASQ 60 month (12/05/2016)

Case Menu

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- 07/29/2016
 - Followup 07/29/2016
 - 10/14/2016
 - Followup 10/15/2016

Developmental Screening Results

Child: Baby Brees

Select Developmental Screening Tool: ASQ:SE-2

Completed On: 12/05/2016

Select Screening Interval: 60 month

Date Entered: 12/05/2017

Completed By: Mom

Relationship to Child: Mother

Screening Results

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Instrument:	Score:	Cutoff:
ASQ: SE2	45	95.00

Below Cutoff

Time setting factors

Developmental Factors

Health Factors

Culture/Family Factors

Has anyone expressed concerns about your child's behavior? Yes

his grandmother

Has anyone expressed concerns about your child's eating? No

Has anyone expressed concerns about your child's sleeping? No

Other concerns? No

MENU ▾

Case Information

Mama Brees
777-777-7777 (Work) Anytime

Baby Brees (6 yrs.)
Child ID:19375

ICR
Childcare

Screening

Baby Brees (6 yrs.)

- Add New Results
- ASQ 60 month (12/05/2016)
- ASQ:SE-2 60 month (12/05/2016)

Case Menu

- Intake
- Care Coordination Log
- CSP Enrollment
- Intake Letters
- Screening Letters
- Files (1)
- Case Status (Open)

Referral Menu

- Add Referrals/Identify Cases

Developmental Screening Results

Child: Baby Brees

Select Developmental Screening Tool: PEDS Completed On: 12/05/2017

Date Entered: 12/05/2017

Completed By: Lacey

Relationship to Child: Mother

Screening Results

PEDES © 2008 Frances Page Glascoe, Ellsworth & Vandermeer Press, LLC

Number of Predictive Concerns

Number of Non-Predictive Concerns

Questionable Completion

Path A -- Referral to EI/ECSE Indicated

Screening Outcome: Converted to Intake

Are Concerns Indicated?

Notes:

Send Next Screening:

Save



STAR

System for Tracking Access to Referrals

Welcome Lacey Ginter (0 login attempts since 12/5/2017 9:03:59 AM) [Change Password](#)

MENU ▼

Case Information

Mama Brees
777-777-7777 (Work) Anytime
Baby Brees (6 yrs.)
Child ID:19375
ICR
Childcare

Screening

Baby Brees (6 yrs.)
• Add New Results
• ASQ 60 month (12/05/2016)
• PEDS (12/05/2017)
• ASQ:SE-2 60 month (12/05/2016)

Case Menu

- Intake
- Care Coordination Log
- CSP Enrollment
- Intake Letters
- Screening Letters
- Files (1)
- Case Status (Open)

Referral Menu

- Add Referrals/Identify Gaps
- Referrals, Gaps, and Follow-ups
- 07/29/2016
- Followup 07/29/2016
- 10/14/2016
- Followup 10/15/2016

Developmental Screening Results

Child: Baby Brees

Select Developmental Screening Tool: M-CHAT-R/F

Completed On: 12/05/2017

Date Entered: 12/05/2017

Completed By: Lacey

Relationship to Child: Mother

Screening Results

M-CHAT-R/F © 2009 Diana Robins, Deborah Fein & Marianne Barton

Total 3 Medium Risk

Is a Follow-Up interview indicated? Yes

Was a Follow-Up Interview completed? Yes

Follow-Up interview conducted on: 12/05/2017

M-CHAT-R/F Follow-Up Interview © 2009 Diana Robins, Deborah Fein & Marianne Barton

Total 4 High Risk

Are referrals indicated? Yes

Screening Outcome: Converted to Intake

Notes:

Notes text area

Send Next Screening:

Save

ASQ Online Module

- Application Programming Interface links ASQ Online directly with STAR
- Transfers the information captured in ASQ Online fields into the developmental screening module
- Automated match for repeat entries



www.asqonline.com

Logged in as rhernan2 | Logout

Program: Help Me Grow / Role: Program Administrator



- Home
- My Profile
- Program
- Child Profiles
- Screening Management
- Reports
- Family Access**

