

A COMMUNITY INITIATIVE MANAGED BY children's institute

STRENGTHENING SOCIAL AND **EMOTIONAL HEALTH**

Get Ready to GROW (GROW) – Innovation Among Multi-Sector Partners: A Community Response to COVID-19

pMeGrow[®]

National Center

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WORKING SO EVERY CHILD IS STRONG AND RESILIENT

Strengthening systems and building capacity to serve families, children, and youth

Children's Institute mission:

Joining together to raise every child's complete wellbeing.

What we do:

- Provide services, programs, and thought partnership -- joining and leading collective impact initiatives devoted to children's health.
- Work across health, human services, and education to support the development of more fully integrated systems -- research, evaluation, childcentered data-system technology, and continuous improvement resources for a positive impact.

In 1957, established as the Primary Mental Health Project, focused on early intervention for children who experience school adjustment challenges.



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CHILDREN'S INSTITUTE FOCUS

Services that promote healthy development of social emotional skills

Social and emotional development affects how children relate to the world around them and is linked to significant academic and long-term outcomes.

Responsive and relevant consultation and training

Response within our ever-changing world to safely and equitably address high-need issues for child-serving professionals, families, youth and children.

Data-informed support to help children reach their full potential

Programs and services grounded in research to build bridges between theory and practice to transform ideas into proven solutions and obstacles into opportunities for child and family success.



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COMPREHENSIVE DEVELOPMENTAL CHECKS WITH SUPPORT FOR REFERRAL AND FOLLOW UP SERVICES

- 1 to 5-year-old children throughout the Finger Lakes region
- Free screenings and support at no cost for families
- Areas checked by professionals using leading edge tools and technology:
 - Vision
 Social & emotional competence
 - Hearing Cognitive functioning
 - Speech Physical development
 - Dental Social determinants of health/education
- 42% of children have *at least one* potential need identified
- Social Determinants of Health/Education -- newest screening
- Referrals for follow up checks and services help ensure each child is ready to learn



GET READY TO

Consistent Goals Before & During COVID-19



- Reach children 12-60 months, within the Greater Rochester, NY area, to provide comprehensive screenings
- Use evidence-based screening tools
- Share results with families and support the referral process

lombre del niño:	Fecha:				
CHEQUEO DEL DESARROLLO	ENCAMINADO	SEGUIMIENTO	REFERIR		
visión					
AUDICIÓN					
Dental 🛃					
HABLA Y Lenguaje					
MOVIMIENTO					
PENSAR Y Razonar					
SOCIAL Y Emocional	,				
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DEVELOPMENTAL CHECK	ON TRACK	FOLLOW-UP	REFER				
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r more information about yo Visi: www.GatReady/EGROWo Email: support@gatreadytogra	g	VCheck, contact					
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Screening result cards in Spanish and English



COMMUNITY IMPACT



- Convening of pediatric/family medicine leaders in the community for screening, follow up, and innovation
- Systems integration Monthly meetings with community members across disciplines – common standards and shared language, problem solving, innovation, strategic planning
- Thorough and comprehensive screening within a variety of settings to raise quality of care across the community
- Virtual screenings e-GROW screenings allow us to continue to reach children while limiting in person contact.
- Mobile screening unit -- flexibility for focus populations to remove access barriers such as transportation or childcare to ensure screening



Collaborative and Interprofessional Responsiveness to COVID-19





- How can we be responsive and innovative in a time of crisis? What is even reasonable and feasible?
- What about our in-person protocols will need to be changed? Who is at the table to inform next steps?
- How can we remain family-centered? Partnership oriented?
- What materials will we need? What materials will families have? How can we collaboratively prepare?
- Beyond the screenings how can we continue to engage families and support children's development in a time of great uncertainty?

Defining e-GROW: Virtual Whole-Child Developmental Screening Procedures



The 'To-Do' List in the Tele-Transformation

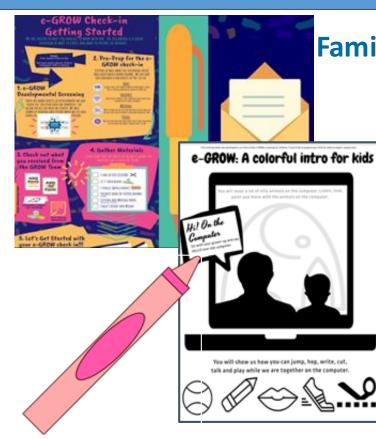
- Maintain quality in all aspects of screening
- Understand copyright restrictions
- Collaborate interprofessionally to modify existing protocols
- Train screeners to use new protocols
- Coordinate with families to access and partner on screening
- Provide materials to ensure screenings are comprehensive
- Supplement screenings requiring instrumentation with evidence-based questionnaires
- Ensure access to linguistically diverse families

'Many ideas **GROW** better when transplanted into another mind than the one where they sprang up.' – Oliver Wendell Holmes



e-GROW Screening: Partnering with Families





Family and Provider Partnership was CENTRAL in the e-GROW planning.

