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**Rhode Island KIDS COUNT releases new Issue Brief:
Young Children with Developmental Delays & Disabilities**

Increasing access to a coordinated system of developmental screenings, intervention, and education can significantly improve outcomes for young children

Providence, RI (November 15, 2013) – Rhode Island KIDS COUNT released its newest Issue Brief – ***Young Children with Developmental Delays & Disabilities*** – at a policy roundtable attended by policy makers, education leaders, state agencies, and community members. The event was held on Friday, November 15, 2013 from 10:30 a.m. – 12:00 p.m. at Hasbro Children’s Hospital, 593 Eddy Street, in Providence.

Elizabeth Burke Bryant, Executive Director of Rhode Island KIDS COUNT, Eileen Howard Boone, Senior Vice President of Corporate Philanthropy and Social Responsibility at CVS Caremark, and Dr. Timothy Babineau, President & CEO, Lifespan/Rhode Island Hospital provided opening remarks. Rhode Island KIDS COUNT Senior Policy Analyst Leanne Barrett presented the findings. Dr. Yvette Yatchmink, Hasbro Children’s Hospital; Dr. Michael Fine, Director of the Rhode Island Department of Health; Janice DeFrances, Director, RI Department of Children, Youth and Families; David Abbott, General Counsel/Deputy Commissioner of the Rhode Island Department of Education, and Deborah Florio, Administrator, Center for Child and Family Health, RI Executive Office of Health & Human Services provided comments to start the roundtable discussion among participants.

Speakers at the event emphasized the benefits young children receive from early developmental screenings, and high-quality intervention and education programs. “The combination of developmental screenings, a strong referral system, and timely intervention and education is critical for young children with developmental delays or disabilities,” said Elizabeth Burke Bryant, Executive Director of Rhode Island KIDS COUNT. “Providing these children and families with early detection, as well as a strong continuum of care throughout the developmental process, can significantly impact the likelihood of success throughout their life.”

Developmental delays are identified when a child does not reach developmental milestones at the same time as other child his or her age. Some children with developmental delays are eventually diagnosed with a disability, while others catch up to their peers when therapy or intervention is provided. The Issue Brief and policy forum discussed access to and the quality of Rhode Island’s developmental screening, referral, intervention, and education system for young children with developmental delays and disabilities, as well as key strategies for improvement.

The Issue Brief was developed with support from CVS Caremark. Eileen Howard Boone stated, “CVS Caremark is committed to helping children of all abilities on their path to better health. We felt it was important to support this publication because it provides vital data and connects early learning, education, and health systems in a way that has not been done

before. It is a valuable tool that can be used by state leaders, youth-serving agencies, and advocates to improve services for children and their families across Rhode Island.”

Approximately 15% of children in the U.S. have developmental disabilities. Children from low-income families are more likely to experience disabilities than children from higher-income families and boys are more likely than girls to have a disability. Children who are most at risk for developmental problems are those that have experienced multiple risk factors during early childhood including poverty, domestic violence, a biomedical risk condition, child maltreatment, and/or having a single parents, a parent with a mental health problem, or teenage parent.

In Rhode Island, 3,967 children under age three received Early Intervention services (2012); and 56% of children ages 3 to 5 received a developmental screening through a school district’s Child Outreach program (2012-2013 school year). During the 2012-2013 school year, there were 2,565 preschool-age children (ages three to kindergarten entry) who received special education services in Rhode Island.

Participants at the policy roundtable noted successes and challenges in Rhode Island’s developmental screening, referral, intervention, and education system for young children with developmental delays and disabilities.

Successes

- All Rhode Island public school districts provide free developmental screening for all children ages three to five through the Child Outreach program. In 2012-2013 in Rhode Island, just over half (56%) of children ages 3 to 5 received a developmental screening through a school district’s Child Outreach program.
- The Rhode Island Department of Health is expanding the KIDSNET database (Rhode Island’s integrated child health information system) to coordinate developmental screening data across the state, including screenings by physicians, school districts, and some early care and education and home visiting programs.
- The Rhode Island Department of Children, Youth and Families, the Early Intervention Program, and the First Connections home visiting program have formed a task force to improve referral, screening, and participation rates for young children that are at very high risk for developmental delays and disabilities, including those who have experienced maltreatment.