Create Web Page

ASQ-3 Spanish

ASQ:SE-2 English

ASQ:SE-2 Spanish

Quick Links

Help

Home » Landing Pages



Questionnaire Type	Public URL	
ASQ-3 English	https://www.asqonline.com/fa	Show Edit Delete Send Child List
ASQ-3 English	https://www.asqonline.com/fa	Show Edit Delete Send Child List
ASQ-3 Spanish	https://www.asqonline.com/fa	Show Edit Delete Send Child List
ASQ:SE English	https://www.asqonline.com/fa	Show Delete Child List
ASQ:SE-2 English	https://www.asqonline.com/fa	Use ASQ:SE URL Show Edit Delete Send Child List
ASQ:SE-2 Spanish	https://www.asqonline.com/fa	Show Edit Delete Send Child List

[There are 0 family access screenings to approve \(or reject\)](#)

[There are 0 family access screenings to assign](#)





STAR

System for Tracking Access to Referrals

Welcome Lacey Ginter (0 login attempts since 12/5/2017 9:03:59 AM) [Change Password](#)

MENU ▾

ASQ Online

Child First Name: Child Last Name:

Status: Screening Date: to

Screening Import Status: Screening Import Date: to

[Search](#)

Status	Child ID	Child Name	DOB	Gender	Caregiver	Relationship to Child	
New 06/30/2017	1536957	Detroit, Carla	06/03/2012	Female	detroit, sonya	Grandparent or other relative	View
	Screening ID: 2400426		Screening: ASQ:SE-2 English 48 Month		Date: 11/02/2016		
Matched 10/18/2016 New Entry Point: EDAC Screening #2 (OCUW)	1491744	Grass, Xavier	10/07/2015	Male	Grass, Alexander	Mother	View
	Screening ID: 2339270		Screening: ASQ-3 English 8 Month		Date: 06/20/2016		Non-Auto-Imported: 10/18/2016
	Screening ID: 2339279		Screening: ASQ-3 Spanish 10 Month		Date: 08/08/2016		Auto-Imported: 10/18/2016
	Screening ID: 2365550		Screening: ASQ:SE-2 English 12 Month		Date: 10/25/2016		
	Screening ID: 2365544		Screening: ASQ-3 Spanish 20 Month		Date: 11/01/2016		
	Screening ID: 2365746		Screening: ASQ:SE-2 English 12 Month		Date: 11/01/2016		
New 08/04/2017	1700712	Hill, William	08/11/2016	Male	Hill, Robert	Father	View
	Screening ID: 2688728		Screening: ASQ:SE-2 English 12 Month		Date: 07/19/2017		
New 10/18/2016	1491672	Iverson, Ingrid	10/14/2015	Female	Iverson, Harry	Father	View
	Screening ID: 2339117		Screening: ASQ-3 English 8 Month		Date: 06/07/2016		
	Screening ID: 2366393		Screening: ASQ-3 English 12 Month		Date: 11/01/2016		
	Screening ID: 2366582		Screening: ASQ:SE-2 English 6 Month		Date: 11/01/2016		
	Screening ID: 2366994		Screening: ASQ:SE-2 English 12 Month		Date: 11/01/2016		
New 10/13/2016	1414470	Marks, Lisa	02/19/2014	Female	Marks, Polly	Foster parent	View
	Screening ID: 2227485		Screening: ASQ:SE-2 English 18 Month		Date: 08/04/2015		
	Screening ID: 2227479		Screening: ASQ-3 English 18 Month		Date: 08/05/2015		
	Screening ID: 2329813		Screening: ASQ-3 English 20 Month		Date: 10/05/2015		
	Screening ID: 2329941		Screening: ASQ-3 English 22 Month		Date: 11/19/2015		
	Screening ID: 2329851		Screening: ASQ-3 English 27 Month		Date: 05/03/2016		
	Screening ID: 2329438		Screening: ASQ-3 English 30 Month		Date: 10/04/2016		
	Screening ID: 2329615		Screening: ASQ:SE-2 English 30 Month		Date: 10/05/2016		
	Screening ID: 2329634		Screening: ASQ:SE English 30 Month		Date: 10/07/2016		
New 06/30/2017	1513970	melville, herman	08/08/2012	Male	melville, harry	Father	View
	Screening ID: 2372672		Screening: ASQ:SE-2 English 48 Month		Date: 09/13/2016		



