In California, more than a quarter (28%) of children between 4 months and 5 years old are estimated to be at moderate or high risk of developmental or behavioral problems. Finding these children and linking them to early intervention services and supports are critically important and time-sensitive concerns. Early identification and intervention can impact the architecture of the developing brain, thereby improving outcomes for children across all developmental domains. These services not only impact the lives of children and families, they have long-term positive impacts on California’s economy. Intervention in the early years reduces the use of more costly services including special education services in the K–12 school system, while ensuring higher rates of lifelong productivity. The importance of screening is reflected in both the American Academy of Pediatrics’ Bright Futures guidelines and the Head Start Performance Standards.

Given the high rates of developmental delays and the potential impact of early identification and intervention services, it is no surprise that the American Academy of Pediatrics recommends that all children receive developmental screenings during well-child visits. Developmental screening tools are relatively fast and low-cost ways for families and professionals to identify potential red flags or areas in which a child may not be developing at the typical rate for children of the same age. Once a red flag is identified in a screening, children should be referred for further assessment and intervention as necessary.

While the need for universal developmental screening is widely understood, access for children and families lags behind. Nationally, fewer than 50% of children with disabilities are identified before they enter the K–12 system. Children from low-income families and ethnic-minority families are identified at the lowest rates. There is a continued need for programs that can increase the number of children receiving developmental screenings.

211 LA County Developmental Screening and Care Coordination (211 LA County) is an innovative approach toward working with a population of families that are often out of reach for many other service providers. By offering evidence-based screenings, referrals, and care coordination over the phone, 211 LA County is a trusted partner for families who are struggling with food insecurity, homelessness, domestic violence, or unhealthy living conditions. For a comprehensive review of the pilot and policy recommendations see ZERO TO THREE (ZTT) and 211 LA County policy brief Improving Access to Early Identification and Intervention (www.zerotothree.org/wo/assets/docs/improving-access-to-early-identification-and-intervention.pdf).

2013–2014 Achievements

In 2013–2014, the ZTT Western Office and 211 LA County partnered to increase awareness both of the need for developmental screenings and of the 211 LA County program. ZTT provided information on national policies and programs at multiple 211 LA County Early Intervention and Identification Collaborative meetings. Topics included the importance of early intervention for young children experiencing homelessness, trauma-informed care, and the national landscape of early identification services. In addition to the collaborative meetings, 211 LA County hosted the Early Start Advocacy Day town hall meeting which focused on the restoration of Individuals With Disabilities Education Act (IDEA) Part C funds in the Governor’s 2014–2015 budget. The town hall meeting brought together participants from a variety of sectors including pediatrics, homeless services, social work, early childhood, family resources, and advocacy.
Speakers included representatives from ZTT, Children Now, Association of Regional Center Agencies, and Autism Speaks. These efforts were part of the eventual restoration of funds for Early Start in the Governor’s budget, which will allow more prevention services for high-risk infants and toddlers.

In addition to these meetings, ZTT discussed the project and brief with multiple policymakers and stakeholders. ZTT staff made visits to California state legislators and to leadership from First 5 LA, First 5 California, the First 5 Association, the Department of Social Services, and the Department of Education. At least 40 additional legislators received the policy brief in packets designed to align to their interests. Communication was shared between ZTT and 211 LA County so that follow-up communications and connections could be made.

**Integrating Services**

Families often have multiple needs that cut across a wide range of services including, but not limited to, stable housing, access to adequate nutrition, career training, and child care. When a child is identified as having special needs, families may find themselves interacting with even more services, medical providers, and programs.

Los Angeles County offers a multitude of supportive programs and subsidies, but these can be very difficult to manage and understand. Each program may have different requirements, and the different sectors may operate with different guidelines and expectations, making it very hard for a family to navigate the system and get the services they require.

211 LA County is uniquely positioned to help families gain access to the county’s vast and complex social service delivery system. In order to better integrate services and create a smoother system for families, 211 LA County developed protocols and agreements, including information sharing across organizations that reduces barriers to coordination. This work is being done on a range of topics including homeless, foster youth, and health care.

During 2013–2014, 211 LA County worked to ensure that homeless children birth to 5 years old have access to developmental screenings by leveraging relationships with the Family Solutions System (a coordinated entry network of service providers) and the Los Angeles Homeless Services Authority. These partners worked cooperatively to complete housing and service plans, connect families to the community, and help families receive services including early childhood and intervention programs such as Early Head Start, Head Start, Part B and C of the IDEA, McKinney-Vento education services, and state-funded preschool programs. Together, 211 LA County, Los Angeles Homeless Services Authority, and the Family Service Centers developed a referral form that will be used during the family intake process. This form will include referral to 211 LA County for developmental screenings, care coordination, and early childhood programs.

