Community Asset Mapping Overview by County April 4, 2014

| County | CAM Focus | Facilitated Process Yes /No | LHJ Focus (UDS/ACES) | Page |
|-----------------|------------------------|-----------------------------|-------------------------|------|
| Benton-Franklin | Autism, then all CSHCN | У | both | 2 |
| Clark | All CSHCN | У | ACES | 4 |
| Island | Autism | У | ACES | 6 |
| Lewis | Autism | У | both | 7 |
| Pierce | Autism | n | ACES | 9 |
| Skagit | Autism | У | both | 10 |
| Snohomish | All CSHCN | У | ACES | 11 |
| Spokane | All CSHCN | У | both | 13 |
| Walla Walla | Autism | У | UDS | 14 |
| Yakima | Autism | n | both | 16 |
| | All CSHCN | n | | 18 |

Glossary:

- ACES- Adverse Childhood Experiences
- CAM Community Asset Mapping
- CSHCN Children with Special Health Care Needs
- LHJ Local Health Jurisdiction (e.g. local health department where the Children with Special Health Care Needs program is housed)
- UDS Universal Developmental Screening- promoting and connecting developmental screening efforts in all medical and community/early childhood programs to ensure all young children are screened for developmental delay

Benton-Franklin Counties

Name:

Vision/Mission:

- Initial: Establish coordinated and accessible systems for families, medical providers, schools and other service providers to ensure timely screening and assessment, a reliable diagnosis, and evidence-based services in their community for autism spectrum disorders (ASDs) and other developmental concerns.
- Current: Establish coordinated and accessible systems for families, medical providers, childcares, schools and other service providers to ensure universal screening, assessment and appropriate referral to early intervention and diagnosis.

Initial meeting: February 2011

Frequency of meetings: Currently reforming

Initial Priorities:

- Make navigating the system clearer by developing a "Road Map" to services for providers & families specific to Benton and Franklin counties
- Address the lack of access to local Neurodevelopmental pediatricians by recruiting a Neurodevelopmental pediatrician for the community
- Identify regular training venues.

Current priorities:

- Increase provider knowledge and implementation of UDS in practice
- Increase parents awareness of developmental milestones and Medical Home
- Increase use of UDS by childcare providers and other service providers
- Increase primary care provider awareness of Medical Home roles and resources.

Funding Source: In-kind, DOH funding for initial CAM and then Learn the Signs, Act Early (LTSAE) (historical), MHLN team stipend, and MCH Block Grant.

Activities:

These are overlapping activities carried out by Local Health District staff who were involved in the original CAM coalition and are reforming a new effort that combines with their Universal Developmental Screening efforts and Medical Home team outreach:

• Learn the Signs. Act Early (LTSAE) outreach, including some sessions for Hispanic childcare providers and the Migrant Council (completed 2012)

- Collaboration with Great MINDs Developmental Screening training to primary care clinicians. Helping WA Chapter American Academy of Pediatrics and Dept of Health identify and recruit interested primary care providers for regional training spring 2014
- Co-sponsored Grand Rounds presentation at local hospital by Dr. Charles Cowen, Seattle Children's Medical Center, on "Issues in Autism- Early Diagnosis and Community Involvement" July 2011
- Milestone Moments material distribution
- Medical Home Brochure distribution
- STARS class for child care providers on UDS
- Distribute Child Health Notes quarterly to all providers who see children in their practice.

Products:

Universal Developmental Screening Awareness and use surveys developed and distributed to child care and medical providers.

We have not created any new materials as of yet, we are utilizing the following resources and getting them to our community:

- ESIT materials: Baby Can't Wait tri-fold and wheel
- CDC materials: Learn the Signs. Act Early, flyer, Track your Child's
 Developmental Milestones, Milestones Moments, Early Childhood Milestone
 Map
- Updated Child Health Notes on our website
- Sharing WithinReach website as a link on our own websites
- American Academy of Pediatrics Screening Algorithm

Clark County

Name: Clark County CAM Work Group

Vision/Mission Statement and Related Goals: Enhanced early identification, and connection to services, for infants and young children with potential or actual developmental delay.

Another way to state our vision is: "Clark County has coordinated and broadly utilized developmental services that include routine developmental screenings that start during the first year of a child's life."