Outreach Module

- Captures family, community & health care provider outreach
- Includes outreach category & type
- Provides an aggregate on type of participants
- Tracks number of changes to the resource inventory



STAR

System for Tracking Access to Referrals

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MENU ▾

Outreach

Event Date



Region

Repeat

Outreach Category

Conducted Outreach

Lacey Ginter, Dev Screening Coordinator

Outreach Type

Name

Please select an Outreach Category

Note

Participants

Parents/Caregivers

of Exposures

0

Service Providers

0

Health Care Providers-physicians

0

Medical support staff

0

Health Care Providers-PA/NP

0

Resident (Medical student)

0

Total 0

Resource Inventory Edits

Updates:

Additions:

[Return to Outreach List](#)

[Save](#)

Online Portal Module

- Allows parent to contact us directly from our website
- Initial fields filter for age and zip code
- Available around the clock
- Fields completed by parent populate STAR

About Us

Families

Service
Providers

Healthcare
Providers

Child Care
Toolkit

Developmental
Screening
Network

OCC3 for
Kids

Facts &
Figures

FAQ's

Fundraising
Event

Contact Us

Give

Follow us:



Connecting Families to Developmental Services

Help Me Grow connects children and their families to developmental services to enhance the development, behavior and learning of children birth through eight years. By calling the toll free number **1.866.GROW.025**, (1.866.476.9025) or using the online link, parents, caregivers, child care providers, early educators and health care providers have a point of access to developmental services for all young children who live in Orange County.

Help Me Grow ONLINE

Help Me Grow has an online link in [English](#) or [Spanish](#) where parents, service providers and health care providers can provide a child's information and a description of the issues or concerns. Within 1-2 business days, we will contact the child's parent to learn more about their needs and to provide connection to programs and services. **Get started today with Help Me Grow Online!** Learn how with this [video](#).

Get Connected

Conectese Aquí

or call us at:

1.866.GROW.025



❖ Training
Opportunities

❖ Developmental
Screening

❖ Connection
Cafe

❖ Educational Providers
in the Community
(EPIC)



Help Me Grow
ORANGE COUNTY

About Us

Families

Service
Providers
Healthcare

Providers
Facts &
Figures
FAQ's

Contact Us

Donate

Follow us.



I hereby agree as follows:

1. By using the portal, you agree that the Regents of the University of California, on behalf of Help Me Grow Orange County (hereinafter, collectively, Help Me Grow) are authorized to use the personal health information of my child, a minor, and that I am the parent or legal guardian of the child whose name is entered, and is authorized to consent to the use of such information by Help Me Grow;

2. Help Me Grow DOES NOT provide medical advice pertaining to your child's condition. This website will

I agree to the above terms and conditions

Please enter each child's information below

Child's First Name

Child's Last Name

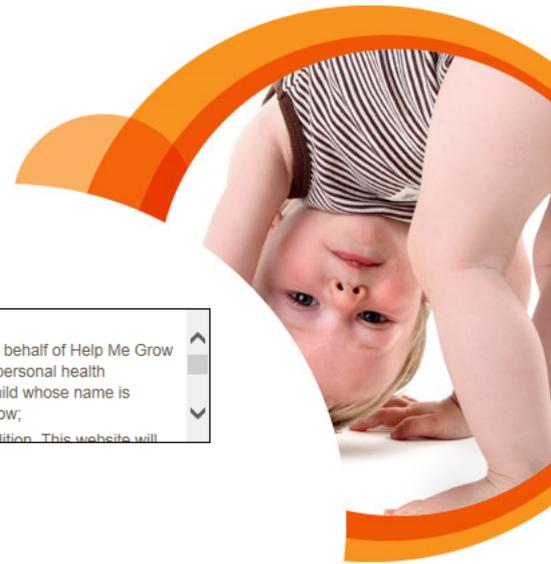
Please describe your questions, issues, or concerns regarding your child's development, behavior or learning.

