

# Sharing Developmental Concerns with Families to Inform Family Decision Making



Susan Connor

Lynn Barts

# Agenda

Reflecting on Our Experiences

Building Relationships with Families

Critical Components

Look What I Can Do – CHILD FIND

Next Steps

# Reflecting on Our Experiences

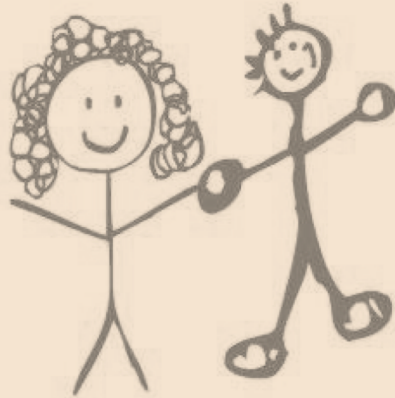
Reflect upon a time when someone had to share difficult information with you...

How did you feel after the conversation?  
What worked in that conversation?  
What could have worked better?

Reflect upon a time when YOU had to share difficult information with another person...

How did you feel after the conversation?  
What worked in that conversation?  
What could have worked better?

THINK



PAIR

SHARE



# Reflective Question

How do our experiences impact our behaviors in sharing developmental information with families?

# Early Identification Matters

Learn the Signs Act Early [CDC.gov](https://www.cdc.gov)

**Families want to know**

**Windows of opportunity**

**Impact of poverty &  
environmental risks**

**Lack of screenings**

**Relationships are  
important**



# The Importance of Child Find

**The Individuals with Disabilities Education Act (IDEA) *Child Find & Mandated Referral Sources***

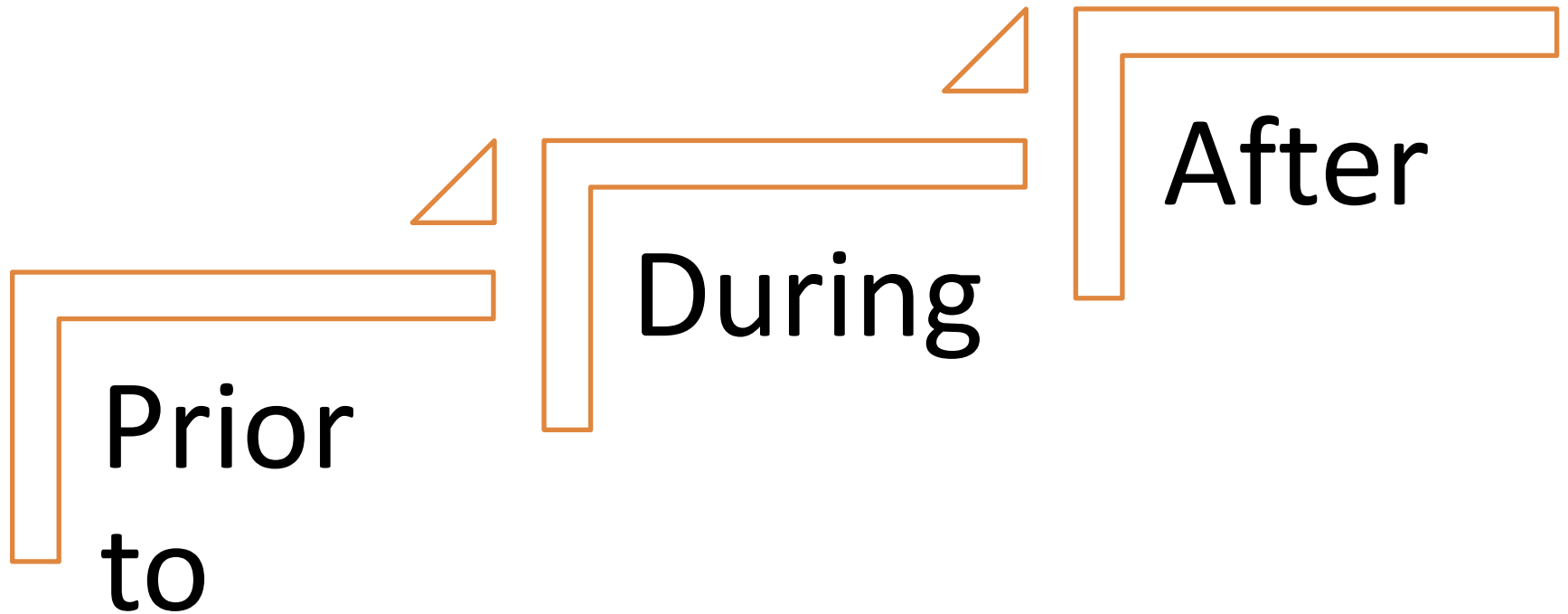
**The American Academy of Pediatrics (AAP)**

