Willamette Valley Community Health

Transformation Program Project Application

I. Application Cover Sheet

Project Name	Early Intervention and Developmental Screenings
Sponsoring Agency or Agencies	Marion & Polk Early Learning Hub
Total Funds Requested	**118,214.80**
Project Category (choose one): x **Community Investment, or** x **Clinical Integration**	Could be considered both community investment (ASQ with early learning providers) and clinical integration with direct ties to clinical work.
Project Duration (start and end date, total months: 6, 12, 24 months, or other)	One year: January 2018 to December 2018. (12 month budget presented; would like to continue to 24 months)
Project Manager: Name, Title and Organization, Email, and Phone	Lisa Harnisch, Executive Director Marion & Polk Early Learning Hub lharnisch@earlylearninghub.org, 503.967.1185
Contract and Budget Administrator: Name, Title and Organization, Email, and Phone	Lisa Harnisch, Executive Director Marion & Polk Early Learning Hub lharnisch@earlylearninghub.org, 503.967.1185
High-level Overview/Description of Proposed Project (1 sentence)	The purpose of this project is to increase the quality of developmental screenings done in Marion and Polk County, as well as increase collaboration and information sharing between early learning providers, early intervention specialists and medical providers.

WVCH Transformation Program Project Application

Project Objective:

The purpose of this project is to increase the quality of developmental screenings done in Marion and Polk County, as well as increase collaboration and information sharing between early learning providers, early intervention specialists and medical providers. Research shows that children who enter Kindergarten ready to learn are more likely to succeed academically and graduate from high school. Being Kindergarten ready puts children on a path to success. Research also show the importance of early intervention: the earlier a child receives intervention and support for any developmental concerns, the more time there is to prepare them for Kindergarten. By ensuring children receive a developmental screening and connecting them to any needed early intervention services, we can improve health and social outcomes for children in our community.

Executive Summary:

The purpose of this project is to expand on connections that have been made in recent years between early learning providers, early intervention and medical clinics. There are two focuses for this work:

1. Purchase the ASQ Online for early learning providers to use. This would increase the quality of screenings done, and allow us to easily collect data about how many children show a developmental concern.
2. Support the position of Screening & Care Systems Coordinator at the Marion & Polk Early Learning Hub, and a position at Willamette Education Service District.

The target population is children with concerns identified on the Ages and Stages (ASQ) developmental screening. This project will improve health literacy for patients, as early intervention and medical providers share information and effective referrals and follow up information about what the treatment/referral plan is.

Background:

In recent years, there has been growing interest in cross-sector partnerships to improve health outcomes for children and families. Early learning and childcare providers have been working to ensure all children in their programs receive a developmental screen, and have an accurate idea of when to refer. Early intervention specialists and medical providers have been working together to strengthen referral processes and information sharing.

For the past two years, the Marion & Polk Early Learning Hub (MPELH) and WVP Medical Group have been working on a mutual project with the shared goal of creating a pathway to bring ASQ-3 developmental screen information from early learning providers to WVCH medical providers. Early learning providers have been uploading the ASQ-3 developmental screen scores into the CIM tool to share with WVCH medical providers. Part of this work has included a partnership with Child Care

Resource & Referral. Child Care Resource & Referral has provided multiple trainings to childcare providers about how to use and score the Ages and Stages Questionnaire (ASQ). Also, childcare providers have received materials that support implementing the developmental screening. Materials include the master copy of all ASQ screenings, a kit with all items needed to complete the screening, and the book "ASQ3 Learning Activities" which provides activity ideas based on the five developmental areas assessed in the screening. The purpose of these trainings is to improve the quality of screening done, and ensure any children with identified concerns receive appropriate follow-up.

Last year, Oregon Pediatric Improvement Partnership (OPIP) completed a project that worked with Willamette Education Service District (WESD) and Childhood Health Associates of Salem (CHAOS) to map out what happens from the time a child receives a developmental screening to the time they are referred. There was a focus on discovering where children get lost in the screening to referral process. This information helped inform how to improve referral, information sharing and follow up by both the medical clinic and early intervention. Implemented strategies included: creating a visual algorithm of when to refer, creating a handout for families about available community resources, and instituting the "36 hour phone call", which is a follow-up phone call to families within 36 hours to see if they have any questions about the referral. A new form was also created so that early intervention sends information back to the doctor about what was done with the referral. All these new forms and strategies were incorporated into the Electronic Health Record and built into the workflow of the agencies to ensure long term sustainability.