How long have you been concerned?

Have you sought any previous help with this concern?

Have you addressed this concern with your child's doctor?

Next



Reports



Help Me Grow
ORANGE COUNTY

STAR

System for Tracking Access to Referrals

Welcome Rebecca Hernandez (0 login attempts since 12/8/2017 4:21:06 PM) [Change Pass](#)

MENU ▾

Quick Counts and Comparisons

- Caregiver Language
- Referral Category
- Referral Category Gaps
- Referral By Agency Program
- Developmental Disorder By Count
- Developmental Disorder By Type
- Child Health Issues
- Relationship to child
- Caller Type National
- Child Entry Point
- Child Military Family
- Intake Counts By Type
- Closed Cases By Reason
- How Long Concerned
- City
- Child Age
- Ethnicity by Gender
- Converted Intakes
- CSP Site
- CSP Classroom
- Current Family Type
- Child Barriers

Outcomes

- Outcomes: Connected versus Not Connected
- Barriers: Concern Outcomes
- Service Outcomes by Concern
- Service Outcome
- Initial Outcome Measure
- Information Only vs. Referrals with/without Follow-up
- Outreach Type
- Outreach Participant Type

Screening Reports

- Screening Summary
- Screening: ASQ
- Screening: ASQ:SE
- Screening: ASQ:SE-2
- Screening: M-CHAT-R/F
- Screening: PEDS
- Screening Totals
- Screening Report by Child
- Aggregate Report of Screenings by Tool
- ASQ Screening Results

Ticklers, Workflow, and Time Reporting

- Care Coordinator Hours
- Care Coordinator Hours by Type of Work
- Average Type of Work by Case
- Child Referral Outcomes
- GIS Engine
- Mailing Address List
- Email Address List

Web Counts

- Web Request Totals
- Web Requests Rejected
- Web Requests Accepted (Incomplete)
- Web Requests Accepted (Complete)



STAR

System for Tracking Access to Referrals

Welcome Rebecca Hernandez (0 login attempts since 2/25/2014 3:26:19 PM) [Change Password](#)

MENU ▼

Quick Counts and Comparisons

- Follow-up Received
- Intake Entries due to Developmental Screening
- Child Concern**
- How did you hear about HMG
- Child Gender
- Child Ethnicity
- Child School District
- Child Insurance
- Health Care Provider
- Child Primary Language
- Caregiver Language
- Referral Category
- Child Developmental Disorder
- Child Developmental Disorders
- Child Health Issues
- Relationship to child
- Child Entry Point
- Child Military Family
- Intake Counts By Type
- How Long Concerned
- City
- Child Age

Outcomes

- Outcomes: Connected versus Not Connected
- Barriers: Concern Outcomes
- Gaps: Concern Outcomes
- Service Outcomes by Concern
- Service Outcome

Ticklers, Workflow, and Time Reporting

- Care Coordinator Hours
- Care Coordinator Hours by Type of Work
- GIS Engine

Screening Reports

- Screening Summary
- Screening: ASQ
- Screening: ASQ-SE
- Screening: PEDS
- Screening Totals
- Screening Report by Child
- Aggregate Report of Screenings by Tool

Web Counts

- Web Request Totals
- Web Requests Rejected
- Web Requests Accepted (Incomplete)
- Web Requests Accepted (Complete)

[Back to Report Menu](#)

Child Concerns Report

Filters:

Series 1

Series 2 (Optional)

Date of Intake:

7/1/2012 to
6/30/2013
Last Fiscal Year

Date of Intake:

to
Select Date Range

Age In Years:

To:

Age In Years:

To:

Age In Months:

To:

Age In Months:

To:

