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**Genesee**

A partner of the  
Early Childhood Investment Corporation

# ASQ: The Preferred Method of Screening

## What is it?

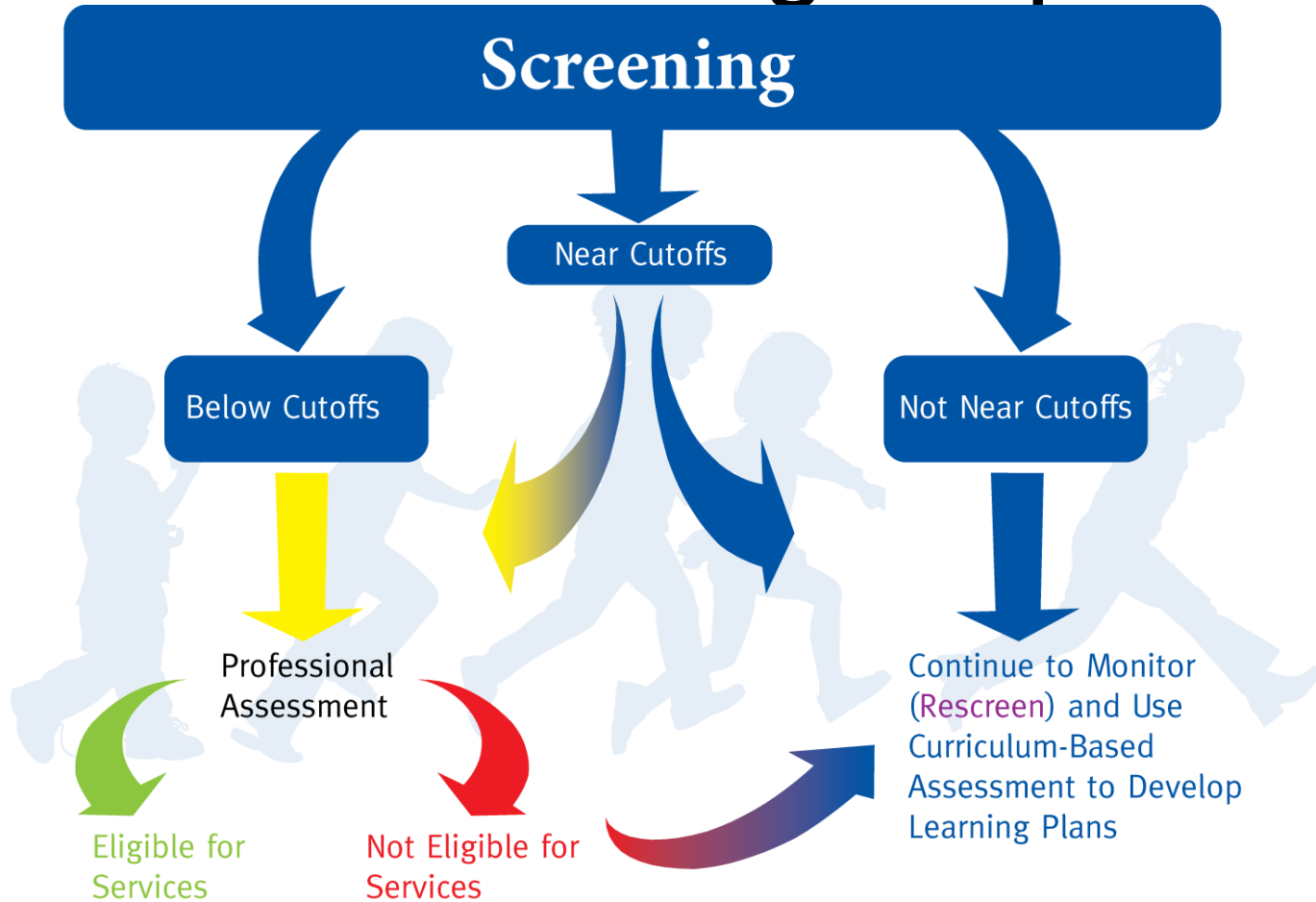
- A parent or caregiver screening tool that helps monitor a child's development
- Series of questionnaires for children ages two months to 66 months



# Screening

- A brief assessment procedure designed to identify children who should receive more intensive diagnosis or evaluation from local early intervention, early childhood special education, mental health or health systems.

