



Florida Maternal, Infant & Early Childhood Home Visiting Initiative

# SUPPORTING CHILD DEVELOPMENT LEARNING COLLABORATIVE

June 27, 2018

# CELEBRATING OUR SUCCESS

## Today's Agenda

Welcome: Allison Parish

Learning Collaborative Overview: Judi Vitucci

What Does the Data Tell Us?: Allison Parish

Sharing From the Field: Participating MIECHV Sites

Wrap-Up: Allison Parish

# A SPECIAL THANKS TO THE FACULTY & STAFF

Ghia Kelly – FL Early Childhood Comprehensive Systems Project Manager

Jennifer Marshall – FL MIECHV Evaluator

Judi Vitucci – CQI Consultant

Katie Hood – FL MIECHV Program Manager

Renee Jenkins – FL Early Steps Administrator

Sally Golden-McCord – Healthy Families Florida Assistant Director

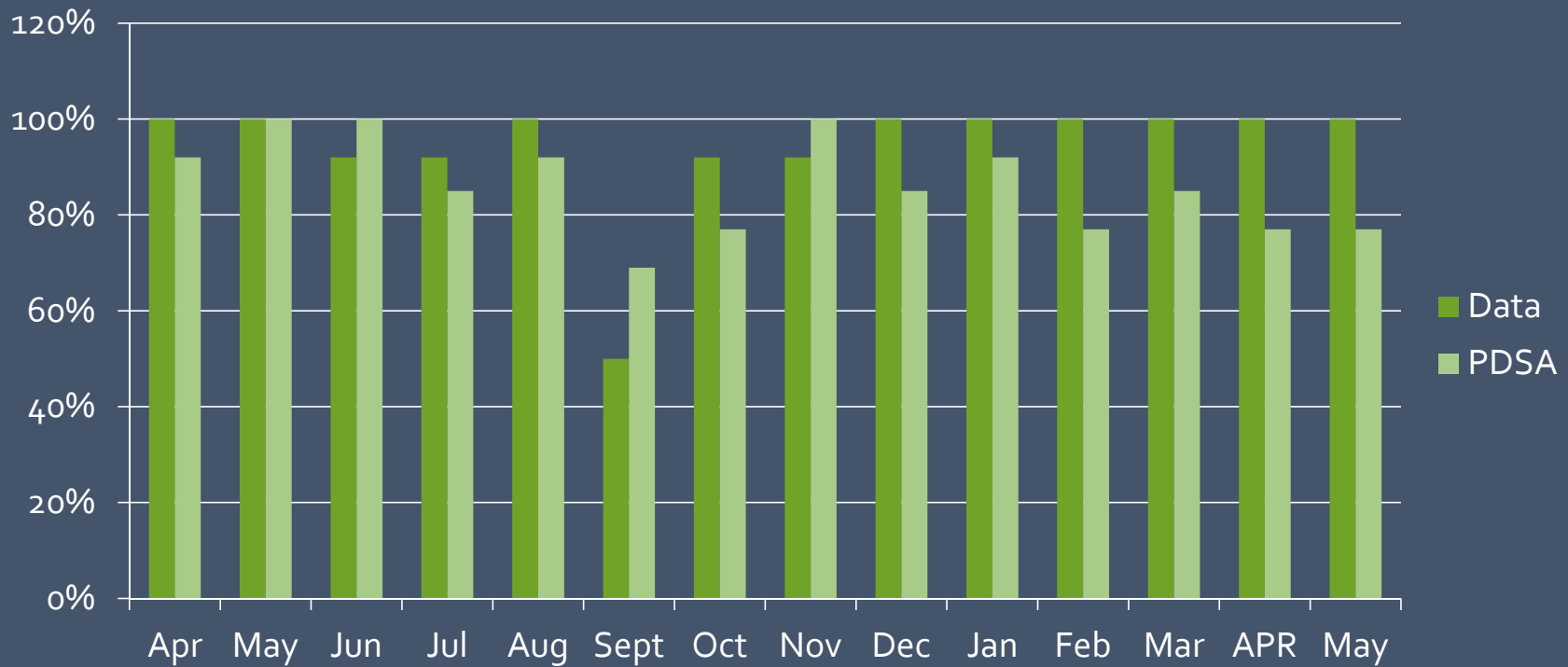
Sara Lynch – Nurse-Family Partnership Nurse Educator

Virginia Holland – FL MIECHV Data Quality and Reporting Manager

# SUPPORTING CHILD DEVELOPMENT LEARNING COLLABORATIVE

- Launched on January 20, 2017, with orientation webinar
- February 23-24, 2017: Learning Session # 1 with first PDSA and measure submission in April 2017
- Thirteen sites participated
- Testing occurred in each of the primary drivers and many of the secondary drivers
- Progress was tracked on run charts
- Sites submitted data and conducted PDSA tests every month through May 2018 (last submission June 11)

## TIMELINESS OF SCD PDSA AND DATA SUBMISSIONS



# SCD RESOURCES DEVELOPED

- ASQ Protocol/Procedure
  - MIECHV Due Date Tickler
  - Early Steps Pretest/Posttest
  - ASQ-3 Tracker
  - ASQ Monitoring Zone Protocol
  - ASQ Follow-up Form
  - Referral Tracker
  - Developmental Screening Policy
  - SCD Pretest/Posttest
  - *Move It* accounts to communicate with ES
  - “Go To” List of PAT developmental activities
  - VROOM/ Developmental Flashcards
- Polk & Alachua  
Escambia  
Orange  
Alachua, Broward, NCF  
Northeast  
MCAA  
Alachua  
Hillsborough  
Orange  
MCAA  
Pinellas  
Southwest



## WE LEARNED

- Several sites identified confusion about what the “next interval ” meant
- Rapid cycle PDSA testing is preferred
- Flexibility is necessary when testing cannot be accomplished as planned

WHAT DOES THE DATA TELL US?



# REFRESHER ON SCD LEARNING COLLABORATIVE MEASURES

Performance Goal	Measure Name/ Operational Definition
By May 31, 2018, at least 90% of the ASQ screens required by MIECHV will be completed on time.	<u>% Children Screened On Time</u> # of children screened within the window /# children due for an ASQ at 10, 18 or 30 months whose due window closed during the reporting month
By May 31, 2018, at least 90% of children with a score below the cut-off in one or more domains will be offered a referral to Early Steps within 7 days.	<u>% Children with ASQ Below Cut-off Referred On Time</u> # of children offered a referral to Early Steps within 7 days/ # of children with a score below the cut-off on one or more domains + 7 days
By May 31, 2018, at least 90% of children with a score below the cut-off in one or more domains on the ASQ will receive: <ul style="list-style-type: none"> <li>• an Early Steps evaluation within 45 days; or</li> <li>• a community service within 30 days; or</li> <li>• developmental support activities and a rescreen within 120 days.</li> </ul>	<u>% Children Below Cut-off Receiving Services</u> # of children receiving at least one of three services/ # of children with ASQ score below cut-off + 120 days
By May 31, 2018, at least 90% of children scoring within the monitoring zone on the ASQ will receive developmental support activities and a rescreen within 120 days.	<u>% Children in Monitoring Zone Receiving Follow-up</u> # of children receiving follow-up/ # of children with score in monitoring zone + 120 days

# INTERPRETING RUN CHARTS

For this Learning Collaborative, we want the values to increase and (hopefully) surpass the goal of 90%. When that doesn't occur, we can tell if we are making progress by looking for a *shift* or a *trend* on the run charts.

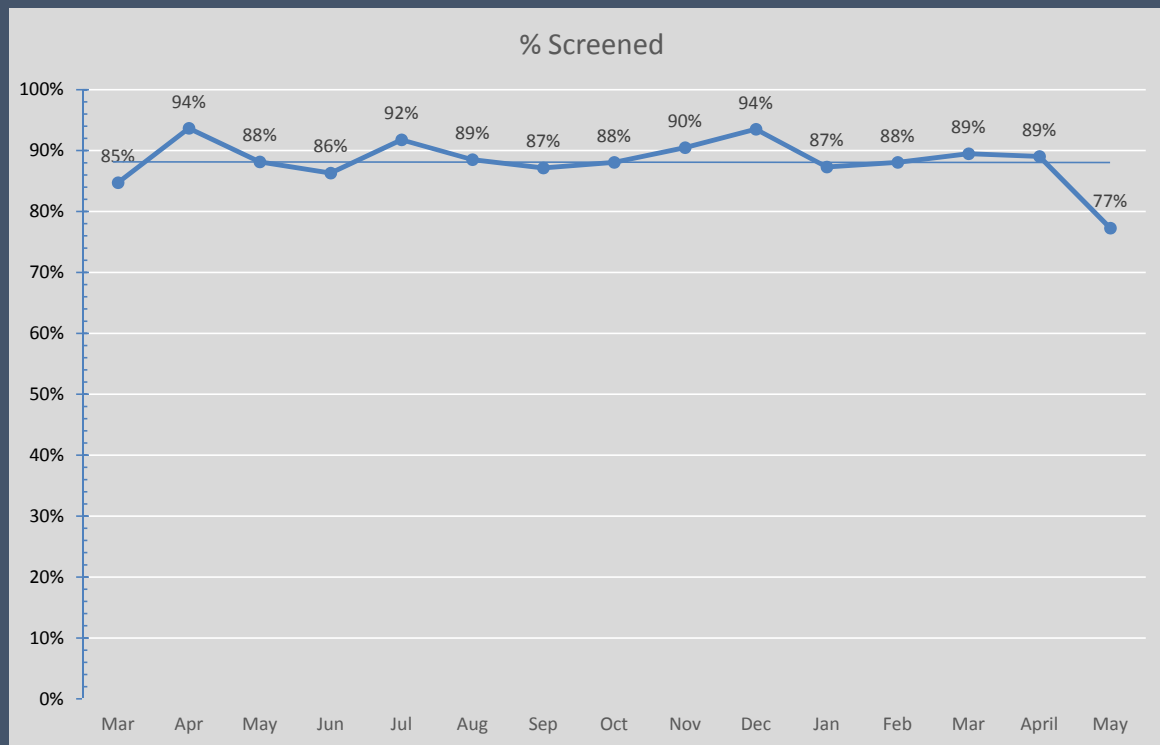
Shift = At least 6 consecutive data points above the median\* (skip values that fall on the median)