Include Prenatal:
*(This only works with
an age range)*

Include Prenatal:
*(This only works with
an age range)*

Include Prenatal
(only):
*(This works without
an age range)*

Include Prenatal
(only):
*(This works without
an age range)*

Intake Type:

Intake Type:

Agency:

Agency:

Zip Code:
*(You can enter
Multiples separated
By a comma.)*

Zip Code:
*(You can enter
Multiples separated
By a comma.)*

HMG Staff:

HMG Staff:

Case Status:

Case Status:

Entry Point:

Entry Point:

Enrolled In CSP:

Enrolled In CSP:

CSP Active (under
development):

CSP Active (under
development):

Site:

Site:

Chart:

Count

Clear Filters

Run Report

Concern Name	Total Children With Concern	
	#	%
Adaptive	38	1.1
Basic Need	135	4
Behavioral	486	14.4
Childcare	133	3.9
Cognitive (Learning)	26	0.8
Communication	512	15.1
Diagnosis	126	3.7
Education	47	1.4
Family Issues	104	3.1
General Development	332	9.8
General Information	313	9.3
Health Insurance	45	1.3
Health/Medical	70	2.1
Hearing	96	2.8
Living Condition	3	0.1
Mental Health	99	2.9
Gross Motor	47	1.4
Parental Support	341	10.1
Social/Emotional	50	1.5
Vision	7	0.2
Other	27	0.8
Fine Motor	21	0.6
Developmental Concerns	324	9.6
Total	3382	100

Total Children With Concern

CA Data Indicators

- Demographics
- Issues and concerns
- Referrals
- Developmental Screening
- Outcomes



STAR

System for Tracking Access to Referrals

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MENU ▼

Quick Counts and Comparisons

- [Child Race/Ethnicity](#)
- [Child School District](#)
- [Child Insurance](#)
- [Health Care Provider](#)
- [Child Primary Language](#)
- [Caregiver Language](#)
- [Referral Category](#)
- [Referral Category Gaps](#)
- [Referral By Agency Program](#)
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- [Developmental Disorder By Type](#)
- [Child Health Issues](#)
- [Relationship to child](#)
- [Caller Type National](#)
- [Child Entry Point](#)
- [Child Military Family](#)
- [Intake Counts By Type](#)
- [Closed Cases By Reason](#)
- [How Long Concerned](#)
- [City](#)
- [Child Age](#)
- [Ethnicity by Gender](#)

Outcomes

- [Outcomes: Connected versus Not Connected](#)
- [Barriers: Concern Outcomes](#)
- [Service Outcomes by Concern](#)
- [Service Outcome](#)
- [Initial Outcome Measure](#)
- [Information Only vs. Referrals with/without Follow-up](#)
- [Outreach Type](#)
- [Outreach Participant Type](#)

Ticklers, Workflow, and Time Reporting

- [Care Coordinator Hours](#)
- [Care Coordinator Hours by Type of](#)
- [Average Type of Work by Case](#)
- [Child Referral Outcomes](#)
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- [Screening: M-CHAT-R/F](#)
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Web Counts

- [Web Request Totals](#)
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- [Web Requests Accepted \(Incomplete\)](#)
- [Web Requests Accepted \(Completed\)](#)



