The good news …
Early interventions during early childhood have been shown to improve long-term developmental, social, educational, and health outcomes.1

but, children from low-income families experience disproportionately high rates of social, emotional, and behavioral problems, and Latino and African-American children with ASD have, on average, substantially later ages of diagnosis than their White, non-Hispanic counterparts and less access to early intervention services.2

These inequities, combined with lower rates of health insurance coverage and less access to medical homes, make some populations of children particularly vulnerable to worse developmental and educational outcomes - which are, in turn, associated with worse long-term health outcomes.3

So, in 2009, 211 LA initiated screening for risk of possible developmental and behavioral issues by inviting callers with children through five years of age to talk about their children by completing a free parent questionnaire (evidence-based developmental screening).

211 LA is a pioneer in reaching the most at-risk and hardest to reach populations. We bring down barriers to identify children 3-4 years earlier than the average age of diagnosis. The "hard to reach" families are those deemed to be hard-to-reach by traditional manual and conventional methods – 211 LA is the gateway to a vital and complex social service delivery and referral support system. 211 LA innovative programs recognize and practice assessment, coordination, and integration of the health and social service systems specifically to reach and serve vulnerable populations in LA County. With one phone call, clients are connected to other services by way of coordinated care services, including health, care, autism screening, veterans services, crisis management programs, access to jobs, and food security programs.

Method
Setting
211 LA Call Center - Engagement of parents/caregivers calling for basic needs

Procedure
1) Parents’ initial reason for calling 211 is addressed first;
2) Next, parents are asked if they would like to participate in a free parent questionnaire (Developmental screening) to learn more about their child’s development;
3) If parents agree to participate, they are administered evidence-based developmental-behavioral screening tools by interview using an online screening service, PEDS Online, providing real-time results from a range of screening tools;
4) Screening for risk results initiate ongoing care, and 211 LA provides the needed hands-on family-centered care coordination to ensure enrollment in intervention services (e.g., Regional Center, Special Education, Early Childhood Mental Health Program, Head Start, Early Head Start, etc.)

Measurement
1) Parents’ Evaluation of Developmental Status (PEDS);
2) Modified Checklist of Autism in Toddlers (M-CHAT-R);

Data Acquisition
1) All screening results were captured by the PEDS Online database and then transferred to 211 LA’s electronic health record;
2) Demographic data, the status of referrals and whether a referral resulted in a delivery of services were tracked in 211 LA’s database.

4) Acknowledgements
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References
3. Acknowledgements
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