

Emerge



A Child's Place

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Occupational Therapy
Speech Therapy

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Serving children from
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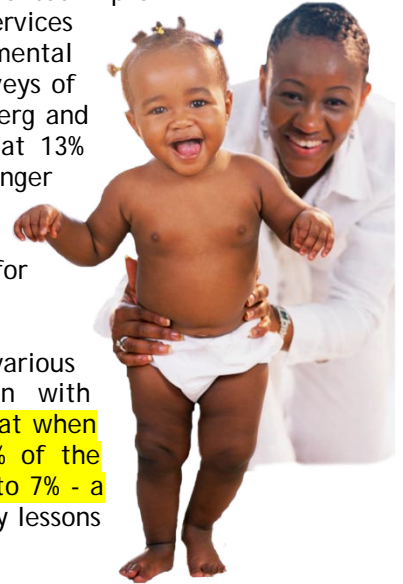
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North Carolina's ABCD Program What Did We Learn?



Bonnie Hacker, OT
Founder / Director

North Carolina's ABCD Program tested and proved methods to improve the rate of developmental delay screening for young children while not interfering with the work flow of busy medical practices and making sure doctors get paid for their efforts.¹ The successful screening methods implemented were so straightforward, they could also be implemented in pre-school settings. The rate of referrals for early intervention services has long lagged behind the estimated prevalence of developmental delay. One of the *lowest* estimates of prevalence based on surveys of parents came from the work of Simpson et al. - 5.6%.² Rosenberg and colleagues estimated the prevalence of developmental delay at 13% when they used data based on direct assessment of children younger than three.³ However, in North Carolina, as few as 2.9% of children receive referrals for early intervention services.⁴ Nationwide, only 10% of children meeting the criteria for developmental delay receive services before school begins.³



From 2004 to 2008, North Carolina's ABCD Program tested various methods for improving the rates at which young children with developmental delay are identified and helped. **They found that when medical practices implemented simple screening tools at 90% of the designated times, referrals for early intervention services rose to 7% - a rate that better matches prevalence estimates.** Some of the key lessons learned from the NC ABCD project are:

- **Should Not Slow Down the Doctor:** Questionnaires for parents were the easiest screening tools to implement at busy medical practices. Non-physician staff could grade the questionnaires. This project focused on the Ages and Stages Questionnaire (ASQ) or the PEDS form. Practices pay a one-time cost of only \$199.95 for the ASQ. The PEDS has even lower upfront costs.
- **Get Paid for What You Do:** Many practices were not billing for screening services. CPT code 96110 covers limited developmental screening conducted and scored by non-physician personnel. Up to 17 codes may be applicable. Contact Emerge for a list and descriptions.
- **Expert Consultation on Screening Available:** Success was based in part on the project's ability to send consultants to individual practices to train the staff in delivering and scoring these assessments. If your facility could benefit from training and consultation on these topics, contact Emerge. We will visit your facility and consult with your staff at no charge.

Screenings were conducted at well-child visits at 12, 24, 36, 48, and 60 months. Early intervention is believed to reduce long-term health care expense by providing developmental therapies when they can be most effective. The goal is to avoid sending children to school with unrecognized challenges. If you think your facility could do more to help identify and refer children at risk of developmental delay, call Emerge for professional, complimentary assistance.

Check Out Our Summer Programs!

This summer, Emerge offers a number of group programs designed to entertain children while helping them with specific challenges such as social skills, communication skills, coping mechanisms, motor planning, fine motor skills, and more. Call or visit our website for more information.

Alert Program Capable Kindergarteners Preschool Power
New! Horse Sense Ready Writers Staying Cool



**Please tell parents about Emerge - A Child's Place
Believing in a Child's Potential to Flourish**

References

1. Klein S, McCarthy D. North Carolina's ABCD Program: Using community care networks to improve the delivery of childhood developmental screening and referral to early intervention services. Commonwealth Fund pub. 1312. Vol 66; August 2009.
2. Simpson G, Colpe L, Greenspan S. Measuring functional developmental delay in infants and young children: prevalence rates from the NHIS-D. *Paediatr Perinat Epidemiol.* 2003; 17 (1): 68-80.
3. Rosenberg S, Zhang D, Robinson C. Prevalence of developmental delays and participation in early intervention services for young children. *Pediatrics.* 2008; 121 (6): 1503-1509.
4. Hay S. ABCD Project in North Carolina. Available at 222.dbpeds.org/articles/detail.cfm?TextID=109.