**Medicaid's Early and Periodic Screening, Diagnosis and Treatment (EPSDT)**

**ExceleRate IL**



# Communicating Developmental Concerns with Families Critical Components





# Setting the Stage for Success Referring for Evaluation

Notice how you are feeling	Finding the right time	Find private space to talk with families confidentially
Let families begin by asking the family about their concerns about their child	Start with Strengths	Increase your comfort in talking with families
Discuss influencing factors such as health, language, or environment	Don't take strong emotion as a criticism of you	Provide specific, non-judgmental examples of concerns noted
Emphasize parents skills and resources to work with their child	Encourage Hope	Listen to families before giving advice; take their perspective
Provide information about referral services and options	Determine if parents will contact referral or they prefer you make the referral.	Recognize family diversity & decisions that may differ from yours

**“We must be able to hear or see or feel that a parent--however he or she is functioning, or however distressed, upset or angry he or she may be--has some investment in the well-being of his or her child”**

(Pawl, J. 2000)





# Referral and Follow Up

What's next?

## Five Developmental Domains

### Cognitive

Your child's ability to think, react and learn about the world around them, including cause and effect, matching, beginning math and reasoning

### Adaptive

Your child's ability to adapt to various demands of normal daily living, including areas such as dressing, eating, toileting and washing

### Communication

Your child's ability to exchange information, understand and express ideas

Sub-domains that you may see:  
Expressive Language Receptive  
Language

Sub-Sub Domains that you may see:  
Oral Motor  
Articulation

### Physical

Your child's ability to master movement and balance as well as be able to interact with the world around them in various ways

Sub-domains that you may see:  
Hearing  
Vision  
Gross Motor  
Fine Motor

Sub-Sub Domains that you may see:  
Locomotion                      Stationary  
Reflexes                          Grasping  
Proprioception                  Vestibular  
Auditory Processing            Visual Processing

### Social Emotional

Your child's ability to interact with others and self-regulate and organize their emotions

Sub-domains that you may see:  
Play and leisure  
Interpersonal relationships

## Early Intervention Eligibility

1. Eligible Medical Diagnosis
2. 30% or more delay
  - a. DHS determined eligible level of delay (30% or greater) exists in one or more of the five developmental domains, as confirmed by a multi-disciplinary team.
  - b. Confirmed by informed clinical judgement of the TEAM if the child is unable to be appropriately and accurately tested by the standardized measures available.
3. At Risk Conditions
  - a. Parent has been medically diagnosed as having a severe mental disorder as set forth under axis I or axis II **QR**
  - b. Parent has been medically diagnosed as having a developmental disability **QR**
  - c. Three or more risk factors
    - i. Current alcohol or substance abuse by the PRIMARY caregiver
    - ii. PRIMARY caregiver currently under 15 years old
    - iii. Current homelessness of the child
    - iv. Chronic illness of the primary caregiver
    - v. Alcohol or substance abuse by the mother during pregnancy with the child
    - vi. PRIMARY caregiver with education level less than or equal to 10th grade equivalent (unless that level is appropriate to the parent's age)
    - vii. An indicated case of abuse or neglect regarding the child and the child has not been removed from the abuse or neglect circumstances.
4. Annual Re-determination  
Used **ONLY** when current eligibility criteria have not been met; **AND**
  - a. When child exhibits any measurable delay; \* **AND**
  - b. Determined by multi-disciplinary TEAM to require the continuation of EI services in order to support continuing developmental progress.

**IF USING ANNUAL RE-DETERMINATION:  
Services WILL look different.**

\*Any measurable delay or have not attained a level of development in one or more developmental areas that is at least the mean of the child's age equivalent peers.

# Illinois Resources

<http://www.childfind-idea-il.us/>

In Illinois, the Child Find Project provides free public awareness services as part of the comprehensive Child Find system.

