

OSCAR G. & ELSA S. MAYER FAMILY FOUNDATION

FINAL GRANT ACCOUNTABILITY REPORT

(Please complete responses in the spaces provided)

1/27/15 \$50,000 The Children's Hospital of Philadelphia (CHOP)
Report Date Grant Amount Organization Name

Manuel Jimenez and Alexander Fiks jimenezm@email.chop.edu and fiks@email.chop.edu
Report Author's Name Author's Email Address

267-426-7475 3550 Market St 3rd Floor Philadelphia, PA 19104
Author's Phone Author's Postal Address

1/1/2013-12/31/14
Term of Grant

Purpose of Grant

1. To develop an intervention to promote well-informed decisions regarding early intervention and help families overcome barriers to service receipt.
2. To pilot test the impact of the intervention on parents' decision making and the initiation of early intervention.

Measurable Outcome #1 To develop an intervention to promote well-informed decisions regarding early intervention and help families overcome barriers to service receipt.

Outcome
Achieved Not Achieved Over Achieved

We achieved our first aim of producing a 3 minute video explaining child development and the early intervention program to help families of children identified with a developmental concern to make an informed decision regarding early intervention.

The video decision aid was developed through a rigorous process. We conducted 3 focus groups and 1 interview with 10 providers and 6 parents whose children were referred to early intervention to inform the development of the video decision aid. In addition to established international guidelines, this information was used to develop a 3 minute video explaining child development and the early intervention program to help families of children identified with a developmental concern to make an informed decision regarding early intervention. We obtained extensive feedback from 10 parents who receive primary care at CHOP, 12 providers, leadership from the early intervention agency and experts in child development. This feedback informed a second version of the video.

Measurable Outcome # 2 To pilot test the impact of the intervention on parents' decision making and the initiation of early intervention.

Outcome
Achieved Not Achieved Over Achieved

We achieved our second aim of pilot testing our intervention using a randomized controlled trail to assess the impact of a video decision aid and text message reminder on EI knowledge, attitudes, intention to pursue EI and referral outcomes.

Sixty-four parent child pairs from 2 urban pediatric clinics were recruited and randomized to receive the intervention or usual care. Parents who received the intervention were similar to those who did not. (77% of children <24 mos, 88% of parents African American, 57% ≤high school diploma). We also measured health literacy in all participants using a validated measure. One third of parents in this study had low health literacy.

Before and after surveys were collected to measure parent attitudes and knowledge regarding developmental delay and EI, as well as, intention to pursue EI. We called parents and asked them whether they made contact with EI and whether their child was evaluated by EI about 2 months after the visit. We also looked in the medical record to see if this information was available. We used the appropriate statistical tests to measure differences in attitudes and knowledge about developmental delay, intention to pursue EI, whether parents made contact with EI and whether an evaluation took place among the two groups.

Parent who received the intervention had increased knowledge of developmental delay and EI compared to parents who did not receive the intervention. For example, the percentage of parents who received the intervention who agreed or strongly agreed with the statement "A child who takes longer to talk, walk, or think may have developmental delay," increased from 25 to 45% whereas there was no significant difference in parents who did not. There was also a significant difference between parents who received the intervention and parents who did not on the attitude statement "Resources like Early Intervention can help my family and me." With 52% of those who received the intervention strongly agreeing after the visit compared to 30% in parents who did not receive the intervention.

Information about whether parents made contact with EI and whether the child was evaluated was available for 63/64 participants. 67% completed intake in the intervention group (20/30) compared to 64% in the control group (21/33). 57% completed EI evaluation in the intervention group (17/30) compared to 52% in the control group (17/33). Among parents with low health literacy, those who received the intervention were more likely to make contact with EI, 67% (8/12) compared to 40% (4/10) among those who did not receive it.

In this pilot study a video decision aid and text message intervention improved parent knowledge regarding developmental delay and EI. For parents with high likelihood of low literacy, more families who received the intervention were connected to the early intervention agency compared to those who did not receive the intervention. Although parents' knowledge of developmental delay and EI increased compared to the control group in the full sample, there were no significant differences in EI intake among the larger group. These results suggest that the intervention may help those at greatest risk for not connecting to services.

Measurable Outcome # 3 Restated (make certain to check the appropriate box below)

Outcome

Achieved

Not Achieved

Over Achieved

Please provide quantitative and qualitative data/explanations to support the above.

Not applicable

Please itemize any changes in Executive, Board or program leadership (please state changes in personnel and rationale).

Not applicable

Please itemize any changes in program or program outcomes (please state changes and rationale).

Not applicable

Please list any unintended outcomes (positive or negative) which were achieved.

Not applicable

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Please describe future plans for program, including funding and development of qualitative measurements of program's social impact.

The video will be made available to The Children's Hospital of Philadelphia extensive Primary Care Network. We are also exploring other avenues to disseminate the video with other providers (e.g. home visitors) in NJ and Pennsylvania. We have submitted an abstract to the Pediatric Academic Societies meeting the largest international pediatric meeting and a manuscript is in preparation so that others can replicate our work.

Attachments – Please attach the following documents:

1. Current organization operating budget from date of grant to present (actual vs. budget).
2. Current project data from date of grant to present (actual vs. budget).
3. Attach one “good news” article/item of your choice (optional).

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