

SSIP Workgroup

February 22, 2023 Meeting Notes

Workgroup Participants: Jaylene Trueblood, Elizabeth Lyon, Kelly Hill, Naomi Grinney, Sarah Moore, Tracy Walters, Anne Brager, Lisa Terry, Deana Buck, Lorelei Pisha, Brandie Kendrick, Emily Amerson, Jackie Robinson Brock

Absent: Jessica Monaco, Kyla PattersonKathryn Marchese, Dawn Lero

**Objectives to Consider and Current Status:**

Broad Improvement Strategy 1: Identify and implement initial and ongoing eligibility determination and assessment for service planning practices related to social-emotional development that effectively inform eligibility decisions, the child outcome summary process, IFSP development and service delivery

1. Establish recommended and/or required practices for use of a social-emotional screening tool(s) as part of eligibility determination and for ongoing developmental monitoring

* Survey of Current Practices sent to all local system managers.

1. Establish recommended and/or required practices for use of a social-emotional assessment tool(s) as part of initial and ongoing child assessment and additional questions on the family assessment tool

* Survey of Current Practices sent to all local system managers.

1. Develop recommended practices around including eligibility and/or assessment team members with Infant Mental Health or related expertise
2. Examine inequities/bias in eligibility determination and assessment practices/tools

* Being addressed as part of tool review

1. Explore screening or assessing for other factors that impact infants’ and toddlers’ social-emotional development, such as parental depression, anxiety, trauma, parent-child interaction, and temperament

* Establish a committee

Link to Assessment Toolkit Developed from Previous SSIP: https://static1.squarespace.com/static/59a023cfbe42d6bbb81d66a5/t/6170721bc7954478de6b55ae/1634759195468/Assessment+Protocol+Toolkit.pdf

Broad Improvement Strategy 2: Identify and implement evidence-based service delivery practices to promote positive social-emotional development for all eligible infants and toddlers and provide effective intervention to address delays and concerns

a. Explore available evidence-based practices to support positive social-emotional development and social relationships (e.g., Pyramid Model, PIWI, FAN, DEC Recommended Practices) in order to identify a core practice that will be implemented statewide

1. Survey of Current Practices sent to all local system managers including a question about the pyramid model.
2. Understand from various communities, including those who are here as refugees and immigrants, what the concept of “social-emotional skills” means to them and what is important in their culture related to infants’ and toddlers’ skills in this area of development
3. Establish a committee

**Action Items and Discussion:**

1. Naomi Grinney provided an overview of the POSI.
   * Parent Observation of Social Interaction – same questions for all ages, so you use the same tool every time.
   * Questions are easy to use and easy to read.
   * Translated in several languages.
   * Handout can be given to parents so they can follow along.
   * Easy to score and indicates child is at risk.
   * Inclusive of many experiences a child may have.
   * Takes 5 minutes to administer and can be completed by parent or caregivers.
   * Can be used across settings.
   * It is available for free but cannot be modified.
   * Can be done on a computer or on paper.
   * ITC Fairfax asks both parents and caregivers (daycare providers) to fill out and discusses areas of difference with parents.
   * Helpful way to launch conversation with parents when parents have not had screening or feedback from pediatricians.
   * ITC Fairfax uses ASQ during initial home visits or ASQ-SE for children who may be at risk. ASQ-SE is used with all children at 6-month review. They use the POSI for children with which they have concerns. ASQ-SE is used to determine if families need social emotional supports added to the IFSP or referrals to community resources. The POSI is used to determine if there are red flags that parents may need to follow up on with pediatricians. Results are sent to pediatricians along with a letter summarizing ASP results. It is helpful to have multiple tools, particularly in a large system with providers who have sub specialists.
   * The POSI starts at 18 months. It is specifically designed to indicate red flags for autism.
   * For children not at risk for autism, another tool such as the ASQ-SE would be a better screening for trauma or other concerns.
   * Jackie Robinson Brock shared another resource being piloted to screen children for autism in the Richmond area. They are setting up a clinic this spring to pilot use. The link for this tool is <https://www.childrenshospital.org/research/labs/rita-t-research>

It is a short reliable way to do a screening for children without having to be on the wait list for developmental pediatricians. They should have an update on progress this fall. Anyone can get trained and diagnose using this tool.

