

Health Screening Project for Early Intervention

Children are better served when there is a recognition of the interplay between health and learning. The State of Oregon has recently strengthened its commitment to Early Intervention (EI) services; recognizing that while these services are primarily educational, there are health imperatives as well. The Oregon Department of Education and the state Title V agency for Children with Special Health Needs (OSCSHN) developed an interagency plan that would support a healthy start for young children.

This interagency group of health and education professionals met and agreed that the health issues of children referred to EI were all too frequently ignored. A systematic way to ensure that every child referred would have their health screened was developed. In planning this system health and education professionals overcame some obstacles associated with their different approaches, emphases and responsibilities in relation to children commonly served. In spite of their differences the group recognized the need for a consistent look at the health of these children and developed an ideal health component for EI.

System to Exist in Each Community

The system to be followed in each community was developed to ensure that a health professional remains involved as long as necessary. The nurse decides the extent of his/her involvement based on the results of each assessment.

The model includes the following:

- EI administers the Health Screening Questionnaire (HSQ)
- EI refers to designated RN if any "yes" answers appear on the HSQ
- RN assesses and reviews HSQ and/or health records, when appropriate
- RN conducts parent interview, physician interview, and refers for additional assessments, if needed
- RN participates on MDT, reports results to EI and participates on IFSP

Community Planning Process

The process that was developed asked each community to identify what parts of the model were already being implemented, to determine which pieces needed to be added and to select which individuals could best provide that service. Every county in the state has a different way of providing service to this population; therefore, the program may look different in each community, the key players may vary.

Health Screening Questionnaire (HSQ)

The HSQ was developed by physicians, nurses and educators so that any "yes" answer was a red flag and caused a referral to a nurse. The questionnaire is brief, easy to administer and can be used as an interview tool or a self-administered questionnaire. It has been translated into Spanish.

Pilot Project

The model was piloted in three counties. One county was large and urban; the other two were smaller, rural counties. During the pilot it was important to learn the workload required to do each phase. The final objective was to determine the feasibility for statewide implementation of the EI health component.

An orientation and training day were held for health and education professionals involved in each community. Time was provided for the professionals to meet together and begin to plan how the model would be implemented in their community.

After six months of operation, the pilot was evaluated. The results were very positive. People found that it took little time and provided consistency in looking at all children. Informal positive feedback was received from parents who expressed that the process addressed the total needs of their child. It was recommended that the program be expanded to other parts of the state.

Current Status

An open invitation to all thirty-six counties was extended. An orientation and training was held for those interested. Currently sixteen counties throughout the state are participating.

For More Information Contact.. .

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