# How Screening Helps



# Introducing the ASQ:SE to Parents

## 1) Review response options

- **Most of the time:** Child is performing behavior most of the time or too often
- **Sometimes:** Child is performing behavior occasionally, but not consistently
- **Rarely or Never:** Child is not or is rarely performing behavior.

## 2) Discuss “concerns” option

# The ASQ-3 Screens

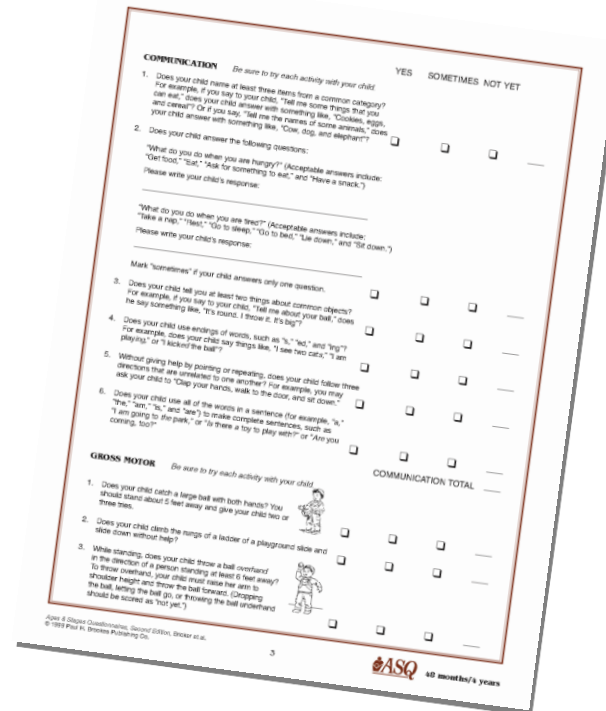
## Five Areas of Development

- Communication
- Gross motor
- Fine motor
- Problem solving
- Personal-social



# Introducing the ASQ-3

- Each area contains six questions in order of difficulty for an average child
- Questions answered “yes”, “sometimes” and “not yet”
- There is also an “overall” section for write in answers



The image shows a sample of the ASQ-3 Communication section. It is a form with a header that reads "COMMUNICATION" and "Be sure to try each activity with your child". Below the header, there are six numbered questions, each with a set of three checkboxes labeled "YES", "SOMETIMES", and "NOT YET".

1. Does your child name at least three items from a common category? For example, if you say to your child, "Tell me some things that you can eat," does your child answer with something like, "Chicken, eggs, and cereal"? Or if you say, "Tell me the names of some animals," does your child answer with something like, "Cow, dog, and elephant?"

2. Does your child answer the following questions: "What do you do when you are hungry?" (Acceptable answers include: "Get food," "Sit," "Ask for something to eat," and "Have a snack.") Please write your child's response: \_\_\_\_\_

"What do you do when you are tired?" (Acceptable answers include: "Take a nap," "Rest," "Go to sleep," "Go to bed," "Lie down," and "Sit down.") Please write your child's response: \_\_\_\_\_

3. Does your child tell you at least two things about common objects? For example, if you say to your child, "Tell me about your ball," does he say something like, "It's round. I throw it. It bounces?"

4. Does your child use endings of words, such as "s," "ed," and "ing"? For example, does your child say things like, "I see two cats," "I am playing," or "I kicked the ball?"

5. Without giving help by pointing or repeating, does your child follow three directions that are unrelated to one another? For example, you may ask your child to "Clap your hands, walk to the door, and sit down."

6. Does your child use all of the words in a sentence for example, "I am going to the park," or "Is there a toy to play with?" or "Are you coming, too?"