Challenges

- Children in the four core cities, with the highest percentages of children living in poverty, are less likely to receive preschool special education services than children in the remainder of the state. They are also less likely to receive services in an inclusive setting along with typically developing children. The Rhode Island Department of Education is currently working to address these geographic inequities.
- As the Rhode Island Executive Office of Health and Human Services implements newly revised eligibility guidelines for Early Intervention, it is important to ensure that children with multiple risk factors for poor developmental outcomes continue to have access, particularly in the four core cities where poverty is most concentrated.

Recommendations

The Issue Brief offers specific recommendations, including:

- Continue to ensure access for all children to affordable, comprehensive health coverage. Preserve current Medicaid benefits and use Essential Health Benefit provisions in the Affordable Care Act to ensure parity of benefits in commercial insurance.
- Ensure all families with young children have regular opportunities to receive recommended health, developmental, and autism screenings through their medical home, school district's Child Outreach program, early learning program, and/or home visiting program.
- Use the EPSDT provision to ensure all low-income children insured through Medicaid receive recommended developmental and autism screenings and necessary treatment.
- Develop supports and incentives for health care providers, school districts, and early learning programs to use the new functionality in the KIDSNET database to help locate children for developmental screenings and to coordinate and share developmental screening data. KIDSNET developmental screening data should be used to develop and target outreach, trainings and supports to health care providers, school districts, and early childhood programs so fewer young children fall through the cracks and miss developmental screenings.
- Improve information and referral networks to ensure that children who screen positive for potential developmental problems are referred for comprehensive evaluation and services.
- Ensure that all children with developmental delays and disabilities have a high-quality medical home that can help them navigate complex health and education systems in order to obtain needed services.
- Make sure that children with multiple risk factors for developmental delays can continue to qualify for Early Intervention services in Rhode Island. Expand Rhode Island's definition of eligibility for Early Intervention to specifically include at-risk infants and toddlers. Although Rhode Island has a history of serving children with risk factors for poor outcomes under the "multiple established conditions" eligibility category, the state does not currently include "at-risk" children in the official definition. Research clearly shows that children with multiple risk factors are the most vulnerable to poor health and development.
- Address remaining barriers to fully implement the federal mandate requiring states to refer all children under age three with substantiated cases of child maltreatment to Early Intervention. Infants and toddlers who have been maltreated are six times more likely to have a developmental delay.
- Address geographic inequities in access to preschool special education, particularly in the core cities where poverty is concentrated, by improving the transition process from Early Intervention, reviewing the referral and eligibility determination process for each district, and using data to drive improvement in access.

- Expand access to inclusive early care and education settings for young children with developmental delays, disabilities and behavior challenges. Enhance supports available to community-based early care and education programs including support to provide a high-quality general education program, on-site mental health consultation, and help improving facilities to better accommodate children with disabilities.
- Use the state education funding formula, Title I resources, and Head Start and other community partnerships to expand access to high-quality inclusive preschool, particularly in the core cities.
- Identify ways the Kids Connect program can ensure that low-income children with moderate to severe special needs are enrolled in high-quality early care and education programs and that supportive services are effective.
- Expand professional development for the Early Intervention and preschool special education workforce. Additional resources are needed to help early childhood professionals better identify and respond to ASDs, social-emotional and mental health problems in young children, strengthening parent-child relationships and addressing toxic stress factors of poverty, substance abuse, domestic violence, maternal depression, and child maltreatment.

“The Issue Brief highlights the need for a timely, coordinated system of care for our children with developmental delays and disabilities and those that are at high-risk for developmental problems,” stated Ms. Bryant. “While Rhode Island has made progress in identifying and serving these children and families in high-quality programs, we can do better to make sure that coverage and services are available for all who need them, that they are coordinated, and that transitions between programs are smooth for children with disabilities and their families.”

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Rhode Island KIDS COUNT is a statewide children’s policy organization that works to improve the health, economic well-being, safety, education and development of Rhode Island children.