1. Anne Brager reviewed additional resources sent to workgroup members.
   * ASQ-SE algorithm
   * Article on Child Welfare and Early Intervention Research Findings and Recommendations
   * Link to the survey of wellbeing of young children - <https://pediatrics.tuftsmedicalcenter.org/The-Survey-of-Wellbeing-of-Young-Children/Publications-Invited-Talks-and-Presentations>
     + Jaylene Trueblood shared this tool with the workgroup. She learned about it during a book study with the DEC.
     + Available in multiple languages.
     + No cost.
     + Covers 2 months to 60 months.
     + Has POSI built in and covers many developmental milestones and has questions addressing behavior.
     + Includes a parent component.
     + Looks at social determinants of health and incorporates looking at development through the social-emotional lens.
     + Tool is meant to be filled out by the family but could be used as an interview.
     + Has age ranges.
     + More research is needed to determine if this tool looks at other areas of development other than social emotional.
     + Is a good tool for looking at concerns other than autism.
     + Work group members shared that social-emotional questions are being asked by pediatricians and physicians at regular check-ups. Sharing with families that screening tools are used with all families makes parents more comfortable and willing to engage.
     + If workgroup puts together a tool-kit, this is a tool to consider including.
2. We discussed additional information needed to make a recommendation on requiring or recommending use of screening and assessment tools and which tools to recommend or require.
   * Lorelei Pisha suggested the Devereux and will review this and share at our next meeting.

<https://centerforresilientchildren.org/infants/assessments-resources/devereux-early-childhood-assessment-deca-infant-and-toddler-program/>

* + Liz Lyons shared that her system is training to use the MEISR and she will present on what she has learned about how it can be used to assess social-emotional development in April. They will begin using this at intake in July.

**Next Steps:**

* 1. Liz Lyons will present on the MEISR in April.
  2. Lorelei Pisha will review the Devereux at our next meeting.
  3. Deana Buck will review the ITSEA.
  4. Anne Brager will complete the overview for the Survey for Wellbeing for Young Children and we will decide at our next meeting if we should consider including it in an assessment/screening toolkit.
  5. Members will review the ASQ-SE algorithm and the article on Child Welfare and Early Intervention Research Findings and Recommendations to discuss at our next meeting.
  6. Develop an introduction on the importance of assessing social-emotional development for an assessment/screening toolkit. Lisa Terry recommended reviewing existing descriptions.
  7. Develop recommended practices around including eligibility and/or assessment team members with Infant Mental Health or related expertise.

[**https://www.iecmhc.org/tutorials/consultative-stance/mod2-1/#:~:text=Key%20Elements%20of%20the%20Consultative%20Stance%201%**](https://www.iecmhc.org/tutorials/consultative-stance/mod2-1/#:~:text=Key%20Elements%20of%20the%20Consultative%20Stance%201%)

**20The,Wondering%20instead%20of%20knowing%20Patience%20Holding%20hope%20**

**Next Meeting:**

* March 22nd from 12:00 – 1:30. A zoom link for this meeting will be sent out.
* Lorelei Pisha will provide an overview of the Devereux
* Deana Buck will provide an overview of the ITSEA.
* We will discuss including the Survey for Wellbeing for Young Children in an assessment/screening toolkit.
* Discussion of the ASQ-SE algorithm and the article on Child Welfare and Early Intervention Research Findings and Recommendations.
* Planning next steps for the assessment/screening toolkit introduction and developing recommended practices around including eligibility and/or assessment team members with Infant Mental Health or related expertise.