Research shows that early intervention is key for children identified with a developmental concern. By improving the quality of screening done and improving systems of communication between early intervention and medical providers, we can impact long term health outcomes for our community.

Project Description:

The overall goal for this project is that children are accurately screened for developmental delays and are referred to appropriate services when a concern is identified. A seamless pathway for children to access services improves long term outcomes for our community.

The first part of this project funds purchase of the ASQ Online. The ASQ Online is a database that tracks everything related to the ASQ – from choosing the appropriate screening, to reminders about re-screens, to helpful tips about how to talk to parents about developmental delays. This electronic system will allow Head Starts, Early Head Starts, Relief Nursery, Healthy Families and Nurse Home Visiting programs in our area to identify potential delays more quickly and accurately. The ASQ Calculator chooses the appropriate screening for the child's age or adjusted age, taking away the chance for human error. Once a screening is entered, scores are instantly accessible. If there are any identified concerns, the database suggests how to talk to the parent, and gives ideas for activities that parents can do at home to encourage the child's development. This allows providers to have instant conversations with parents about concerns and follow-up. The electronic version of the screening and results are then available to share with Willamette Education Service District and the child's doctor.

The second part of this project is to support two positions, one with the Marion & Polk Early Learning

Hub, and one with Willamette Education Service District. The position at MPELH will continue support to the Screening & Care Systems Coordinator. This position has helped to support the work that has been done of sharing the ASQ screening results from the early learning providers to medical clinics. This funding will allow the Screening & Care Systems Coordinator to continue and expand upon the work that was started by Oregon Pediatric Improvement Partnership (OPIP), as well as completing the work of the previous transformation grant. We are waiting on the final report from OPIP, but a recent meeting with CHAOS and WESD revealed that the work has been successful, and both agencies want to expand this model to other medical clinics. This communication between medical providers and early intervention is key to ensuring that families understand community resources and the importance of early intervention. Supporting the Screening & Care Systems Coordinator would allow us to sustain what work has already been done and support new clinics in implementing successful strategies.

Part of the reason OPIP's work was successful is that there were regularly scheduled check-ins. This consistent communication ensured that barriers were identified and addressed. As we expand the work of OPIP to other clinics, it will be important to have a staff person available to check in with clinics and early intervention to ensure there are solid work flow procedures. The Screening & Care Systems Coordinator will check in with clinics and early intervention to see how the process is going and what barriers need to be addressed.

The Screening & Care Systems Coordinator will provide support and planning to expand this work to new medical clinics. They will be responsible for recruiting new clinics, organizing information sessions and assisting as appropriate to work into clinic workflow. Information sessions will have representatives from CHAOS, WESD and community resources (including Family Link and parenting education from the Marion & Polk Early Learning Hub). The Screening & Care Systems Coordinator would support new clinics in building this into their workflow, providing education and support to staff.

The position at WESD will communicate directly to medical clinics about referrals and follow up. They will ensure that clinics receive the information back about what happened to children that were referred. This person will attend meetings with medical clinics, to educate providers about when to refer to early intervention. They will work with the Screening & Care Systems Coordinator to ensure that new clinics are supported with the information they need.

The forms and work flow processes that were created by OPIP have been very successful. It has allowed medical providers to understand when to refer, and has given them handouts for parents about community resources. The Screening & Care Systems Coordinator will ensure these forms are kept up-to-date, and that they are culturally relevant and translated into other languages.

The Screening & Care Systems Coordinator will continue to bring medical providers and early intervention together to ensure all systems are working and communicating effectively. For example, at a recent with CHAOS, WESD and MPELH, WESD reported they have seen an increase in parents declining services after being told that early intervention services are voluntary. It is important for parents to be receiving the same message from early intervention and their medical provider. CHAOS and WESD discussed that a possible solution is that from the first stage of referral, doctors can

emphasize that services are voluntary. CHAOS also stated they could add an emphasis into their 36 hour phone call, telling parents that while the services are voluntary, the doctor believes they would be very helpful for the child. These sorts of conversations are key to the long-term success of connecting early intervention and medical providers.

The Screening & Care Systems Coordinator will support early learning providers in adopting the new ASQ Online tool. Once all providers have the ASQ Online up and running, the Screening & Care Systems Coordinator will compile and analyze data. This data will help inform further follow up that may be needed.