Goals include:

- 1. Increase community awareness of child development and developmental milestones
- 2. Enhance awareness of where to refer infants and children for developmental screening, evaluation and/or therapy
- 3. Improve coordination of developmental services and assure systems are in place to provide feedback to health home/health care provider
- 4. Align our efforts with the ESIT (Early Support for Infants and Toddlers) lead-agency, ESD 112, and with the Clark County Inter-agency Coordinating Council (CCICC)

Initial meeting: Community CAM Meeting: June 2013, following several months of the CAM workgroup convening to determine assets and needs in Clark County.

Frequency of meetings: One-two times per month until early 2014. Currently working with CCICC and Child Find (both of which convene monthly), and ESIT, to coordinate distribution of CAM *products*, and to move forward the efforts to achieve goals listed above. Child Find is a committee of Early Intervention and other representatives from schools, health care provider offices, daycares, etc., that gives input to the ESIT lead- agency, ESD 112, r/t finding infants and children who would benefit from the ESIT program.

Initial priorities:

- 1. Make information related to developmental milestones broadly available in Clark County through distribution of the CDC's *Learn the Signs. Act Early* brochure titled, Track Your Child's Developmental Milestones
- **2.** Develop and distribute a roadmap of Clark County developmental services.

Funding sources: Annual Honorarium from Medical Home Partnership Project, Great MINDs funding in first year; the Maternal Child Health Block Grant (MCHBG).

Activities: Distribution of the following: 1) Roadmap to Developmental Services, 2) CSHCN Community Resource Flip-guide (revised3/2014), 3) CDC's *Learn the Signs. Act Early,* Track Your Child's Developmental Milestones brochure and 4) Clark County Public Health's Children with Special Health Care Needs (CSHCN) Program brochure to:

- Pediatric and other health care provider offices
- Clark County Interagency Coordinating Council (CCICC) members
- Child Find Committee
- ESIT and ESIT providers (Innovative Services NW, Clark College Early Intervention, ESD112)
- Early Head Start/Head Start providers (EOCF and ESD 112)
- WIC
- Childcare Centers / Providers
- School District Early Childhood Centers; school nurses; GRADS programs (pregnant and parenting teen program)
- Family Birth Centers
- Pediatric Development Centers: Legacy, Providence and OHSU
- Children's Hospitals Peds case managers: Randall's and OHSU.

Products:

• Developmental and Early Intervention Services in Clark County-Brochure

We are utilizing the following resources and getting them to our community:

• CDC's Learn the Signs. Act Early, Track Your Child's Developmental Milestones brochure in English and Spanish.

Island County

Name: Island County Autism Taskforce

Vision/Mission Statement: none

Initial meeting: August 2010

Frequency of meetings: Quarterly, fourth Friday of month from 1-3pm.

Initial priorities:

- 1. Work with Seattle Children's Autism Clinic and other diagnostic centers to provide diagnostic services within the community to 'fast-track' the diagnostic process. This includes increased diagnostic capacity on Whidbey Island and improved bilateral communication and collaboration between local providers and diagnostic centers
- 2. Develop a Road map to Services for providers and families specific to Island County
- **3.** Increase collaboration and communication between providers.

Funding Source: In-kind, DOH funding for initial facilitated CAM meeting

Activities:

- 1) Networking and sharing of resources, challenges and successes between Early Intervention providers, schools, diagnostic centers, community providers and families of children with autism within Island County
- Supporting adults with autism through a possible work program supported by Skagit Valley College
- 3) Supporting a collaborative approach between the diagnostic team, schools, community providers, doctors and families
- 4) Providing a venue for transparency between providers and families.

Products:

- 1) Memorandum of Understanding between Birth to 3 providers, ABA providers, and families
- 2) School district guidelines for ABA providers to provide services within the classroom.

Lewis County

Name: Lewis County Autism Coalition

Vision Statement: Lewis County values and supports lifelong success for all individuals and families living with autism through access to quality education, recreation and employment resources.

Mission Statement: The Lewis County Autism Coalition is a catalyst for community action and partnerships that support families and advance success in school, work, and life for children on the autism spectrum.

Initial Meeting: February 16, 2010

Frequency of meetings: 4th Friday of every month

Initial Suggestions for Sustaining Efforts:

- 1. Use a subcommittee of ICC to continue efforts
- 2. Use existing dollars to fund a coordinator
- 3. Establish a community-based listserv
- 4. Consider establishing networked communication between other pilot sites.