- Video introduction
- Coloring Sheet
- Materials Kit
- Welcome Letter



Parent Report Questionnaires Created for:





e-GROW Screening: Ensuring Access



Child is D/HOH	Parent is D/HOH	Child and Pare	ent are D/HOH			
 In the pre-screening process be sure to confirm <u>language preferences</u> (i.e., spoken language, ASL, LSL) to ensure the screening is provided in primary language In the pre-screening process also confirm family choice, and potential process, on <u>amplification</u> (e.g., hearing alds, cochlear implants) 	Eor Tele-screening If the parent is joining the child we will need to provide an interpreter or professional captioning service to ensure compliant access to the screening.	would nee ensure cor the screen in the pre- be sure to preference	ings an <u>interprete</u> d to be provided b mpliant access to	s		
Eor Children/Families Choosing Spoken Language Ensure use of visuals during the screening process If screenings are provided in telepractice	Eor In Get Ready to GROW: Language Variation Intake In order to conduct a least-biased screening if is important to understand each child and family's language exposure/use a learning athome and in school settings. The information collected will be used to determine screening procedures to ensure language is considered in the screening process and any subsequent recommendations. The language intake should be completed for any children learning a language other than English or who are bimuttilingual.					
be sure that before the screening there are discussions about tech-tech		Ident	Rying Information			
	Child's Name:		Carepher's Name:			
		Designments.	Interpreter Needed	□Yes (unpres)□No		
	Child's Age @ Screen:		1.142/04.148-998,	Concentration and a second a s		
	Child's Age @ Screen:	Lan	guage Esposure			
	Unid's Age @ Screen:	age variations g daily routines?	guage Exposore			
	What languages or langu are spoken at home duri bg_ Language Orgin Samen M Language Language Aren Arene	age variations g daily routines? strain Dwett. n. etil with at home Adult	guage Exposure un Home/Relations en in Home/Relation			



Issues of Access Remained Central to Planning

- Technology •
- Bandwidth •
- Language **Proficiency**
- Communication Preferences

e-GROW Screenings: Tele-Health Delivery





Direct screening in partnership with families and/or providers in the areas of: Dental **Speech-Language Motor (Gross and Fine)** Parent/Provider Report Continued for: **Social-Emotional** Cognitive

Status income

Out he do up

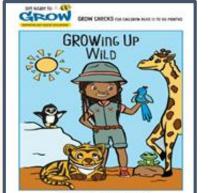
e-GROW Screenings: Tele-Health Delivery



Dental Health e-GROW Screening - Speech and Language Fine and Gross Motor







A GROW-themed wordless picture book as well as a slide deck of our 'GROW animal friends' served as the visuals and story we told to conduct the screenings.



e-GROW Screening: Programming Promoting Development





The telehealth format provided an opportunity to reach children and families for screening, but also presented an opportunity to uniquely program to support children's development in a time of great uncertainty.

Mobile Screening Unit



- Arrived just in time to respond and serve during COVID challenges
 - Limited program onsite space to conduct screenings/ required social distancing
 - No visitors/providers allowed in buildings
- Provided opportunities for college and university interns to engage in fieldwork
- Offered state of the art ultraviolet disinfection system for sanitizing









MOBILE SCREENING UNIT

Serving Community and Partners



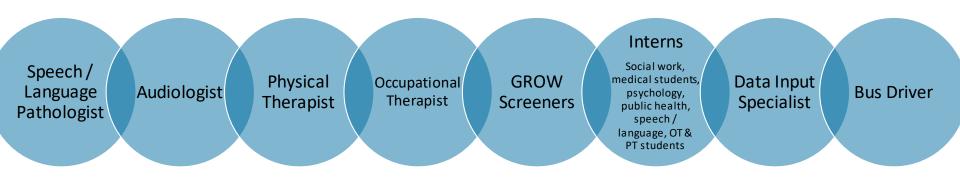


- Community Based Organizations, Schools and Childcare Centers: VOA, Ibero, Generations Child Care
- Medical partners
 - o Genesee Pediatrics
 - o The Center for Refugee Health
- Monroe County Library System/WXXI "Pop Up in the Park" community events

MOBILE SCREENING UNIT

Screening teams









Screening at Volunteers of America Children's Center



MOBILE SCREENING UNIT

Serving The Center for Refugee Health











MOBILE SCREENING UNIT Disinfection

The GROW Mobile Screening Unit is equipped with two ultraviolet disinfection lamps.

How does UVC work?

- Inactivates microorganisms by mutating their DNA
- Cells cannot grow or reproduce
- When cells cannot replicate, they are no longer infectious
- Cell death occurs

Disinfection wipes are also used on all touched surfaces





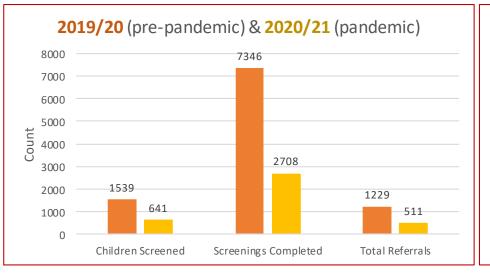
POPULATION HEALTH IMPACT Pre-Pandemic / Pandemic Years



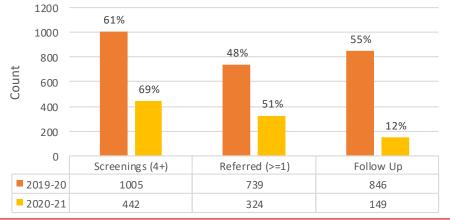
Many adjustments based on COVID, including development of virtual screening process:

2020/21 Screening Type Breakdown





2019/20 (pre-pandemic) & 2020/21 (pandemic)





FURTHER QUESTIONS:

www.GetReadyToGROW.org



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