The Marion & Polk Early Learning Hub has the experience needed to manage the budget requirements and implement this project. MPELH previously received a transformation grant to implement a system to get ASQ screening results to doctors. In addition, MPELH received several grants and coordination funds from the state of Oregon to do our work. We have the capacity to manage the funds through our accounting system and processes. In addition, we are custom to producing reports and information on grant funded activities.

This combination of increasing quality screenings and increasing pathways to referrals, are an important part of a broader picture of supporting children's long-term success in Marion and Polk counties.

Impact and Project Purpose:

The impact of this project is that children are referred to services that are appropriate for their family and circumstances. Medical providers will be provided with tools to support them in making decisions on when to refer. Early learning providers will use the ASQ online to ensure quality screenings to determine when to refer. Early learning providers and medical providers will increase the rates of appropriate developmental screening, and increase the rates of appropriate referrals.

This work will also impact children receiving appropriate referral follow up services. Medical providers in both Marion and Polk County will receive information about community resources, including Family Link, and parenting education options. By bringing early intervention and medical providers together, we can work at a common language with which to talk to families. As parents hear the same language from both providers, they will more fully understand the importance of accessing services. This will increase the numbers of families accessing services. Then, by sharing information on the follow-up to the referral, providers can increase client follow through on referrals.

Evaluation Measures:

Goals:

1. Collect data from early learning providers about children's developmental needs in our community. By using the ASQ online, data will be able to be pulled about children who are enrolled in early learning programs.
2. Increase the quality of developmental screenings. The ASQ Online has an ASQ calculator that accurately calculate the child's age or adjusted age. The database then provides the correct

ASQ to use, virtually eliminating the possibility of error.

3. Increase the number of appropriate referrals from medical providers to early intervention.
4. Increase the number of clinics that are implementing the tools initially created by OPIP. At least two more clinics will implement these processes during 2018.
5. Increase communication and referrals between early intervention and medical clinics. Medical clinics and WESD will share data about referrals made and received.

Sustainability:

Many of the strategies, once implemented, are self-sustaining. There will need to be some updates to forms as resources in our community change, but the information about wen to refer, and the referral pathways will not change. WESD, CHAOS, and the Marion & Polk Early Learning Hub are all committed to the long-term success of this work, and will provide staff time in the future to sustain this work.

Budget and Budget Narrative:

Item			**In-Kind**
Screening & Care Systems Coordinator	.5 FTE and benefits to coordinate early learning providers adopting new ASQ system; work with additional clinics; aggregate and analyze data; develop materials to support families.	28,066.72	28,066.72
WESD Staff	1.0 FTE to support communication between medical clinics and WESD; work with Screening & Care Systems Coordinator on referral process	45,898.13	
ASQ Online License	Subscription for up to 8 early learning providers and MPELH to have access to online ASQ system for one year	499.95	
ASQ Online	ASQ Online charges $.50 per screening entered with participating providers	5,000	
Tablets, software and accessories	Purchase of 25 Tablets for providers to use in the field; including the Tech Help software, docking station, protective cases, keyboards	25,000	
Hot spots	For use with tablets in environments where no Wi-Fi is available	5,000	
Travel	Travel to and from clinics	1,000	
ASQ Kits	Provide ASQ kits and materials to participating programs if they do not already have	2,750	
ASQ Training	Provide training for providers		4,500
Material development	Development of materials and information for medical providers to use when making referrals.	5,000	
TOTAL		**118,214.80**	**32,566.72**

Willamette Valley Community Health

V. Transformation Program Project Certification

The undersigned hereby certifies the following:

- I have the requisite authority to submit this application and agree to and am responsible for, the terms and conditions of the Transformation Project on behalf of the applicant.
- This project request does not violate the applicant's Code of Ethics or Conflict of Interest Policy.
- All information provided on this application and any attachments are true and correct. Applicant confirms it shall advise WVCH promptly of any change in information concerning the use of WVCH funds.
- Project funds promote improvements in healthcare status or outcomes for Marion and/or Polk county WVCH CCO members. The proposal aligns with the scope and values of WVCH.
- It is understood and agreed upon that neither this application nor the acceptance of funds creates any obligation on the part of any person or entity to enter into any further contracts or agreements.
- Applicant agrees to comply with all federal and State laws, rules and regulations including reporting requirements.
- Applicant agrees that the funds requested shall be used solely for the purposes indicated in this application. Funds will not be received nor awarded with the expectation of obtaining or retaining the business of the recipient organization.
- If any funds from this project remain unspent after payment of expenses, applicant shall repay those funds to WVCH within 30 days of the end of the grant.
- WVCH reserves the right to audit the project. Applicant agrees to allow timely and reasonable access. Applicant shall provide copies of receipts and/or invoices related to the expenditure of project funds. .
- Upon signature by both parties, the agreement shall become binding between WVCH and the applicant organization.
- WVCH is the sole arbiter for determining projects selected for funding. All applications submitted to WVCH shall become the proprietary property of WVCH.