COMMUNICATION TOTAL \_\_\_\_\_

Below the communication section is the "GROSS MOTOR" section, which also has a header "Be sure to try each activity with your child" and three numbered questions with checkboxes. The questions are:

1. Does your child catch a large ball with both hands? You should stand about 5 feet away and give your child two or three tries.

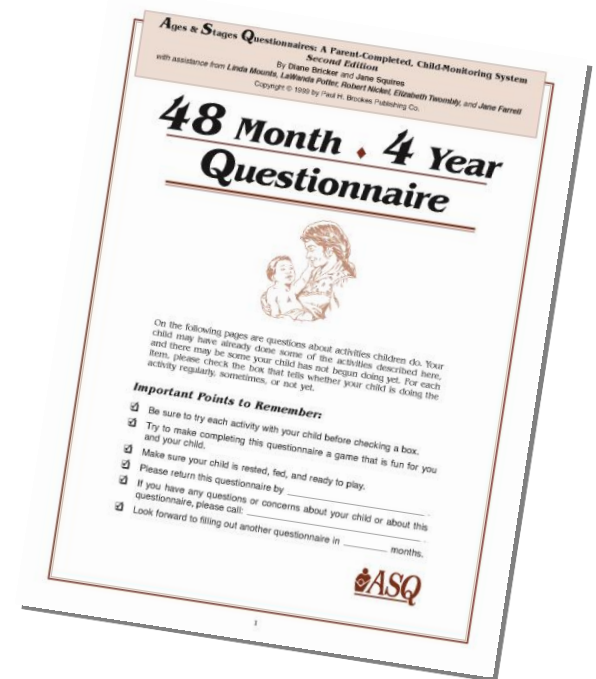
2. Does your child climb the rings of a ladder of a playground slide and slide down without help?

3. While standing, does your child throw a ball overhead in the direction of a person standing at least 6 feet away? To throw overhead, your child must raise her arm to shoulder height and throw the ball forward. Clapping the ball, tossing the ball up, or throwing the ball overhead should be scored as "not yet."

At the bottom of the form, there is a small logo for ASQ-3 and the text "40 months/4 years".

# Introducing the ASQ-3

- Questionnaires span 2,4,6,8,9,10,12,14,16,18,20,22,24 months
- And 27,30,33,36 months
- And 42,48,54,60 months



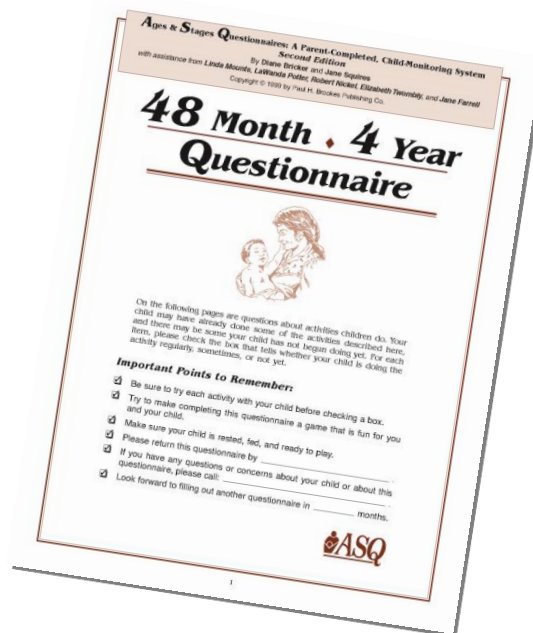
Full sample of 48-month questionnaire available at <http://www.agesandstages.com>.

Copyright © 1999 by Paul H. Brookes Publishing Co. All rights reserved.

Written by Diane Bricker and Jane Squires with assistance from Linda Mounts, LaWanda Potter, Robert Nickel, Elizabeth Twombly and Jane Farrell

# Ages & Stages Questionnaires: Social-Emotional (ASQ:SE)

- A separate tool from the ASQ to screen a child's social and emotional growth
- ASQ and ASQ:SE can be used concurrently



# Features of the ASQ:SE

- 6, 12, 18, 24, 30, 36, 48, 60 month Intervals
- Competence and problem behaviors targeted
- 3-6 month administration window (either side)
- 4<sup>th</sup> to 5<sup>th</sup> grade reading level
- Number of questions ranges from 19 (6-month interval) to 33 items (60-month interval)

# Why Assess Social-Emotional Development?

“Clear stages in emotional development in the first 6 years of life have been identified, disturbances at any of these stages influences the child’s present and the future adult’s attention, motivation, experience of pleasure, expression of affect, communication skills, style of interaction, and relationships with others.”

