Clinical Issue/Practice Problem

- One in six children has at least one developmental delay.
- The American Academy of Pediatrics (AAP) developed guidelines for early identification and referral for evaluation.
- Resources are limited for 3 to-5-year-olds with developmental delays.
- Preschool special education programs can help fill this void.
- Provider gaps in knowledge, confidence and consistent practices impact referral rates.

Project Aim

Improve percent of referral of children 3 to-5-years of age with developmental delays that risk school readiness for preschool special education programs by 25% over same time period of the previous year. Maintain percentage change over 10-month period post-implementation.

Summary of the Supporting Literature

- Guidelines, policies and position statements for routine surveillance and screening of children for developmental delays and refer for evaluation and interventions (AAP, 2016).
- Van Cleave et al., (2012) conducted a systematic review and found that pediatric PCPs report a lack confidence with diagnosing and referring children with delays.
- Shah, Kunnava, and Msall, (2013) surveyed pediatric PCPs and reported a lack of understanding of special education services and lack confidence in counseling families about Individualized Education Plan (IEP) process.
- Silverstein et al., (2004) found in a randomized control study that when PCPs initiate contact with a local preschool agency, there is an increased chance of enrollment.

Key References


Intervention focus: To increase provider knowledge and confidence regarding the streamlined referral process.

Plan-Do-Study-Act Cycle QI tool used.

Collaboration with Chicago-based Child Find Coordinator for preschool screenings.

Project stakeholders and champions identified.

Preschool Special Education Referral Packets created and placed in pediatric PCP clinics.

Project presented to pediatric faculty leadership in staff meeting and 1:1 in-services.

Pediatric residents and medical students attended slide lecture presentations.

Marketing pens “Preschool for Me” disseminated.

Retrospective chart review conducted during 8-week implementation period and results compared to same period one year prior and 10-months following project implementation.

Outcomes

Knowledge and confidence of providers increased from 45% to 80% in both categories following an educational presentation.

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<th>Questionnaire</th>
<th>Pretest</th>
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<tr>
<td>% Correct</td>
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<td>% Confidence to Refer</td>
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Percentage of eligible 3-to-5-year-olds that were referred for preschool services doubled from 28% to 57% during initial 8-week. Percentage slightly decreased 10-months post project implementation.

This QI initiative demonstrates that referrals for with developmental delays or risk for school readiness can be improved through educating providers on the importance and ease of the streamlined referral process.

Clinical Implications for Practice

- Pediatric PCPs play a pivotal role in identifying young children with developmental delays and referring for further evaluation and treatment.
- Children 3-5-years of age can receive services for developmental delays that affect learning through preschool special education programs.
- Pediatric providers can successfully implement the AAP guidelines and policies and position statements regarding identification of developmental delays and risk for school readiness and referrals using a streamlined process.
- Pediatric residency and nurse practitioner programs should include education regarding preschool special education programs and referral process into their curriculums.

Next Steps

- Educational content will be presented to new pediatric residents at UIC during their rotations.
- Expand use of Preschool Special Education Referral Packets in applicable pediatric sub-specialty clinics.
- Educational content to be added to the pediatric nurse practitioner curriculum at UIC.
- Department of Pediatrics to continue to partner with Child Find coordinator to provide timely birth to five developmental screenings.

Acknowledgements

We thank the members of the University of Illinois Hospital and Health Science System, Department of Pediatrics for embracing the project including the research support specialist for her invaluable assistance with data analysis and interpretation.

We are grateful to the Chicago-based Child Find Coordinator for providing information about the screenings, referrals and evaluations for IEPs.
**Objective:** Approximately 12-16% of all children aged 3 to 17 years have at least one developmental delay. The American Academy of Pediatrics created evidence-based guidelines for providers that encourage early identification and referral for children with developmental delay. Although pediatric primary care providers are poised to link preschool-age children to school-based services, there are gaps in their knowledge and confidence in making referrals and inconsistent processes for referrals which challenges the translation of these guidelines into clinical practice.

This quality improvement project addressed specific barriers that prevent 3 to 5-year-old children from obtaining referrals for preschool special education programs. Interventions focused on increasing both provider knowledge of and confidence with the referral process and organizing the diagnostic and therapeutic referrals in a simplified manner for families to follow.

**Methods:** Streamlined referral packets were introduced with an instructional slide presentation and brief in-services for pediatric primary care providers in a mid-western academic medical center outpatient pediatric clinic.

**Results:** Knowledge and confidence of pediatric medical residents and students increased from 45% to 80% in both categories following the educational slide presentation. Percentage of eligible 3 to 5-year-old children that were appropriately referred for preschool special education services doubled from 28% to 57% during the initial eight-week implementation period when compared to the same population referred one year prior. Ten months following initial implementation, 53% of eligible children 3 to 5-years-old continued to be appropriately referred.

**Conclusion:** Increased education regarding the importance of early identification of developmental delay(s) and a streamlined referral process for pediatric primary care providers to use with families is a sustainable approach that ensures preschool children receive crucial, timely referrals for further evaluation and interventions needed for their developmental health and well-being.

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