Funding Source: Ongoing funding has come from the Foundation for Early Learning and community partners, including the Lewis County Developmental Disabilities Program, the United Way of Lewis County and TransAlta. The Autism Conference also generates its own funds, especially through its Annual Conference. A Community Access to Child Health (CATCH) grant from the American Academy of Pediatrics has funded the Behavioral Treatment program. Significant in-kind support also comes from Autism Coalition partners including the School District, Lewis County Special Education Coop, Centralia College, medical providers, Basics NW, Birth to Three, Parent to Parent, and others.

Activities:

The Lewis County Autism Coalition provides valuable support for families and children on the autism spectrum through activities such as:

- A support group for parents and caregivers that meets regularly and provides a safe place for sharing stories and challenges with other parents, caregivers, teachers and citizens who support each other. The roadmap created by the Lewis County Autism Coalition informs parents of the early signs of autism and how to connect with community resources that benefit their child and family.
- Summer Spectrum Program and Day Camp engages children on the autism spectrum,

from 3 to 14 years of age, and their parents. Children play and socialize with supervision, while parents listen to speakers on issues like sensory concerns, motorskills, and occupational needs. Two 2013 summer programs were held serving a couple dozen children and their families. Plans are set for a similar effort in 2014.

- Ongoing training for educators and health professionals is provided to increase their
 ability to recognize the early signs of autism, to learn of community resources and to
 make appropriate referrals. An **Annual Conference**, average attendance is 200
 professionals and families from the community, is held to increase public awareness and
 to inform parents and professionals of the latest research and best practices in the field.
 The 2014 conference is October 9-10, at Bethel Church in Chehalis.
- SMART (School-Medical Autism Review Team) engages school and medical professionals
 in a team setting to review a child's needs and to ensure appropriate services that can
 support their success in school and life.
- Behavioral Treatment services are provided to children 3 to 11 years of age with severe behaviors so that they may safely and successfully function within the mainstream of their family and school. Services are delivered through professionals in affiliation with Pope's Kids Place.
- The coalition utilizes its website (www.lcautism.org), social media (Facebook) and the
 mainstream media to inform the public about autism and community resources.
 Presentations are made before parent groups, service organizations and civic clubs.

Products:

- 1. Support group for parents and caregivers
- 2. Parent Roadmap for Autism Services in Lewis County
- **3.** Early Identification of Autism Provider Roadmap
- 4. Annual conference
- 5. Summer Spectrum Program and Day Camp
- **6.** SMART (School-Medical Autism Review Team)
- 7. Website www.lcautism.org and Facebook page.

Pierce County

Name: South Sound Autism Partnership

Vision/Mission Statement: The South Sound Autism Partnership is a collaboration between local agencies, organizations and community stakeholders with a vested interest in autism within the South Puget Sound area of Washington State. Our primary purpose is to promote access to services and improve the effectiveness of service delivery for individuals with ASD's.

Our goals:

- 1. Link and strengthen the existing resources in the South Puget Sound area that serve individuals with Autism Spectrum Disorders (ASD's) and their families
- 2. Identify the needs of individuals with ASD's and their families not currently being met and develop resources to meet those needs
- 3. Provide comprehensive education to individuals, families, and service providers regarding the support of individuals with ASD's throughout the lifespan
- 4. Identify individuals and families who are not currently being served or do not have access to existing resources.

Initial meeting: 2011

Frequency of meetings: monthly

Initial Priorities: unknown

Funding Source: Self

Activities:

 Resource and educational opportunities once or twice a year through mini-seminars or a conference.

Products:

Website: http://www.southsoundautism.org/

Skagit County

Name: Skagit County Autism Partnership (SCAP)

Vision Statement: Skagit County will have enhanced partnerships with providers in the community that will result in coordinated services for children with developmental disabilities, including autism spectrum disorders, and their families. Examples of providers in the community include school personnel, healthcare providers, and families.

Mission Statement: To identify the needs, make recommendations, and advocate for improving a coordinated countywide system in Skagit County that enhances the lives of individuals and families living with developmental disabilities, including autism spectrum disorders.

Initial meeting: May 2012

Frequency of meetings: Monthly

Initial priorities:

- Work collaboratively to establish an interdisciplinary community-based diagnostic and intervention program or system
- 2. Continue to enhance partnership and communication with medical providers.