The goal is to educate the public about the importance of early services for eligible children as early as possible in their development.

- Early Intervention Child & Family Connections
- Early Head Start/Head Start
- School District Early Childhood Services

# SUPPORTING A FAMILY IN EARLY INTERVENTION

Developed through funding from the Illinois Department of Human Services,  
the Bureau of Early Intervention, and a Public Engagement Grant  
through the University of Illinois.

<https://youtu.be/ELEZiAHswjA>

# Child & Family Connections Early Intervention Birth to Three Standardized Referral Form

## REFERRAL FORM

<https://illinois.edu/blog/files/6039/114611/4515.pdf>

*The Standardized Referral Form  
Online Training*

<http://www.illinoiseittraining.org/page.aspx?module=15&type=1&item=1&eventid=6228>

or *Resource version* at  
[https://illinois.edu/blog/view/6039/114611#a\\_toc5](https://illinois.edu/blog/view/6039/114611#a_toc5)

### Standardized Illinois Early Intervention Referral Form

Please complete Sections 1 through 6 of this form to refer a child to Early Intervention (EI) for eligibility determination.

#### Section 1. Child Contact Information

Child Name: \_\_\_\_\_ AKA: \_\_\_\_\_  
Date of Birth: \_\_\_/\_\_\_/\_\_\_ Child Age: \_\_\_ Gender: M F Race: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_  
Type of Insurance Coverage:  Medicaid  Private Insurance  
Parent/Guardian Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Primary Language: \_\_\_\_\_ Home Phone: \_\_\_/\_\_\_-\_\_\_\_ Other Phone: \_\_\_/\_\_\_-\_\_\_\_  
Alternate or Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_/\_\_\_-\_\_\_\_

#### Section 2. Reason(s) for Referral

Reason(s) for referral to EI (Please check all that apply):  
 Identified condition or medical diagnosis (e.g., spina bifida, Down syndrome): \_\_\_\_\_  
 Suspected developmental delay based on objective developmental screening using (please note screening tool used) \_\_\_\_\_ (Please check area[s] of concern):  
\_\_\_\_Motor/Physical \_\_\_\_Cognitive \_\_\_\_Social/Emotional \_\_\_\_Speech \_\_\_\_Language/Communication  
\_\_\_\_Behavior \_\_\_\_Vision/Hearing \_\_\_\_Adaptive/Self-help Skills \_\_\_\_Other, specify \_\_\_\_\_  
Comments: \_\_\_\_\_  
 At Risk (Please describe risk factors): \_\_\_\_\_  
 Other (Please describe): \_\_\_\_\_  
 Family is aware of reason for referral

#### Section 3. Referral Source Contact Information

Check here if Primary Care Provider (PCP) is source of referral and skip Section 3 and complete Section 4  
Referral Date: \_\_\_/\_\_\_/\_\_\_  
Name of Agency Making Referral: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Office Phone: \_\_\_/\_\_\_-\_\_\_\_ Office Fax: \_\_\_/\_\_\_-\_\_\_\_ E-mail: \_\_\_\_\_  
Contact Person at Referral Site: \_\_\_\_\_

Learn the Signs, Act Early Resources  
For FREE materials, visit  
[www.cdc.gov/ActEarly](http://www.cdc.gov/ActEarly)  
or call 1-800-CDC-INFO

- <http://www.cdc.gov/ncbddd/actearly/index.html> Free child development & developmental screening resources
- <http://www.cdc.gov/ncbddd/watchmetraining/index.html> Online Training about sharing developmental concerns
- <http://www.acf.hhs.gov/programs/ecd/child-health-development/watch-me-thrive> Developmental Screening Resource Guides





**Walking our Talk... Your Next Steps**

Thank you for supporting the children  
and families of Illinois!

## Let's Keep in Touch!

Visit our Website  
[eitp.education.illinois.edu](http://eitp.education.illinois.edu)

Follow us on Twitter  
**@EITPIllinois**

Follow us on Facebook  
[www.facebook.com/EITPIllinois](http://www.facebook.com/EITPIllinois)



**The Early Intervention Training Program at  
the University of Illinois**

---

The Children's Research Center

---

51 Gerty Drive, Room 105

---

Champaign, IL 61820

---