Trend = At least 5 consecutive data points going up (if two in a row are the same value, only count one of the them toward the 5)

\*median = the middle value in a list of numbers (half of all percentages for the collaborative fall above the median and half fall below)

# SCREENING

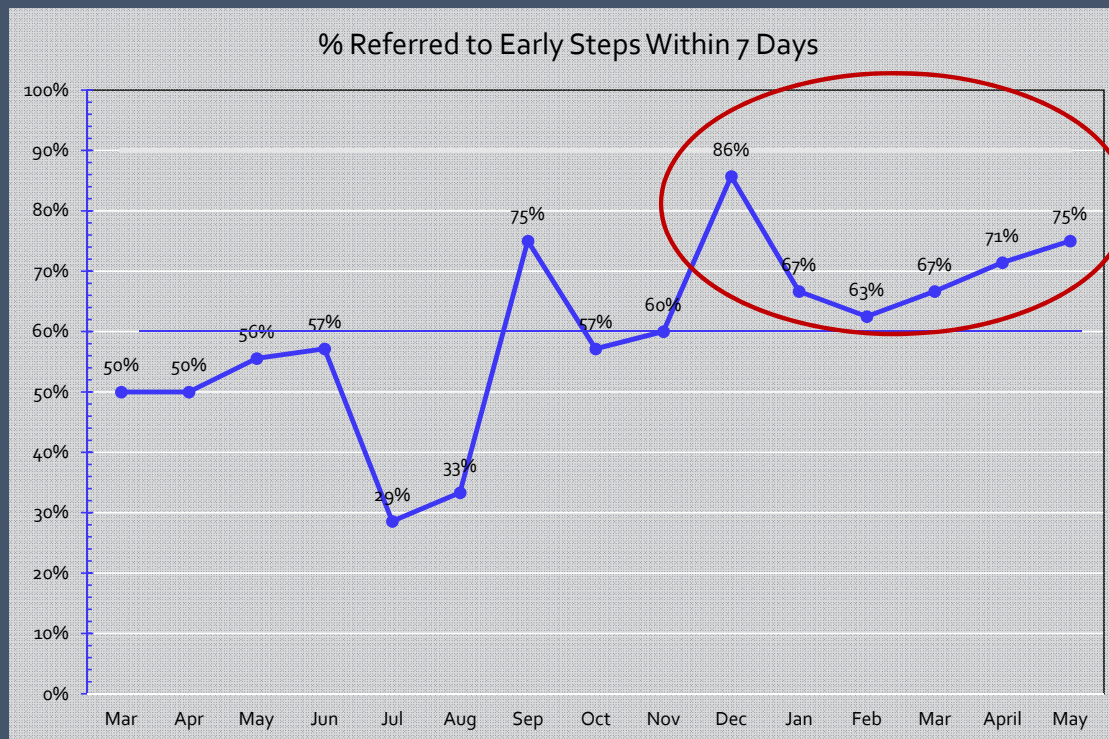
Goal: 90%  
Median: 88%



The state met or exceeded the goal four months and came close to meeting it most months.

# A REFERRAL TO EARLY STEPS IS OFFERED WITHIN SEVEN DAYS OF ASQ

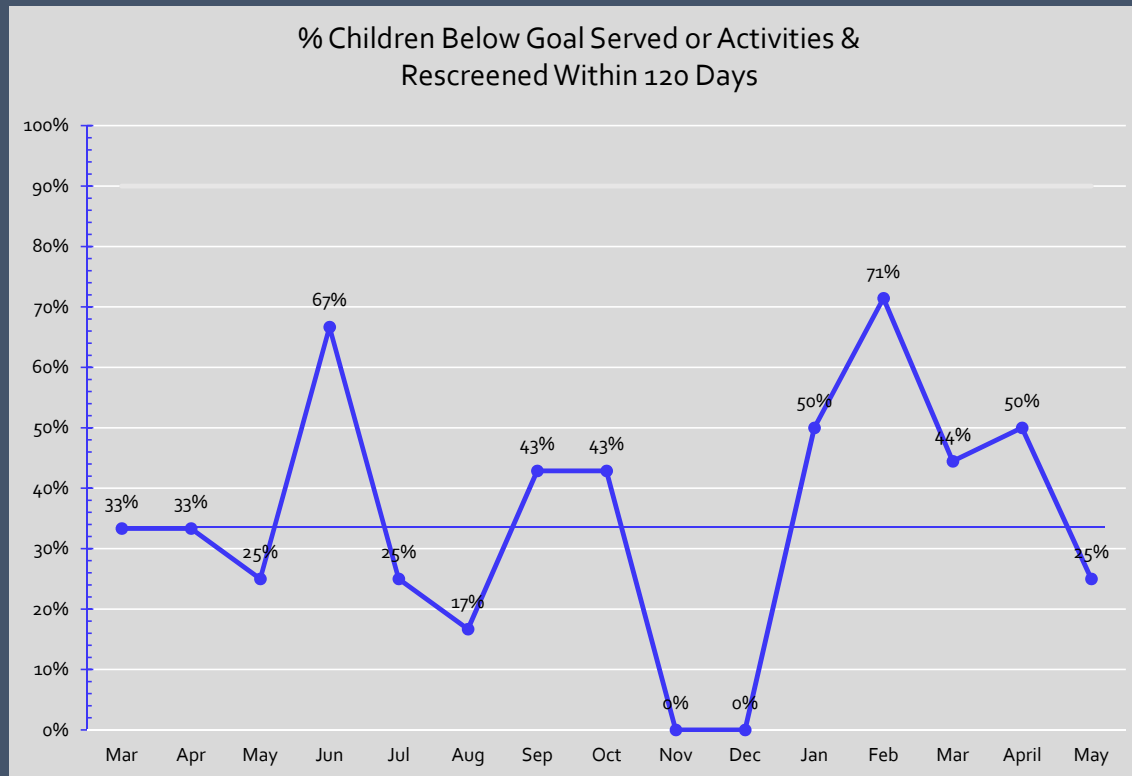
Goal: 90%  
Median: 60%



There is a shift in the data, which indicates the improvement is not likely due to chance.

# FOLLOW-UP FOR CHILDREN WITH ASQ SCORE(S) BELOW GOAL

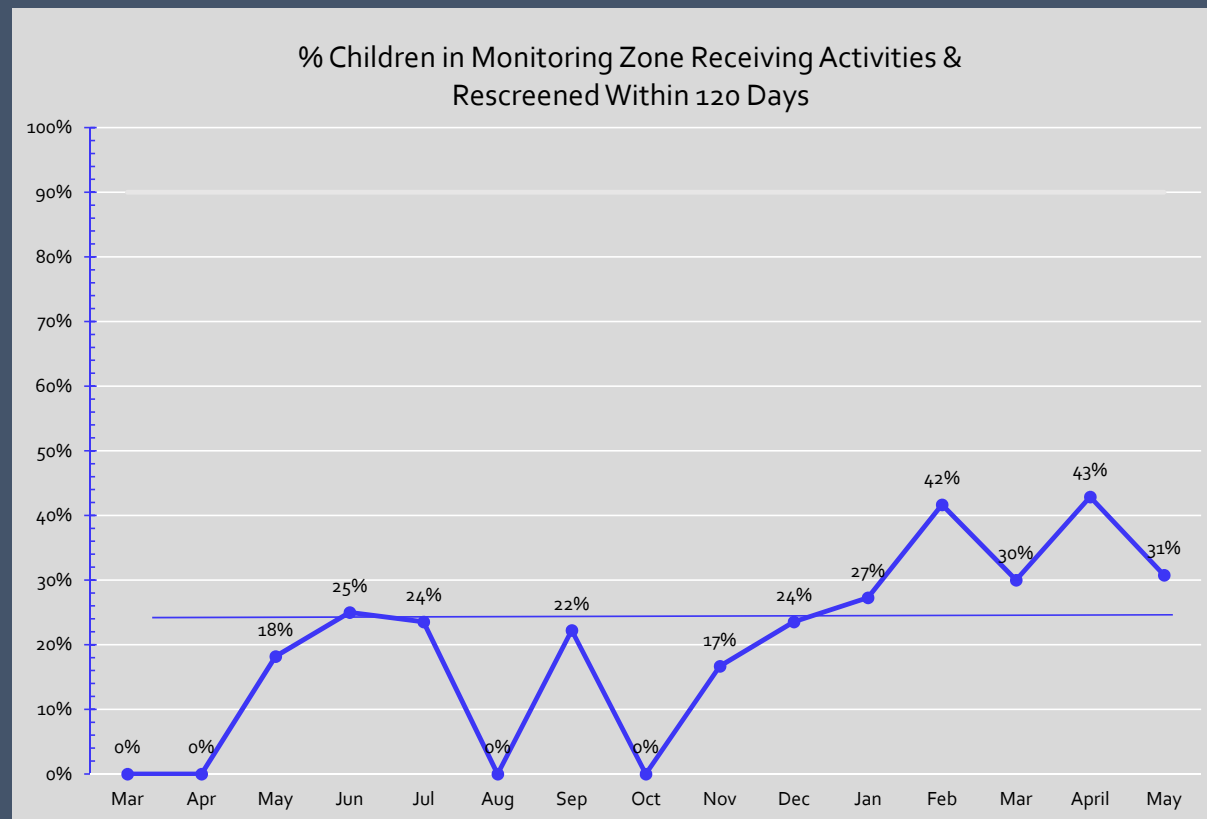
Goal: 90%  
Median: 33%



We almost saw a shift, but May data broke the run. This area will continue to need some improvement.

# FOLLOW-UP FOR CHILDREN WITH ASQ SCORE(S) IN THE MONITORING ZONE

Goal: 90%  
Median: 24%



One more month above the median would demonstrate a shift. Definitely showing progress in this area!

# HRSA PERFORMANCE MEASURES

Making progress!