Funding source: In-kind, DOH funding for initial CAM

Activities:

- Reciprocal Imitation Training (RIT) provided to parents and professionals by ASAP!
 Project (A grant through Wendy Stone Director of the READi lab at the University of Washington,) in April 2013 and March 2014
- Developed and facilitated a focus group meeting with medical practitioners in the Skagit Valley area to collect information on strengths and needs from the medical provider's perspective related to identification and services for children with Autism. A summary report was developed to help guide SCAP's ongoing activity created and shared in April 2013
- Developing partnership with medical residency program at Skagit Regional Hospital to improve early identification practices and referral process with clinic doctors
- Developing brief presentations to local medical clinics to increase collaboration and referral connections between medical and early intervention providers
- Expanding Skagit County Autism Partnership participants.

Products: none

Snohomish County

Name: Snohomish County Community Asset Mapping Coalition (preliminary name)

Vision/Mission Statement:

<u>Goal of the project:</u> To identify every child in Snohomish County who has a delay or disability in their development as early as possible.

<u>Goal of Steering Committee:</u> To host an event on June 23, 2014 that includes the voices of all aspects of our community, to identify the assets and begin to identify the gaps in our community related to developmental screening of young children (up to age 6), as well as a mapping or prioritization process. We intend to have already gathered the majority of the community's assets by the time of the event so the majority of our time together is spent on identification of gaps and prioritization.

In order to learn about our communities assets, we will access groups that currently exist, develop a variety of different types of surveys (professional, para professional and family) as well as face to face interviews/discussion groups.

Initial meeting: Steering Committee began meeting in January, 2014. Facilitated Community Stakeholders meeting will be June 23, 2014.

Frequency of meetings: Monthly

Initial Priorities: TBD June 23- but steering committee anticipates around areas of:

- Increase community awareness of child development and understanding the importance of all children getting early screening for developmental delays
- Increase number of children receiving developmental screenings and effective connection with Early Intervention assessment if needed.

Funding Source: Great MINDs grant funding from WA Dept of Health, in-kind

Activities:

 Develop broad-based Steering Committee with representation from key stakeholders, including community foundations and funders, and links to all populations, especially the most vulnerable

- Identify and review existing data for how many young children are in Snohomish County, when and how children are being identified with delays and helped into services
- Identify or conduct focus groups or surveys with a variety of providers who serve young children and families with young children.

Products:

• Surveys of families, health care providers and other service providers who care for young children in Snohomish (in process).

Spokane County

Name:

Vision/Mission Statement: To serve as the region's public health leader and partner to protect and improve the community's health.

Initial meeting: June 2013

Frequency of meetings: Quarterly

Initial priorities:

- 1. Increase community awareness of child development and understanding the importance of all children getting early screening for developmental delays
- 2. Increase number of children receiving developmental screenings.

Funding Source: blended sources, some MCH consolidated contract plus a small Providence Health Care Grant: \$10,000 which comes to us 3/14.

Activities:

- Applied for and received the Providence Health Care Grant
- Hiring Public Health Educator through Spokane Regional Health District to assist with implementation of UDS in our community
- Training on UDS conducted at the Early Childhood Conference, The Gift of Childhood, with early learning professionals in the community
- Information table at various community events sharing information
- Staying in contact with physician champions
- Updated Children with Special Health Care Needs and Infant Toddler Network websites.
- Sharing of information with the ARC, County Community Partners and School Districts, Head Start/ECEAP/EHS.

Products: We have not created any new products as of yet, we are utilizing the following resources and getting them to our community:

- ESIT materials: *Baby Can't Wait*, poster, tri-fold and placemat.
- CDC materials: Learn the Signs. Act Early, flyer, Track Your Child's.
 Developmental Milestones, Milestones Moments, Early Childhood Milestone
 Map, Autism Speaks.
- Updated Child Health Notes on our website.
- Sharing WithinReach website as a link on our own websites.

Walla Walla

Name: Walla Walla Autism Work Group

Vision/Mission Statement: none listed

Initial meeting: Feb 2010

Frequency of meetings: Meet as part of Medical Home Leadership Network team meetings-initially monthly, now every other month.