STAR

System for Tracking Access to Referrals

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MENU ▼

Quick Counts and Comparisons

- Follow-up Received
- Intake Entries due to Developmental Screening
- Child Concern
- Child Concern Gaps
- Concern By How Long
- Concern By Previous Help
- Concern By Medical Provider Outcome
- How did you hear about HMG
- How did you hear about HMG National
- Child Gender
- Child Race/Ethnicity
- Child School District
- Child Insurance
- Health Care Provider
- Child Primary Language
- Caregiver Language
- Referral Category
- Referral Category Gaps
- Referral By Agency Program
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- Developmental Disorder By Type
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- Screening: M-CHAT-R/F
- Screening: PEDS
- Screening Totals
- Screening Report by Child
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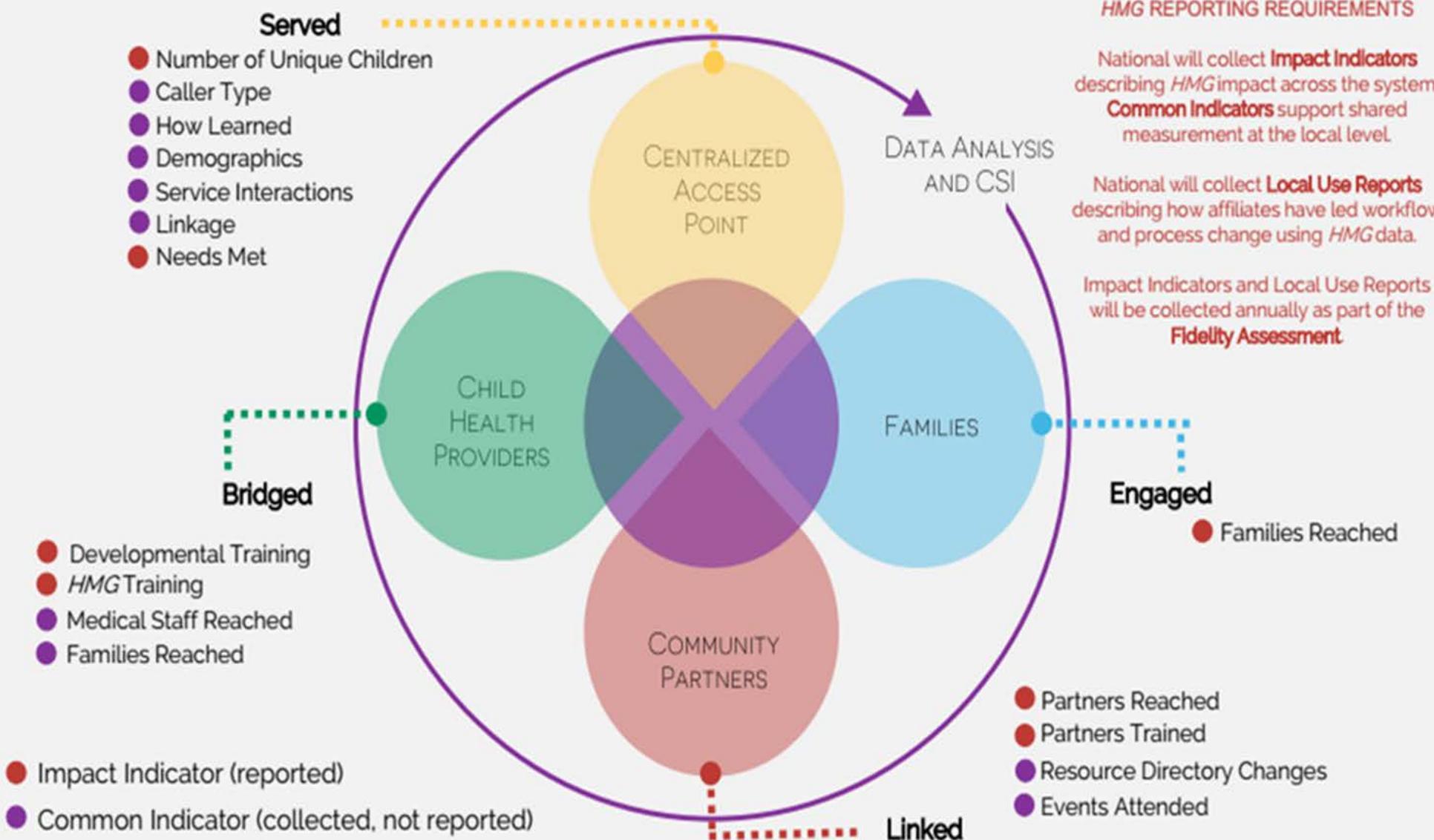
Ticklers, Workflow, and Time Reporting

- Care Coordinator Hours
- Care Coordinator Hours by Type of Work
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- Email Address List