FY 2017 (Oct 2016-Sept 2017): 81% of children were screened on time

FY 2018 (Oct 2017-May 2018\*): 86% of children were screened on time

Most sites have made progress in this area. Still looking for successful ideas to test? The following sites screened at least 90% of children on time through May this year: Alachua, Broward, Northeast FL, Manatee/Desoto/Hardee/Sarasota, and Southwest FL.

\*updated monthly

# HRSA PERFORMANCE MEASURES

Completed Developmental Referrals = The % of children with an ASQ score below the cut off who a) received individualized developmental support from a home visitor; b) were referred to early intervention services (Early Steps) and received an evaluation within 45 days; OR c) were referred to other community services who received services within 30 days

FY 2017 (Oct 2016-Sept 2017): 74% of children received appropriate follow-up

FY 2018 (Oct 2017-Mar 2018\*): 81% of children received appropriate follow-up

Looking for improvement ideas? While the #s for this measure are small (some sites had no children with scores below the cut off), five sites have 100% for this measure in the first half of FY2018: Escambia, Marion, North Central, Polk and Southwest FL.

\*only calculated semiannually



# ALACHUA MIECHV

Supporting Child Development Learning Collaborative

Wednesday, June 27, 2018

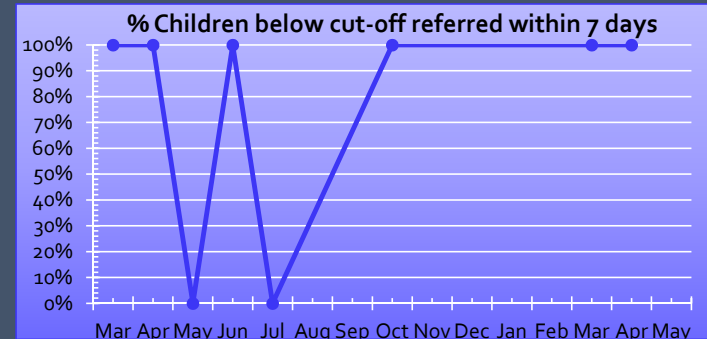
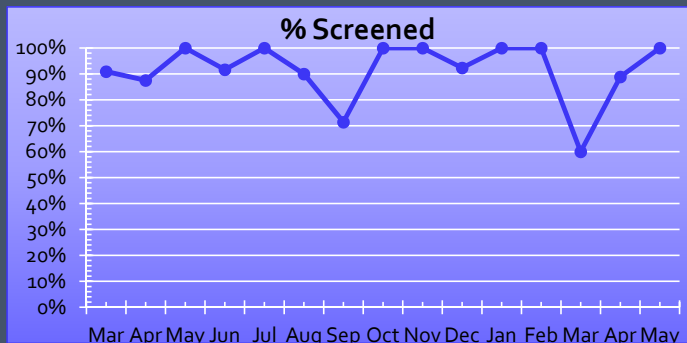


## WHAT DID YOU LEARN DURING YOUR PARTICIPATION IN THE LEARNING COLLABORATIVE?

- How to use Moveit with Early Steps
- How to create and adapt a tracking system for re-screens
- How to use pre and post tests and case scenarios for training

# WHAT DOES YOUR SITE'S DATA TELL YOU?

- Our data tells us that we are great at completing required ASQ's.
- We do fairly well at completing timely referrals.
- There is still room for us to improve in completing timely re-screens.



## WHAT ADVICE WOULD YOU GIVE TO A NEW SITE THAT NEEDS TO IMPROVE ON THIS TOPIC?

- Build a positive working relationship with Early Steps AND communicate with them regularly
- Make sure you know what you need to track before you start.
- Come talk to us first 😊

## HOW DID YOUR SITE IMPROVE AS A RESULT OF PARTICIPATING IN THE LEARNING COLLABORATIVE?

- The importance of linking these families to Early Steps quickly
- The need for an additional referral to Early Steps if the child scores low in a new area
- How to utilize internal tracking systems for compliance

## WHAT WILL YOUR SITE CONTINUE TO WORK ON WITHIN THIS TOPIC?

- We would like to create a data type planner format that has all the ASQ intervals and their time frames programmed in so that if we enter a few key data points from the child, the correct interval and time frame is identified for re-screens.

# PAT NCF MIECHV

SERVING BRADFORD, COLUMBIA, HAMILTON & PUTNAM COUNTIES

Supporting Child Development Learning Collaborative

Wednesday, June 27, 2018



# PAT NCF MIECHV

## What did we learn?

- Four (4) Aim statements
  - Successful – 3
  - Work in Progress – 1
- FLEXIBILITY IS KEY!
  - Office Relocation
  - Natural disasters
  - Change in team composition
  - Staff absence/Illness
  - Trainings/Conferences
  - Holidays
- Teamwork, Teamwork, Teamwork

## What does the data tell us?

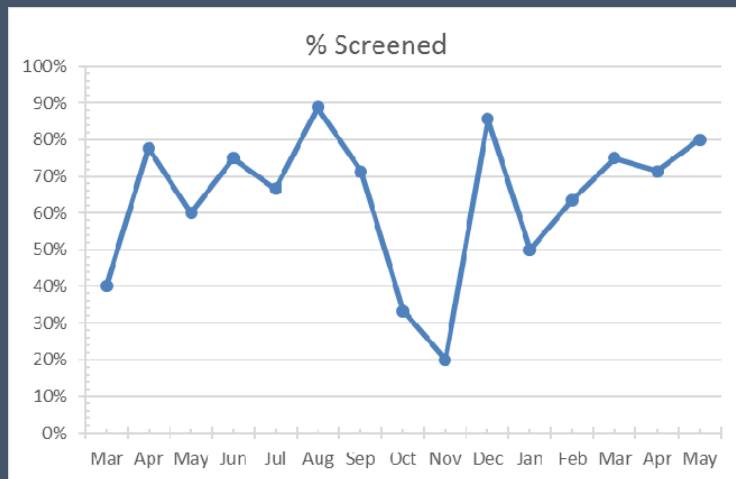
- Improvement was made
  - Inconsistent
- Strength
  - Surveillance Measures
  - Home Visits
- Weaknesses
  - Referrals
  - Follow-up
  - Rescreens



# PAT NCF MIECHV

## How did we improve?

- Percentage of screenings completed
- Number of referrals



## What will we continue to work on?

- Develop and refine our comprehensive tickler system to increase model fidelity.
  - MIECHV & PAT
    - Screenings
    - Referrals
    - Follow-up
    - Rescreens
- Maintain strengths while building weaknesses.

# PAT NCF MIECHV



## Advice to New Sites

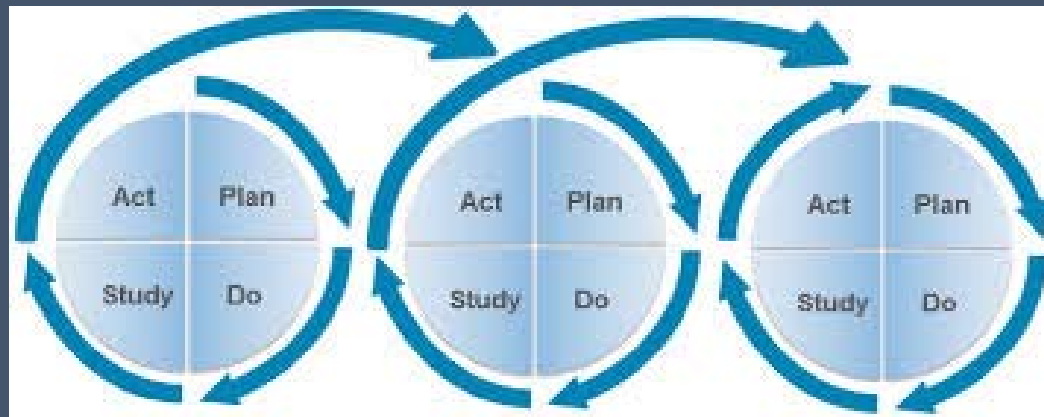
- *When life gets you down, do you wanna know what you've gotta do? Just keep swimming! ~Dory, Finding Nemo*
- *Giving up is for rookies. ~Phil, Hercules*
- *Oh yes, the past can hurt. But you can either run from it, or learn from it. ~Rafiki, Lion King*
- *Venture outside your comfort zone. The rewards are worth it. ~Rapunzel, Tangled*