211 LA County also worked to support children involved in the welfare system and partnered with the Edmund D. Edelman Children’s Court in Los Angeles. The Children’s Court houses the Los Angeles County Juvenile Dependency Court where, annually, more than 30,000 children who are at risk of physical and emotional abuse and neglect are served and protected. 211 LA County helped parents receive referrals for mandated programs which aid in the reunification process and connected them to developmental screenings. Care coordinator specialists at 211 LA County also worked closely with the Alliance for Children’s Rights, CASA of Los Angeles, and the High Risk Services Division and the Early Childhood Education Division in the Los Angeles County Department of Children and Family Services Bureau of Clinical Resources and Services. Parents or caregivers who were receiving services from the Department were not only offered the developmental screening but also received assistance to enroll children into early childhood education programs.

Health care reform is another area that can benefit from cross-sector collaboration. 211 LA County has worked with Children’s Hospital of Los Angeles, the University of California–Los Angeles Kaiser Permanente Center for Health Equity, and the Children’s Discovery and Innovation Institute to pilot an integrated service model for developmental screening, intervention, and care coordination. Parents or caregivers calling 211 LA County are not consistently accessing either regularly scheduled well-child visits or a medical home which would oversee all the child’s medical needs. Barriers include language, culture, limited telephone access through pre-paid phone minutes, lack of transportation, and the inability to take time off work to attend appointments during business hours. Having to rely exclusively on public transportation makes it difficult for families to plan a trip to the doctor. These barriers contribute to health care services being accessed only during times of illness rather than for prevention and well-care.
Policy Recommendations

Although California falls short of providing developmental screenings for all children, there are potential opportunities for expansion. The following suggestions include potential cost-effective partnerships with 211 LA County that would increase the numbers of children receiving valid and reliable screening.

1. **Early care and education services.** Child care programs provide unique opportunities for early identification services in California. Many of these programs understand that providing developmental screenings is an important part of offering high-quality care. In fact, the California Race to the Top—Early Learning Challenge Quality Continuum Framework awards points for providing screenings. In addition, at the time of writing the Senate and Assembly as well as the Legislative Women’s Caucus have proposed additional child care slots and quality improvement dollars. Some early care and education programs may not be able to provide developmental screenings. Small programs, for example, may not have the necessary staff or training. This lack of capacity reinforces the need for partnerships.

2. **Crisis nurseries.** While not large in number, crisis nurseries serve a population of children who come from homes that may be experiencing high levels of stress. Ongoing stress and trauma raise the risk of developmental delays. Crisis nurseries should be required to provide developmental screenings.

3. **Military.** As in the rest of the country, rates of autism spectrum disorders are on the rise among military families. Life in the military can bring unique challenges for children for whom changes (e.g., moving or deployment) can be especially difficult. Military bases should provide access to developmental screenings.

4. **Early Start.** In 2009 the Early Start program lost a substantial amount of funding, which caused the elimination of services for high-risk infants and toddlers. As California’s economy continues to improve resources must be reallocated to this important program. Vulnerable and high-risk infants and toddlers need access to developmental screenings.

5. **Medi-Cal.** More than 1 million Californians enrolled in Covered-California during the 6-month open-enrollment period. Most health plans must cover a set of preventative services including developmental screening for children less than 3 years old. Hospitals and clinics may need creative strategies to meet the new demand.

6. **Homeless families.** Children who are homeless are often underserved because they are difficult to locate through traditional sources (e.g., phone and mail). Likewise, their unstable housing makes it unlikely that they will have long-term connections to pediatricians, child care providers, or other professionals who may be able to identify a need for assessment and support. In addition, the stress and demands of being homeless may make it even more difficult for parents to navigate the system. Supporting homeless children requires a system that is flexible to these unique needs.

7. **Welfare.** Children in the child welfare system are at high risk of developmental delays. Foster, adoptive, and relative caregivers need help providing the best support for the children in their care. Many of these families are already working with multiple offices (e.g., social workers, legal system) and need help finding the right resources for early identification and intervention.

Research has consistently demonstrated that time is a critical factor for children with developmental delays; the earlier that a child receives intervention services, the better the outcomes. Ensuring that all children receive developmental screenings requires innovative, cross-sector programs and partnerships.