(Greenspan, 1992)

Behavioral Areas	Definition
<b>Self-Regulation</b>	Ability/willingness to calm, settle, or adjust to physiological or environmental conditions
<b>Compliance</b>	Ability/willingness to conform to the direction of others and follow rules
<b>Communication</b>	Verbal/nonverbal signals that indicate feelings, affect, internal states
<b>Adaptive</b>	Ability/success in coping with physiological needs
<b>Autonomy</b>	Ability/willingness to establish independence
<b>Affect</b>	Ability/willingness to demonstrate feelings and empathy for others
<b>Interaction with People</b>	Ability/willingness to respond or initiate social responses with caregivers, adults, peers

# Benefits of the ASQ

- **Easy to use**
- **Highly recommended**
- **Parent-report tool**
- **Gives reliable and accurate results**
- **Only tool that links to developmental milestones**
- **Includes follow-up activities**
- **Makes effective ongoing monitoring of development possible**



## 4 Month ASQ-3 Information Summary 3 months 0 days through 4 months 30 days

Baby's name: \_\_\_\_\_ Date ASQ completed: \_\_\_\_\_  
 Baby's ID #: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
 Administering program/provider: \_\_\_\_\_ Was age adjusted for prematurity  
 when selecting questionnaire?  Yes  No

1. **SCORE AND TRANSFER TOTALS TO CHART BELOW:** See ASQ-3 *User's Guide* for details, including how to adjust scores if item responses are missing. Score each item (YES = 10, SOMETIMES = 5, NOT YET = 0). Add item scores, and record each area total. In the chart below, transfer the total scores, and fill in the circles corresponding with the total scores.

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	34	60	●	●	●	●	●	●	●	●	○	○	○	○	○
Gross Motor	38	41	●	●	●	●	●	●	●	●	●	○	○	○	○
Fine Motor	29	62	●	●	●	●	●	●	●	●	○	○	○	○	○
Problem Solving	34	98	●	●	●	●	●	●	●	●	○	○	○	○	○
Personal-Social	33	16	●	●	●	●	●	●	●	○	○	○	○	○	○

2. **TRANSFER OVERALL RESPONSES:** Bolded uppercase responses require follow-up. See ASQ-3 *User's Guide*, Chapter 6.

- |  |     |           |  |     |    |
|--|-----|-----------|--|-----|----|
| 1. Uses both hands and both legs equally well?<br>Comments: _____    | Yes | <b>NO</b> | 5. Concerns about vision?<br>Comments: _____   | YES | No |
| 2. Feet are flat on the surface most of the time?<br>Comments: _____ | Yes | <b>NO</b> | 6. Any medical problems?<br>Comments: _____    | YES | No |
| 3. Concerns about not making sounds?<br>Comments: _____              | YES | No        | 7. Concerns about behavior?<br>Comments: _____ | YES | No |
| 4. Family history of hearing impairment?<br>Comments: _____          | YES | No        | 8. Other concerns?<br>Comments: _____          | YES | No |

3. **ASQ SCORE INTERPRETATION AND RECOMMENDATION FOR FOLLOW-UP:** You must consider total area scores, overall responses, and other considerations, such as opportunities to practice skills, to determine appropriate follow-up.

If the baby's total score is in the  area, it is above the cutoff, and the baby's development appears to be on schedule.

If the baby's total score is in the  area, it is close to the cutoff. Provide learning activities and monitor.

If the baby's total score is in the  area, it is below the cutoff. Further assessment with a professional may be needed.

4. **FOLLOW-UP ACTION TAKEN:** Check all that apply.