# NURSE-FAMILY PARTNERSHIP BROWARD

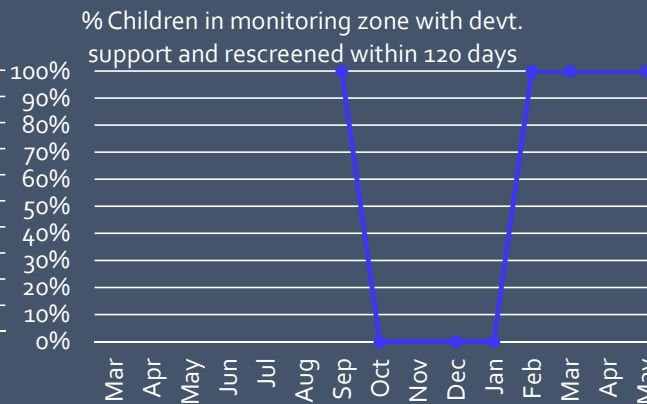
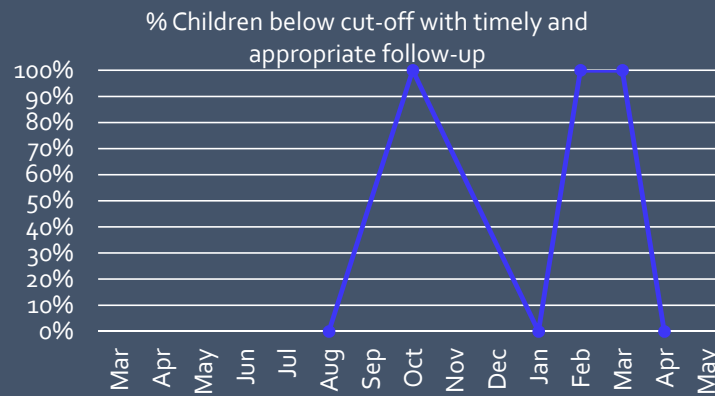
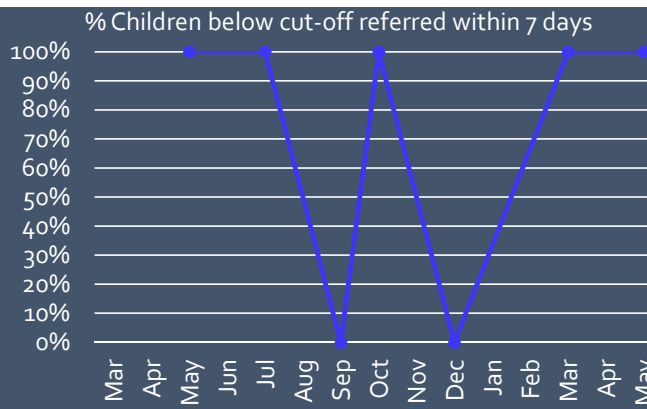
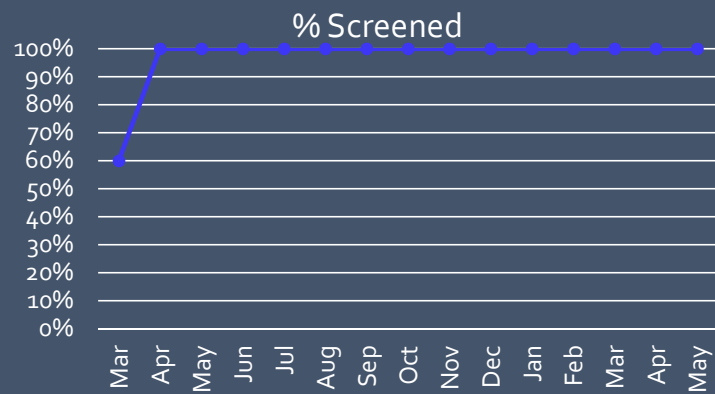
Supporting Child Development

## WHAT WE LEARNED

- We learned that we needed to take a proactive role in tracking families that required a rescreen.
- We also learned that we needed to be more descriptive when describing the developmental activities that we do with the families in their homes.

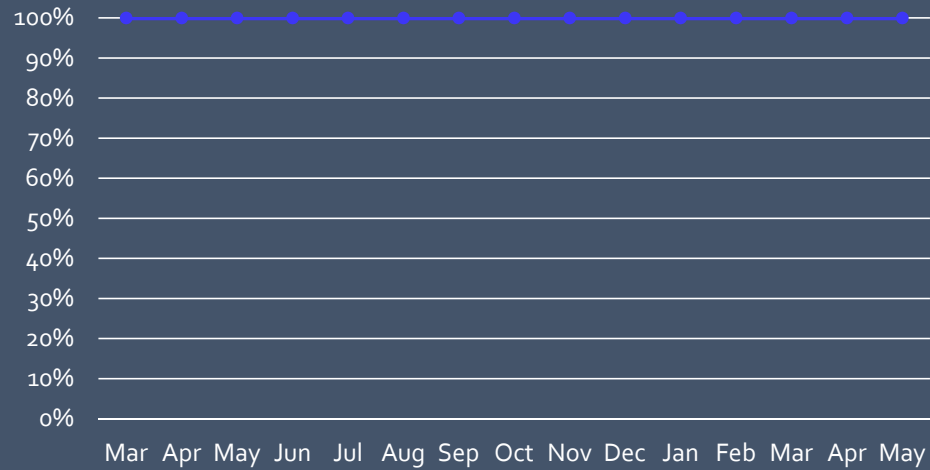


# SITE DATA

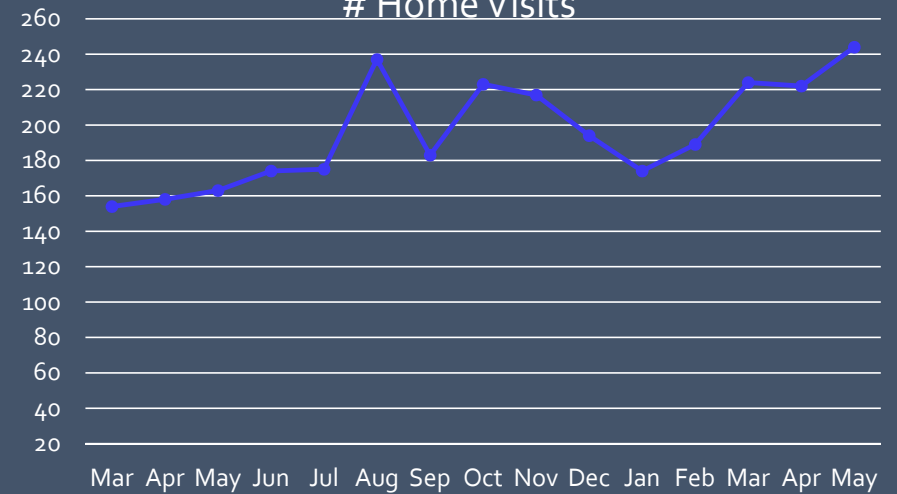


## SITE DATA cont.

% Home visits in which parents are asked about concerns



# Home Visits



## ADVICE TO NEW SITES



- Involve the whole team in your CQI efforts.
- Be proactive in tracking results
- Discuss rescreens during case conference, team meetings and during supervision

# IMPROVEMENT AS A RESULT OF PARTICIPATING IN THE LEARNING COLLABORATIVE?

## Site Improvements

- We improved a tracker for rescreens.
- We improved in our description of the development activities.

## What will your site continue to work on within this topic?

- We will continue to track the rescreens and monitor the description of the developmental activities.





# HILLSBOROUGH NFP

Supporting Child Development Learning Collaborative

**REACHUP**  
where there's a will, we are the way



# TAKEAWAYS:

- All staff should be the trained on the process
- Directions should be detailed and specific to avoid confusion
- Don't be afraid to ask questions of your data leaders 😊
- Expect to see a need for improvement
- Steal shamelessly and use other innovative ideas that are successes
- Our data told us we needed a different strategy for f/u referrals and rescreens
- Run the reports monthly
- Recognize that there will always be missing data for a variety of reasons

## GOING FORWARD: NEXT STEPS

- Hillsborough NFP met their AIM of >80 % completion rate for 10 month and 18 month ASQ's
- Excel spreadsheet for all 10 month and 18 month ASQ's
- Run performance measurement reports monthly
- Include the Data Coordinator in the process
- Our next CQI project is looking at Referrals to Enrollment percentages
- Improving the completion rates of the postpartum EDPS
- Using the spreadsheet to remind the NHV's
- Improve referrals to Early Steps and f/u rescreens



**STEP UP**  
**SUNCOAST**

***Inspiring Hope. Improving Lives.  
Strengthening Communities.***

## WHAT DID YOU LEARN DURING YOUR PARTICIPATION IN THE LEARNING COLLABORATIVE?

- How to utilize the developmental screening more effectively.
- Staff now feel better equipped in planning visits to address monitoring zone areas.
- Our team has a better understanding of Early Steps services and processes. This collaborative has greatly enhanced our communication and ability to service the families.

## WHAT DOES YOUR SITE'S DATA TELL YOU?

- Our data reflects a strength in completing the appropriate ASQ's in a timely manner.
- Our data also revealed that more attention to timely rescreens was needed.
- We were also able to fine tune our documentation of activities and a child's progression.

## WHAT ADVICE WOULD YOU GIVE A NEW SITE THAT NEEDS TO IMPROVE ON THIS TOPIC?

- Try to be patient as this was a steady process with a learning curve.
- Utilizing tickler systems were very helpful to ensure timely completion.
- Modifying the Home visit record form to allow a consistent space for home visitors and data staff to document progress.

## HOW DID YOUR SITE IMPROVE AS A RESULT OF PARTICIPATING IN LEARNING COLLABORATIVE?

- Our site has a better understanding of the processes, and services surrounding the developmental screening.



## WHAT WILL YOUR SITE CONTINUE TO WORK ON WITHIN THIS TOPIC?

- We will continue to work on completing rescreen ASQ's at the next interval and more thoroughly documenting activities to reflect the child's progress.

# HEALTHY FAMILIES ESCAMBIA

Supporting Child Development Learning Collaborative Final Report

# WHAT WE LEARNED AND WHAT THE DATA SAYS

- The importance of collaborating with other agencies to better serve our families
- Everyone has their own style for delivery of ASQs
- The importance of regularly reviewing guidance and policies
- The work we do doesn't always show up in the data
- Our numbers decreased during the last few months
- We must diligently pay attention to due dates and track for rescreens

## ADVICE FROM OUR EXPERIENCE

- Be sure to be familiar with policies, standards and guidance from the funders
- Provide training on how you want staff to administer and record ASQs and their results
- Keep your due dates close by, review them weekly. If you have any issues reach out for help. Connect with a co-worker to see what they are doing to keep up with ASQs.

# IMPROVEMENTS AND PLANS

- We did learn more about best practice and what we should be doing to ensure families are best served.
- We gained a better understanding of the rescreening.
- More ASQs were completed in a timely manner.
- Keep running reports to keep track of upcoming rescreens
- Our data shows a decrease in the last few months. We need to dig in and see why. We can only improve when we are aware of our shortcomings.
- Talk to each other about new ideas.