Initial Priorities:

- 1) Clear diagram (roadmap) of the assessment and diagnosis process to inform all families, providers, and members of the community. Create a standardized documentation form to be used by community providers. The documentation would start with a parent concen and continue documenting dates and providers who rendered services including all the screening and testing to date of final diagnosis.
- 2) Explore ideas and options for ways to support families and children in Walla Walla to receive needed diagnostic services and treatment in a timelier manner. This committee is to look at what screeners and diagnostic tests are locally available, validated tools being used leading toward a diagnosis, and what licensed providers are available in this community that are recognized by WA State WAC to diagnose Autism Spectrum Disorders. The goal is to have Walla Walla become as independent as possible in providing increased availability of in-depth, validated tests leading to a team-generated diagnosis.

Funding Source: Initial CAM mini-grant, MHLN team honorarium, in-kind

Activities:

- Sponsored community training with Dr. Glenn Tripp, Mary Bridge Children's Center on Autism Spectrum Disorders and how the community could work together on this. This included a presentation/discussion with school employees and other professionals and a separate in-service with pediatricians.
- Sponsored and held two large MCHAT ASD screening tool trainings for childcare providers and others in the community (training by Yakima Children's Village staff).
- Several members participated in Screening Tool for Autism in Toddlers and Young
 Children (STAT) training to do advanced screening of toddlers suspected of having ASD.
 At least one member became STAT certified.

- In the process of developing a multi-disciplinary diagnostic team The Walla Walla School District now contracts with Dr. Linda Ivy, clinical psychologist, to participate with school personnel (including SLP and PT) to assess and diagnose students in the district with suspected ASD.
- Workgroups to develop an algorithm for professionals and roadmap for parents and guardians about what to do when there are developmental concerns.
- CAM meetings led to separate, related initiative by Dr. Joseph Wren and workgroup to develop a Children's Village similar to Yakima's Children's Village. Dr. Wren received a CATCH grant for planning this initiative and the group continues to meet regularly.
- CAM Coordinator Valerie Rembolt co-presented with Kate Orville on the Community Asset Mapping process at the 2011 Infant and Early Childhood Conference
- The Local Health District has chosen Universal Developmental Screening as their CSHCN
 performance measure and are surveying community providers to identify who is doing
 developmental screening and using what tools.
- Valerie Rembolt is assisting the Great MINDS regional expansion. She is helping with recruitment of primary care providers to participate in training about how to do developmental screening in the practice.

Products:

- Algorithm for professionals (0-35 months) (based on algorithms in American Academy of Pediatrics Autism Resource Toolkit for clinicians)
- Roadmap for parents and guardians. Based on brochure entitled "Roadmap to Services for Children and Adults with Developmental Disabilities" from WA State Division of Developmental Disabilities (www.dshs.wa.gov/pdf/Publications/22-822.pdf)
- Autism Evaluation in a School Setting form (based on Lewis County communication form between schools and pediatricians).

Yakima: Autism Focus

Name: Autism Oversight Committee

Vision/Mission 2007: Crossing the bridge...together. Partnering to connect children with special needs and their families to supportive services.

Initial meeting: Autism Oversight Committee started 2006

Frequency of meetings: Started out as monthly, but are now 4-6 times per year. The meetings are usually 2 hours per meeting.

Initial Priorities: Partnership with community agencies and schools. Focus initially on screening, diagnosis and therapeutic support for young children.

Funding Source: Memorial Foundation initially and now M.J. Murdock Grant.

Current Activities: We are now moving into a focus on behavioral and mental health services in our community. The shift has moved to older children and how to best support their unique needs.

Products/Outcomes:

- Children's Village Core Values Document (see attached)
- Support in the development and implementation of a Collaborative Training Classroom for young children in partnership with school districts (4 years)
- Supporting the collaboration of a variety of shared trainings for community partners
- April is Autism Awareness events
- Support in the planning and development of the new Early Learners with Autism Classroom which is implementing the new state model for ABA implementation
- Community Asset Mapping process sharing community resources and connecting services.

Yakima: Autism Focus Attachment

Core Values for Programs Serving Children with Social-Emotional, Communication, and Behavioral Needs at Children's Village

It is our goal that services will:

Be family-centered. We will do this by:

- ❖ Acknowledging that the family is the expert regarding their child.
- Honoring family knowledge about their child, and cultivating relationships to provide ongoing support.
- Providing support for families.