Aug 14, 2017

Signature of Applicant **Date**

LISA HARNISCH, EXECUTIVE DIRECTOR Aug 14, 2017

Print Name and Title **Date**

Marion Polk Early Learning Hub, Inc.

Board of Directors

Name	Officer	Organization	Phone (Office)	Mobile
Andretta, Dean	Treasurer	Willamette Valley Community Health (CFO)	503-587-5107	503-508-7134
Kuhn, Steve		Silverton Together		503.383.5716
Mackay, Heidi		West Salem ACE Hardware	503-363-3669	503-428-0698
Rheinholdt, David		Rheinholdt Insurance	503-363-3160	503-910-2247
Dodson, Donalda		Oregon Child Development Coalition, Executive Director	971-224-1004	503-866-3048
Kenagy, Marguerite		Family Building Blocks, Healthy Families Program Director	503-990-7431, ext 112	
Palazzo-Angulo, Annalivia		Salem-Keizer Coalition for Equality, Executive Director	503-363-8130	
Riggs, Leslie		Confederated Tribes of Grand Ronde, Executive	503-879-2275	
Blea, Phil		Marion County Children's Behavioral Health	503-585-4978	503-991-6921
Zeiker, Wendy		Polk County Public Health, Nurse Supervisor	503.623.8175 x2112	
Novotney, Dave	Secretary	Willamette ESD, Superintendent	503-540-4416	503-949-1305
Perry, Christy		Salem-Keizer School District, Superintendent	503-399-3001	971-600-8995
Ransom, Chuck		Woodburn School District, Superintendent	503-981-2727	
Taylor, R		Chemeketa Community College	503-399-6149	
Udell, Tom		The Research Institute at Western Oregon University, Director	503-838-8785	
Vickery, Dorie		Central School District, Director of Curriculum, Instruction and Federal Programs	503 606-2249	
Rhoades, Kathryn		ELH Parent Advisory Committee, Chair Elect	503-917-9484	
Long, Miranda		ELH Parent Advisory Committee	503-838-2818	503-457-6556
DeMoe, Brent		Polk County Family and Community Outreach Manager	503.623.9664 x2118	503.932.7434
Fredericks, Ormond		DHS Child Welfare	503-378-3990	503-703-768
Reeves, Jon		Mid-Willamette Valley Community Action Agency, Executive Director	503-585-6232	
Seymour, Jim	Chair	Catholic Community Services, Executive Director	503-390-2600	

Form **W-9**
(Rev. December 2014)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Marion and Polk Early Learning Hub, Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☑ S Corporation ☐ Partnership ☐ Trust/estate
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
☐ Other (see instructions) ▶

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any)
Exemption from FATCA reporting code (if any)
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
2995 Ryan Drive SE, Suite 100

Requester's name and address (optional)

6 City, state, and ZIP code
Salem, OR 97301

7 List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number
			–			–				

or

Employer identification number
4	6	–	2	4	5	4	8	9	3

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here | **Signature of U.S. person** ▶ Lisa Hannah | **Date** ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at *www.irs.gov/fw9*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: SEP 05 2014

EARLY LEARNING HUB INC
2995 RYAN DR SE STE 100
SALEM, OR 97301-5157

Employer Identification Number:
46-2454893
DLN:
17053333329003
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
April 4, 2013
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Tamera Ripperda

Director, Exempt Organizations

Letter 947

hub inc.
MARION & POLK EARLY LEARNING HUB

earlylearninghub.org

August 14, 2017

Disclosure of any and all conflicts of interest:

Lisa Harnisch, Executive Director for the Marion & Polk Early Learning Hub, sits on the Board of Directors for Willamette Valley Community Health.

(503) 485-3219 | info@earlylearninghub.org | 2995 Ryan Drive SE, Suite 100 Salem, OR 97301