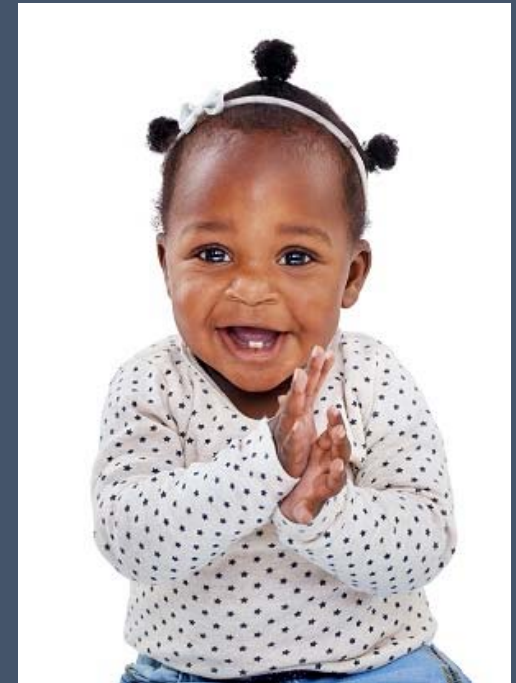
# GADSDEN COUNTY NFP

Supporting Child Development Learning Collaborative

March 2017- May 2018

## WHAT DID WE LEARN?

- It is important to plan ahead so that the screening process can be done correctly.
- Develop a tickler system to ensure assessments are completed on time.
- Continue the successful processes used in Developmental Surveillance, and make adjustments to the challenging areas.



## ADVICE FOR OTHER SITES

- Boost Teamwork efforts.
- Be sure that nurses are appropriately trained to properly complete assessments.
- Increasing family engagement provides more opportunities to address parent concerns.
- Analyze data on a monthly basis.
- Make small changes as you go.





# HOW WILL WE CONTINUE TO USE WHAT WE HAVE LEARNED?

- Strengthen relationships with our community partners.
- Continue Individual and Group Trainings.
- Continue to use data to improve our efforts.



# MIAMI-DADE NFP

PDSA CONCLUSION JUNE 2018

*Adriana Hurley*

# SUPPORTING CHILD DEVELOPMENT LEARNING COLLABORATIVE

Our Main goal was to make timely referrals to Early Steps for the children who scored below the cut-off on the ASQ.

What did we learn?

1) It takes time to change behavioral patterns in the team. Having a 90-day project aim allowed the team to realize where the inconsistencies were and the importance of making a timely referral. We were able to come up with a standard plan of action.

2) What does your site's data tell you?

We had inconsistent improvement but remained below the 90% goal for 11 months. However, our timely referral rate was 100% in May.

The inconsistent improvement from the team generated more questions. Are the ASQ assessments accurate? Does the staff need support on the topic?

# SUPPORTING CHILD DEVELOPMENT LEARNING COLLABORATIVE

3.) What advice would you give to a new site that needs to improve on this topic?

Consistency in administration and follow up is as important as the training itself.

4.) How did your site improve as a result of participating in the Learning Collaborative?

Even though it took some time to get everybody on the same page, I can see how consistency of expectations and follow up make a difference in the way the team behaves.

What will your site continue to work on within this topic?

We are having ASQ review on July 27, 2018 and will continue to refer within 7 days consistently.

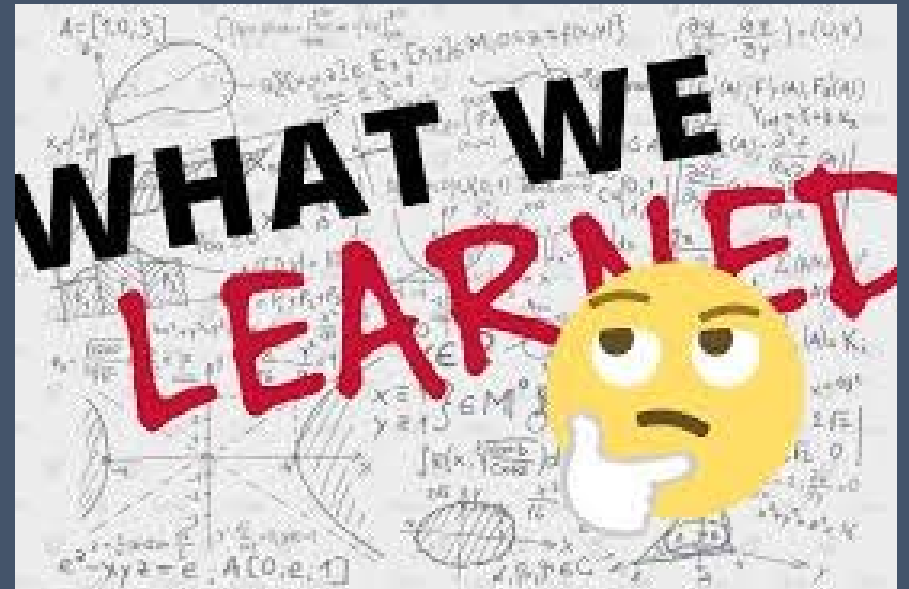
# NORTHEAST FL NFP

Serving Duval, Baker and Clay County



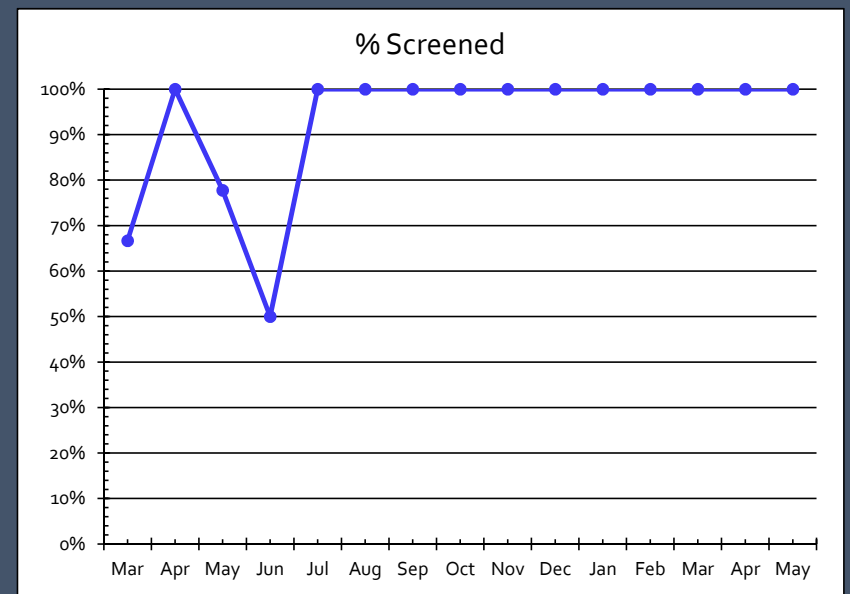
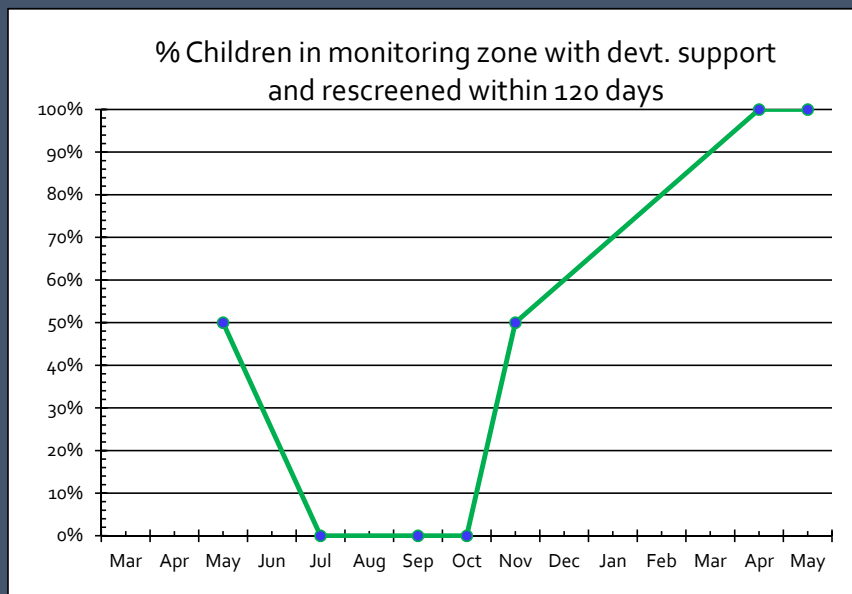
# WHAT DID WE LEARN?

- To only complete ASQs within appropriate timeframes
- To Rescreen using the next interval
- To Document accurately
- What's the function (WTF)



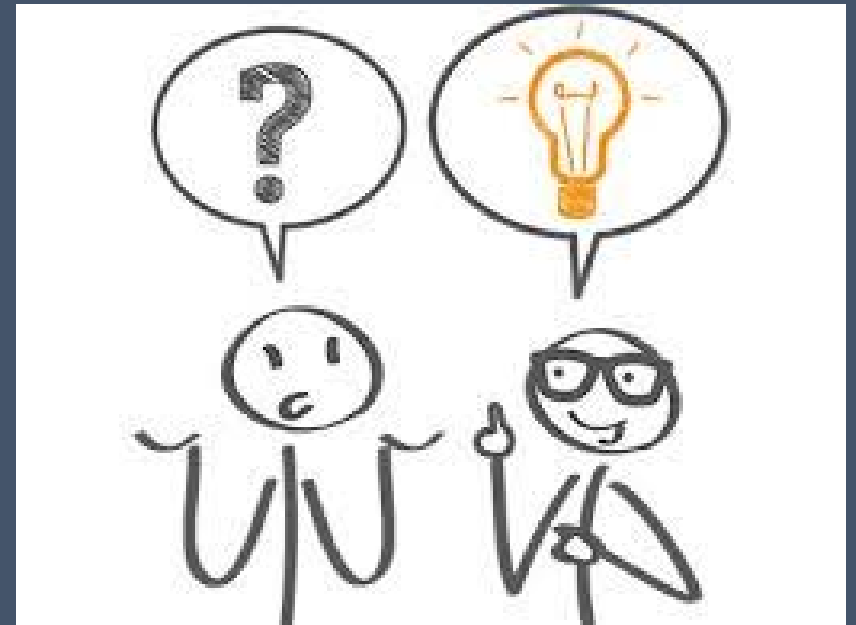
# WHAT OUR DATA TELLS US

Our tickler system works



# ADVICE FOR SITES TO IMPROVE IN THIS TOPIC

- Start small
- Create a plain and simple tickler system
- Review and analyze ALL of your data regularly
- Allow all team members to have access to the tickler
- Implement the protocol for all ASQs screen
- Get the entire team on the same page