Work collaboratively with the ESD, local school districts, and other community agencies to:

- Share knowledge;
- Maximize resources and services;
- Offer a *menu of options* to families and children across the autism spectrum from the time of identification through the age of 18 and;
- Create seamless transitions for children and families.

Provide therapeutic and educational interventions that are:

- ❖ *Individualized* based on each child's strengths and areas of need.
- Outcome driven and respond to each child's response to intervention.
- ❖ Be founded on current *evidence-based practices* from research literature.
- Culturally and linguistically sensitive.
- **A** Responsive to the *parent's concerns*.

Serve as a *training-site and educational resource* for families, school districts, universities, professionals at Children's Village, and other community agencies.

Provide *equity of services* to all families while maintaining *fiscal responsibility*.

Fit within the *existing framework and ideals* of Children's Village.

Strive to *work creatively* to maintain *fiscal needs* of the program(s).

Yakima: Universal Developmental Screening Focus

Name: Central WA Universal Developmental Screening Workgroup

Vision: Every child in central Washington will receive a developmental screening at recommended intervals with the appropriate follow-up as needed.

Mission: Train and educate families, medical providers, and childcare providers with the knowledge and tools to implement universal developmental screening and assist with local referrals and resources as needed.

Initial meeting: Started with Dr. Diane Liebe's American Academy of Pediatrics (AAP) Community Access to Child Health (CATCH) grant in 2011.

Funding Source: Funded by local grant including Yakima Community Foundation, Project LAUNCH-Yakima, South Central Infant Toddler Consultation Project, Childcare Aware through Catholic Family Services, Investing in Children Coalition.

Current Activities:

- Workgroup was meeting on a monthly basis for 1.5 hrs with members from a variety of local, regional, and state partnerships. However meeting is currently on hold due to end of local grant funding and plans to incorporate workgroup under the umbrella of Investing in Children Coalition - Child Wellness Committee.
- Experiences through this project have started collaboration with AAP/Great MINDS (Medical Homes Include Developmental Screening) Grant to pilot the use of regional medical trainings for UDS - currently focusing on Walla Walla and Tri Cities regions.

Products:

a) Medical:

• In 2011-2012, there were a total of 3 practices within Yakima County beginning to implement routine developmental screening, primarily on a pilot basis. Since the 2012 evaluation, 16 more clinics have been recruited as partners for implementation and 135 staff members have been trained. Staff includes medical providers, clinic administrators, registered nurses, medical assistants, and other clinic staff. Today 7 clinics have streamlined the process into their daily routine including incorporation into their permanent medical record. An additional 5 clinics remain in partial implementation, 5 clinics within the planning phases, and one clinic demonstrated no change. Each clinic determined which intervals to administer primarily following

- recommended intervals at 9, 18, and 24-30 months of age although some clinics decided to add additional screening at 4 months.
- Throughout this pilot, there have been two champion clinics that have gone above and beyond. A family medicine clinic and a pediatric clinic located in Yakima and Sunnyside have jointed screened approximately 650 children since 2012. For those clinics the referral rate is currently at 7% and the relationship to referral resources has improved assuring that families receive the appropriate referral within the expected timeline. At both of those practices, providers have been vocal and supportive of Universal Developmental Screening (UDS) and influential in spreading it to other providers. Additionally two federally qualified health clinics have targeted UDS as a priority and have developed pilot programs within their own clinic system to be implemented corporate wide. Not only does this affect clinics within our valley from Naches to Grandview, but this also affects clinics from Ellensburg to Prosser to Walla Walla to Spokane. Clinics are both large and small with the ability to affect families both in urban and rural settings. Although we do not have exact data counts for these clinics, the predicted scope is extensive and the affect is embedded within those clinic systems assuring that every child is screened.

b) Childcare:

- Eight childcare facilities including two in-home centers participated in a UDS Pilot Project seven completed and now provide UDS within their facility.
- 72 staff members trained in total on:
 - Developmental milestones
 - Universal developmental screening
 - ASQ-3 screening tool
 - How to share information with families
 - Appropriate referral resources
 - What is early intervention
 - What does special education look like today.
- 54 parents participated in family nights with information about UDS and developmental milestones.
- Childcare programs are in early implementation of developmental screening from the period of October 2013 through February 2014, 58 developmental screenings have been completed, with an additional 110 distributed to parents for completion with their child. A total of 4 children have been referred within the community for further developmental evaluation, follow-up and supports.