Web Counts

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- Web Requests Rejected
- Web Requests Accepted (Incomplete)
- Web Requests Accepted (Complete)

HMG SYSTEM MODEL: MEASURING FOR RESULTS



Impact Indicators

Centralized Access Point

- Number of unique children
- Needs met

Community Partners

- Partners reached
- Partners trained

Child Health Providers

- Developmental training
- HMG Training

Families

- Families reached



STAR

System for Tracking Access to Referrals

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MENU ▼

- Quick Counts and Comparisons
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- Web Counts
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- Web Requests Rejected
- Web Requests Accepted (Incomplete)
- Web Requests Accepted (Complete)

Outreach Participant Type

Filters:			
Series 1		Series 2 (Optional)	
Event Date:	<input type="text" value="7/1/2017"/>  to	Event Date:	<input type="text"/>  to
	<input type="text" value="6/30/2018"/> 		<input type="text"/> 
	<input type="text" value="This Fiscal Year"/> 		<input type="text" value="Select Date Range"/> 
Chart:	<input type="text" value="Count"/> 		

OutreachParticipantTypeName	Total	
	#	%
Caregivers/Parents	928	32.4
Children (>8)	1	0
Children (0-8)	26	0.9
Early Care & Education Staff	845	29.5
Family Practice Physicians	23	0.8
Medical/Office Staff	196	6.8
Nurses (RN, LVN, SRN)	153	5.3
OB/ Gyn Physicians	1	0
Pediatricians	50	1.7
Physician Asst./Nurse Practitioners	24	0.8
Residents (Medical Students)	12	0.4
Service Providers	598	20.9
Subspecialists (Medical)	5	0.2
Total	2862	100

Pricing



Help Me Grow
ORANGE COUNTY

**System for Tracking Access to Referrals (STAR)
Subscription, Services and Training Fees
Effective 10/1/2016**

I.

STAR Subscription	One Time	Annual
Annual subscription (includes hosting, license fee, escalated technical support, six hours/year of customer assistance from KJMB Solutions and STAR Users Group conducted via Blog by Help Me Grow Orange County)		\$7,720
Initial technology setup fee (includes upload fee during initial implementation)	\$2,000	
Optional Subscription and fees		
Expanded annual subscription fee for each additional site with the original data system. Discount starting at more than five sites.		\$2,330
Technology setup fee for each additional site with the original data system.	\$200	
Optional Modules and Fees*		
<ul style="list-style-type: none"> • Online Portal for access to STAR via a program website (usually requires customizations) • ASQ Online for customized Application Programming Interface (API) to pull in screening results to STAR • Outreach to track community, family and health care provider outreach activities • School Site to track referrals and outcomes for children enrolled in a pre-school/classroom 		
License Fee (per module)		\$500
Technology set up fee (per module)	\$300	
Annual hosting fee (per module)		\$300
* Further fees may apply for additional sites. Necessary only if expanded annual subscription exists.		

II.

Service Offerings from Help Me Grow OC (separate contract with Help Me Grow Orange County)	
STAR Application Training (Webinar based). Training will include: <ul style="list-style-type: none"> • Three 1.5 hour sessions on intake, developmental screening and reporting modules in STAR. • Up to 3 hrs. of additional technical support following the trainings 	\$1,080
Training webinars for optional modules selected.	\$360/webinar
Additional Technical Support on the use of STAR via phone consultation, "Go To Meeting" and/or email. Must contract for a minimum of at least 4 hours.	\$360 for four hours

III.

Service Offerings from KJMB Solutions (A fixed price quote will be given for each)	
Programming customizations to the STAR application for adding new features or modifying existing features.	\$90/hr.
Upload fee for quality testing to apply changes to existing STAR application.	\$2,000
Additional Customer Assistance on use of STAR application and related to customizations via phone consultation, "Go To Meeting" and/or email. Must contract for a minimum of at least 4 hours.	\$360 for four hours

What else would you like
to know about STAR?

Q & A

What's next?

Interested in learning more contact

Rhernan2@uci.edu

Technology questions contact

Jeremy@kjmbolutions.com