## HOW WE IMPROVED

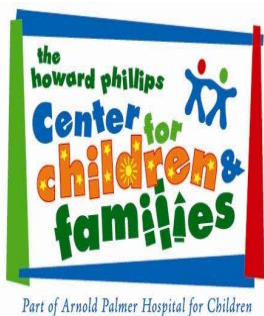
- Assured all staff was trained
- Added the ASQs required by NFP model
- Utilized the tickler system to complete ASQ screens 100% of the time in 13 out of 15 months
- Added Rescreens to the tickler in the final 3 months of the SCD CQI



# WHAT WE WILL CONTINUE TO DO ON THIS TOPIC



- Our tickler system has become a part of the way we function
- An ASQ-3 policy has been updated but not yet finalized



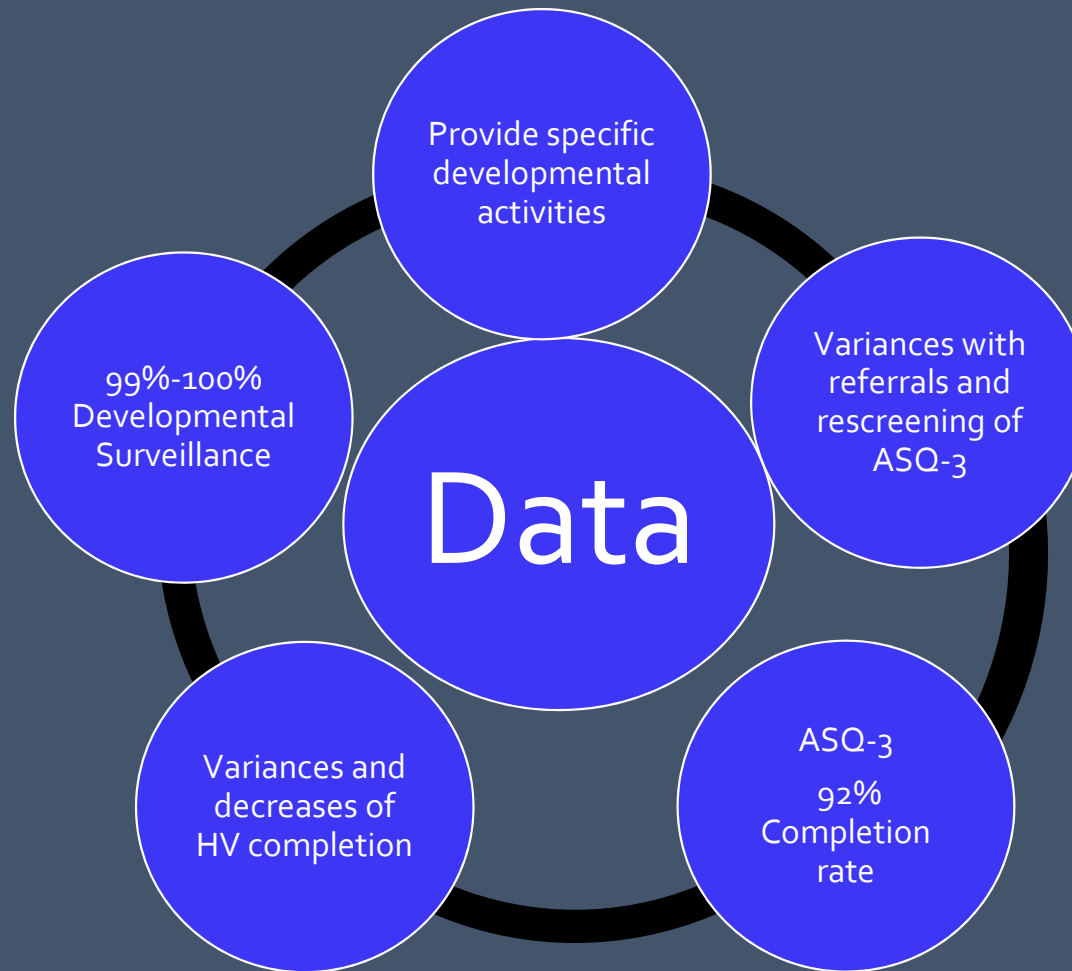
# Healthy Families Orange



# LESSONS LEARNED



- Home visiting programs significantly impacts early detection of developmental concerns , identifies children with developmental delays, and links families with appropriate resources
- Home visitors gain knowledge on developmental surveillance and follow up with parents in a strength based manner to address behavioral or developmental concerns.
- Strategies to empower parents to take a preventive approach and seek help for their child or children.
- Utilizing the ASQ-3 as a tool to support and educate parents on child development.
- MIECHV Guidance on SCD
- Importance of having a reliable and effective system for referrals, follow up on suspected delays and coordinate of services.
- Home visitors gained a comprehensive knowledge on Early Steps services and the referral process.

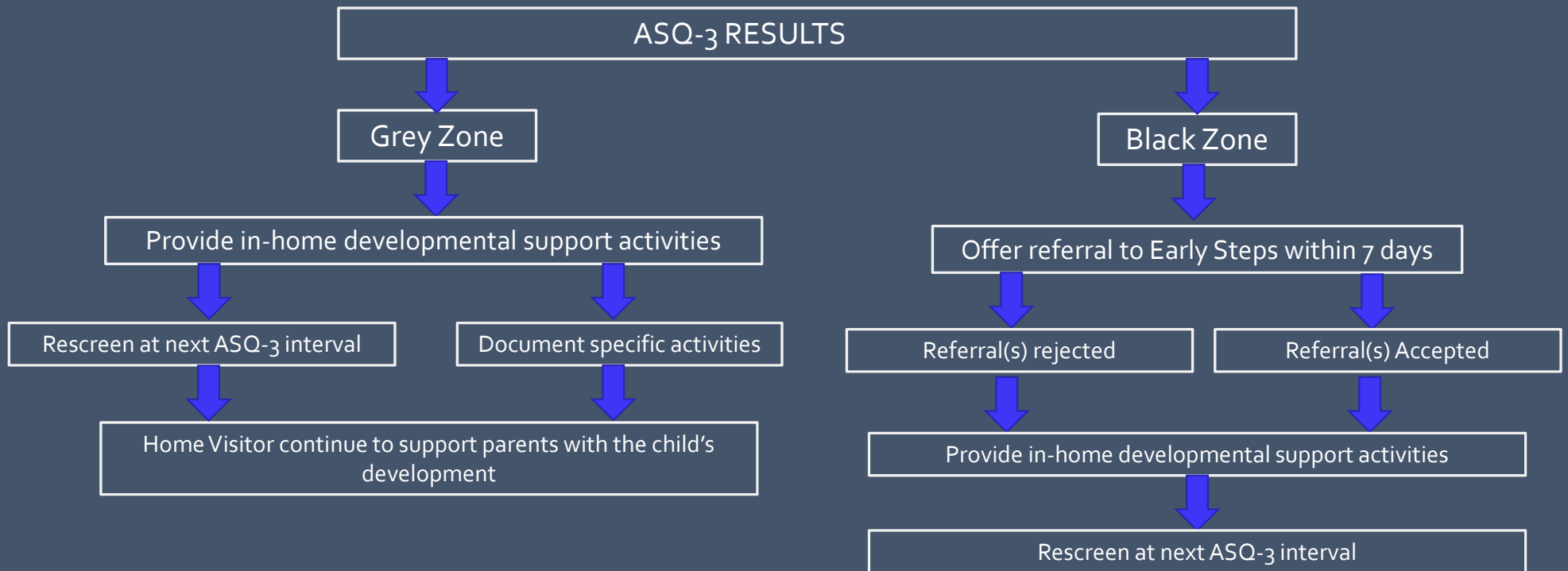


# SITE SCD IMPROVEMENTS

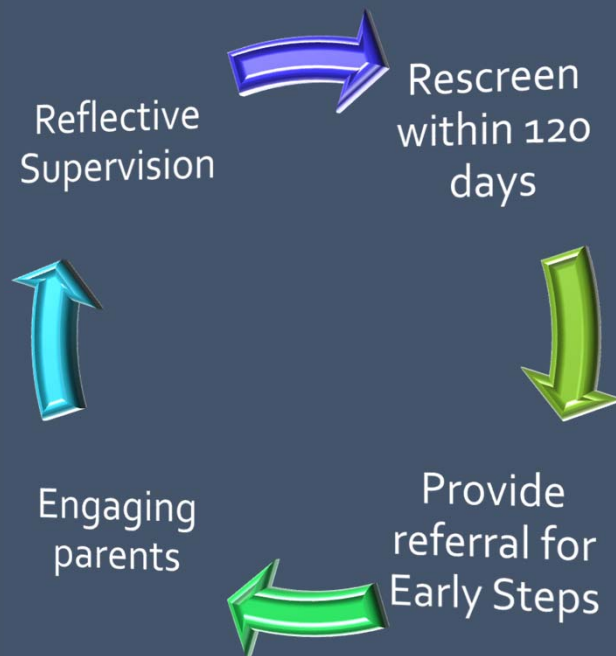
- Better understanding of the MIECHV ASQ-3 Guidance Results and Follow up.
- Documentation of specific in-home developmental activities and follow up with parents, based on outcome of ASQ-3.
- Implementation of a reliable effective system for referrals, follow up on suspected delays and coordinate services.



# SCD DECISION TREE



# CONTINUOUS IMPROVEMENT CYCLE







PINELLAS PAT+

# WHAT WE LEARNED

- Our ASQ screening rates vary from month-to-month.
  - Our average number of screenings per month is 5-6. One missed screen greatly affects the percentage.
  - Most missed screenings occur when the family falls off the radar during the window.
  - Missed screenings were across all staff members and not an individual problem.
- By creating a tickler system to remind staff that an ASQ window is open, we were able to increase the probability of an on-time screening. (This is now also used for other screenings such as IPV and depression.)
- Once an ASQ screening window has opened, staff are encouraged to screen early within that window – just in case we lose touch with the family.
- We ask parents about developmental concerns regularly (99-100% each month)

# HOW WE BENEFITTED

- Screening rates, on a whole, are higher now than at the beginning of this Learning Collaborative.
  - First 7 months: 24 of 35 children were screened (68.5%)
  - Last 8 months: 36 of 41 children were screened (87.8%)
  - Four months were 100% 😊
- Staff are more familiar with Early Steps and provided services.
- Staff learned the importance of documenting specific PAT developmental activities when a child is in the gray area.



# OUR WORK CONTINUES

- Honing the tickler process for ASQ, IPV and depression screenings
- Ensuring re-screens are completed within the required timeframe
- Making sure children are referred in a timely manner
- Strengthening our relationship with Early Steps locally





# POLK NURSE-FAMILY PARTNERSHIP

Supporting Child Development Learning Collaborative 2018



Florida  
Maternal  
Infant &  
Early  
Childhood  
Home  
Visiting  
Initiative

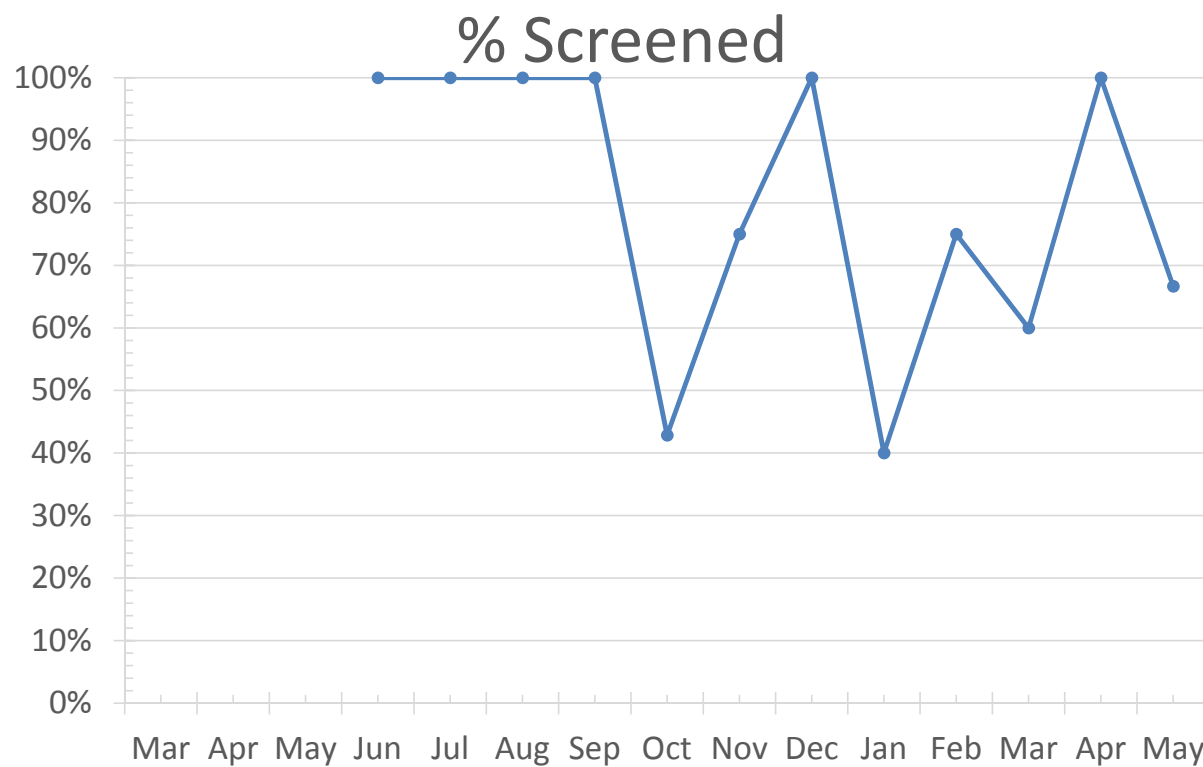
This project is/was supported by the Health Resources and Service Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number X10MC26478, Maternal, Infant and Early Childhood Home Visiting Program \$10,937,600. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsement be inferred by HRSA, HHS, or the U.S. Government.

# WHAT WE LEARNED

- Importance of establishing and maintaining a relationship with the local Early Steps providers
- A thorough understanding of the Early Steps referral and intake process
- Importance of training on the use of the ASQ-3 screening tools
- How effectively role playing and peer shadowing of ASQ-3 screenings can support Nurse Home Visitors during the learning process
- Creating simple tickler systems can improve data outcomes

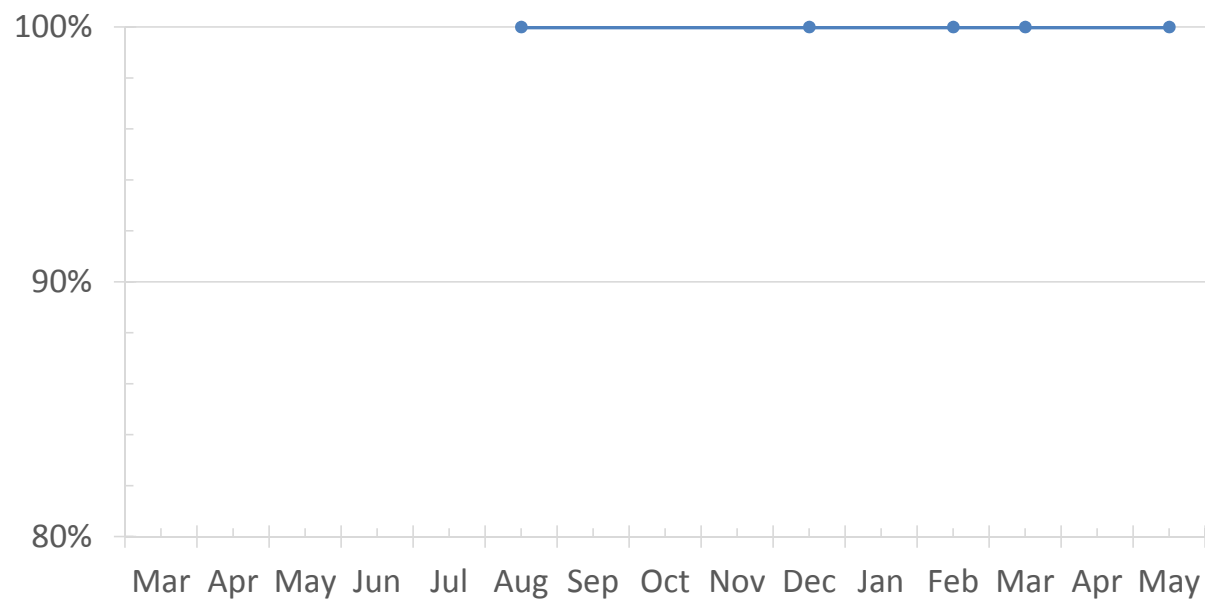


# DATA



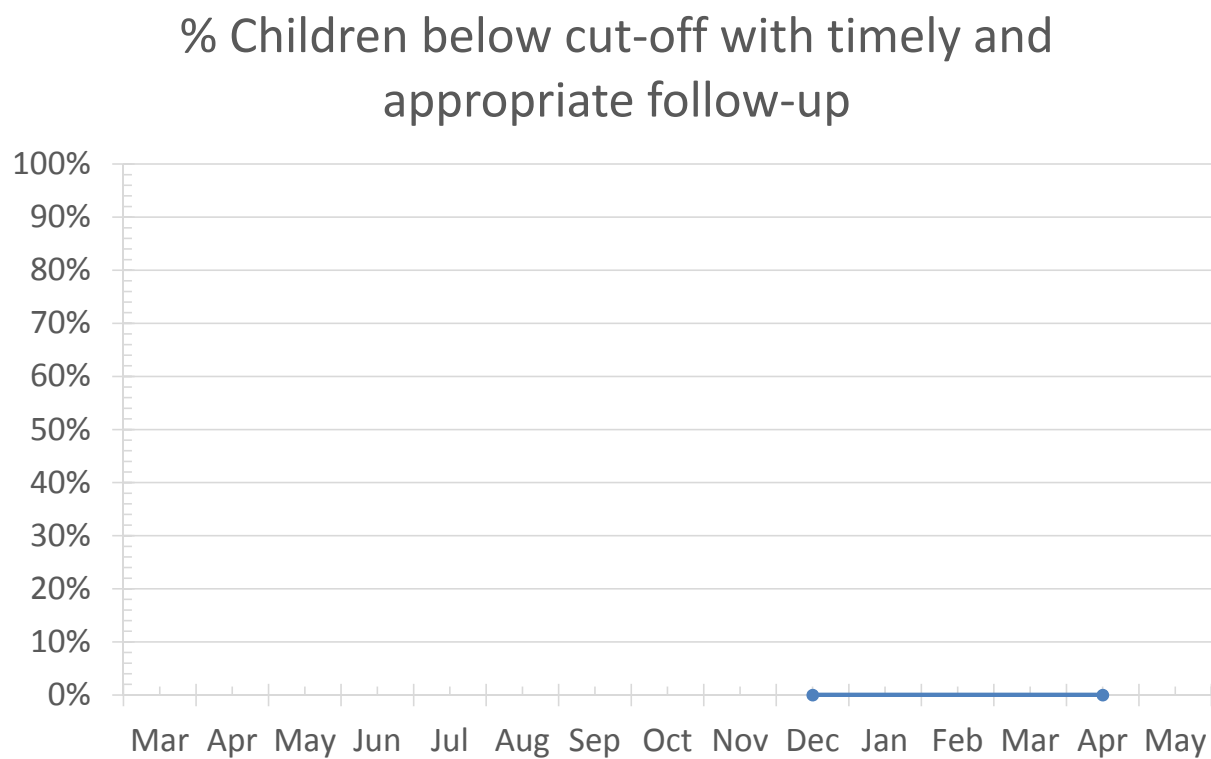
# DATA

% Children below cut-off referred  
within 7 days



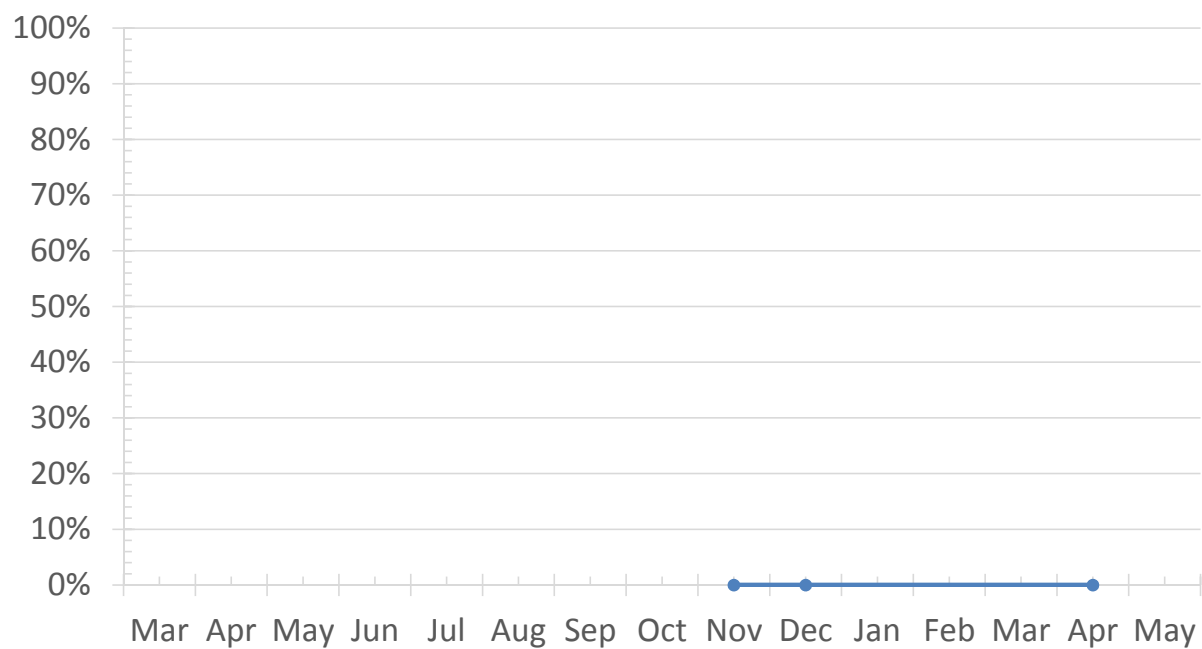


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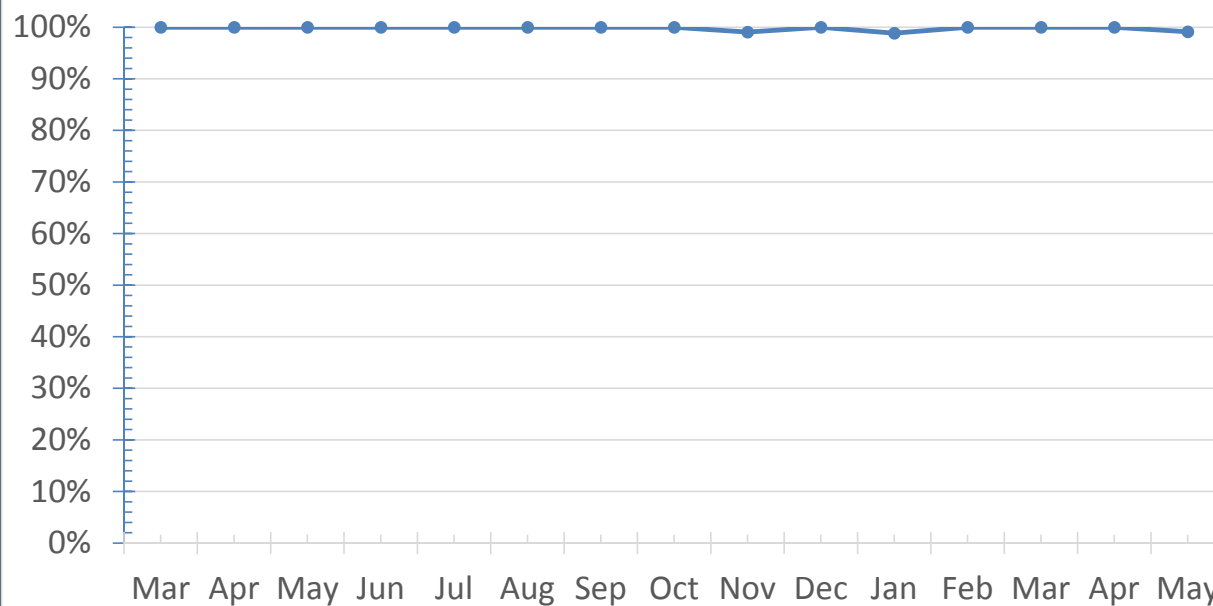
# DATA

% Children in monitoring zone with devt.  
support and rescreened within 120 days

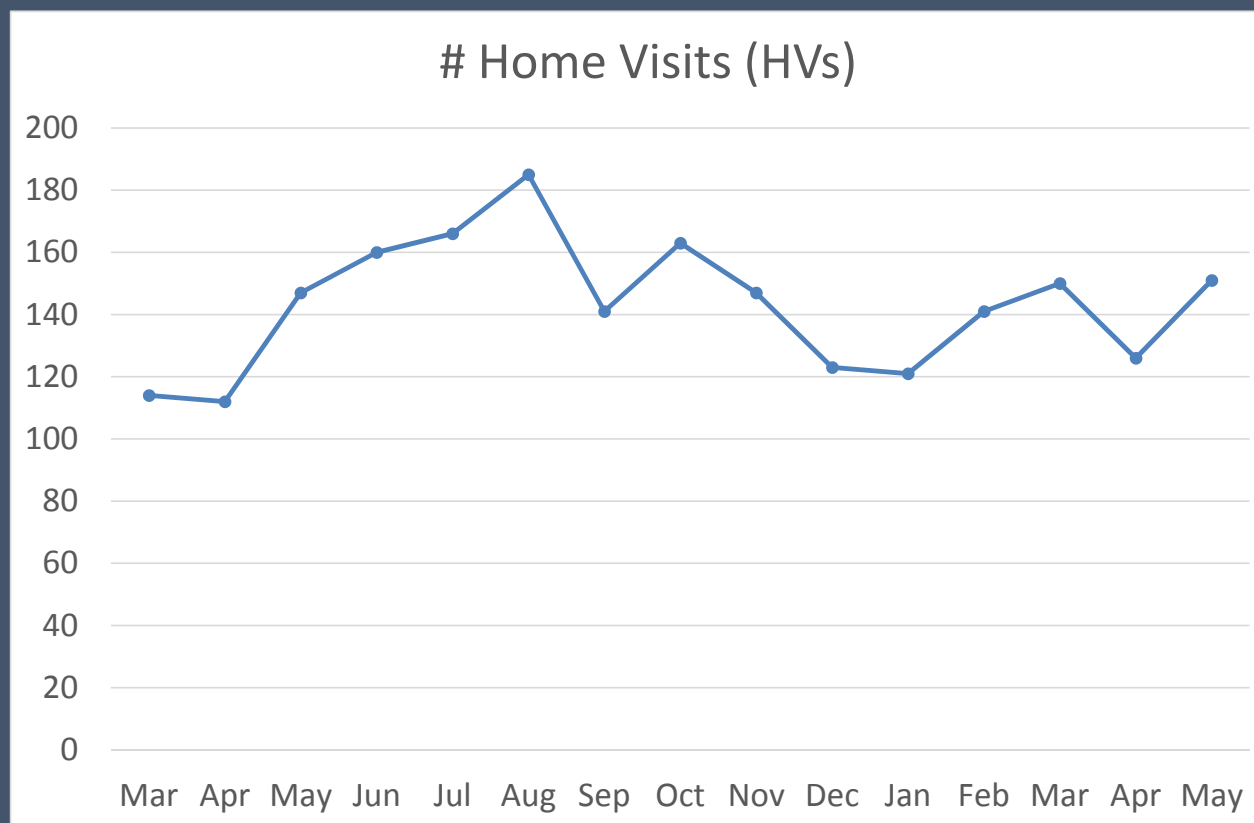


# DATA

% Home visits in which parents are asked about concerns



# DATA



# ADVICE FOR NEW SITES



- Establish a referral system/strategy with Early Steps early and meet with them regularly. Develop a good understanding of what the referral process is for that agency, and follow-up, even when everything seems to be working.
- Do mock ASQ-3 screenings during team meetings and take them seriously. Unforeseen questions and confusions will come up and better to have them come up in a mock setting than in the field. This also will increase Nurses Home Visitors comfort with the screening tools.

# SITE IMPROVEMENTS

- Polk NFP had good success with overall screening rates. The Nurse Supervisor and Data Entry Specialist regularly discussed due dates with the nurses during reflection and team meetings. Most of the drops in screening rates were due to disengaged clients rather than missed screening windows.
- All nurses verbalized an increased comfort with the screening tool and the referral and intervention process.
- The developmental surveillance question is being asked on a consistent basis.
- An ongoing relationship with local Early Steps agency has been formed.



# CONTINUOUS WORK



- Work with clients to actually accept services offered by Early Steps once they have been referred
- Work to refine our tickler system process to continue to assure that screening is done within the appropriate window as well as referrals for children whose screen shows the need for intervention and referrals.

# SOUTHWEST FLORIDA NFP

Elaine Schreiber, RN Regional Supervisor

Tina Longmire, RN CQI/Nurse Home Visitor



# OUR PROJECT RESULTS...

- 100% ASQ Completion Rate
- Partnership with local Early Steps Program
- “Daily Vroom” application & flashcards



# LEARNING COLLABORATIVE HIGHLIGHTS...

- State CQI provided structure, support & guidance
- Networking assisted with our processes
- Professional development during the Collaborative



## NEXT STEPS...

- Continue monitoring ASQ completion rate & referrals
- Maintain partnership with Early Steps
- Continue providing “Daily Vroom” resource
- Update nurses data collection tool as needed



*Well  
done!*



*Celebrate!*



*Woo  
hoo!*

THANK YOU!