- Provide activities and rescreen in \_\_\_\_\_ months  
 Share results with primary health care provider  
 Refer for (circle all that apply) hearing, vision, and/or behavioral screening.  
 Refer to primary health care provider or other community agency (specify reason): \_\_\_\_\_  
 Refer to early intervention/early childhood special education  
 No further action taken at this time  
 Other (specify): \_\_\_\_\_

5. **OPTIONAL:** Transfer item responses (Y = YES, S = SOMETIMES, N = NOT YET, X = response missing)

	1	2	3	4	5	6
Communication						
Gross Motor						
Fine Motor						
Problem Solving						
Personal Social						

# Scoring/ Cutoffs

# After You Screen

- When a child's score is well above cutoff points
  - Provide follow-up activities and re-screen in 4-6 months
- When a child's score is close to cutoff points
  - Practice skills child had difficulties with
  - Re-screen in 4-6 months or sooner
- When a child's score is below cutoff points in one or more areas
  - Communicate what you have found
  - Address parental concerns
  - Refer child if necessary for further evaluation

# Remember...

- A child's environment and lifestyle will always play a role in how they score
  - Biological and health factors
  - Family and child care environment
  - Social supports
  - Developmental history
  - Family and cultural context
  - Parental concerns

# The ASQ Matters!

## Key Points to Remember

- The ASQ can help bridge communication with families
- Consider outside factors in the child's life before making a referral
- Use available resources to make decisions about what steps to take after screening

# Resources

## Ages & Stages <sup>®</sup> Questionnaire

- [www.agesandstages.com](http://www.agesandstages.com)
- [www.patnc.org](http://www.patnc.org)



# To Order the ASQ:SE

- ASQ:SE User's Guide and Questionnaires:  
\$125 for the set
- Paul Brookes Publishing  
[www.brookespublishing.com](http://www.brookespublishing.com)  
1-800-638-3775

The previous information was adapted from a presentation given by Sue Yockelson on 6/12/02 in Salt Lake City, UT.

# AGES AND STAGES ONLINE OTTAWA COUNTY



# TWO COMPONENTS

## OAISD -Site Administrator/Staffing

### ◎ Family/Caregiver

- Universal web address where parents/caregivers may access ASQ-3
- Promoted on a variety of websites

### ◎ Enterprise/Provider

- District Level Access for GSRP/Tuition Pre-K
- Multiple Buildings/Programs Within District

# HOW DOES IT WORK PARENT PERSPECTIVE

- Parents visit [www.oaisd.org/earlychildhood](http://www.oaisd.org/earlychildhood)
- Print off screen and do activities with child
- Enter results online
- ISD receives copy of screen via email alert
- Results communicated to parent



# ISD RESPONSE-WHITE

- Typical Development -Letter

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	25.17	55.00													
Gross Motor	38.07	60.00													
Fine Motor	35.16	50.00													
Problem Solving	29.78	55.00													
Personal-Social	31.54	55.00													

# ISD RESPONSE - GRAY AREA

- Communication delay in gray area is an automatic referral - Autism red flag
- Other domains: provide activities and monitor
- Complete another screen in 3 months

## 1. SCORING RESULTS:

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	24.02	55.00													☆
Gross Motor	28.01	40.00													☆
Fine Motor	18.42	30.00													☆
Problem Solving	27.62	60.00													☆
Personal-Social	25.31	60.00													☆

# ISD RESPONSE - BLACK AREA

- Automatic Referral to Early On/Special Ed - parent is called

## 1. SCORING RESULTS:

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	27.06	20.00					★								
Gross Motor	36.27	50.00											★		
Fine Motor	19.82	50.00											★		
Problem Solving	28.11	60.00													★
Personal-Social	31.12	45.00											★		

# ENTERPRISE/PROVIDER ACCESS

## Initial Focus Area and Process: GSRP - ISD wide

- Purchased ASQ kits - gathered key codes
- Identified district contact
- Created 'website' on Brookes Publishing
- Set up district 'page' and log-in
- Webinar Training/On-Going TA

## Next Phase

- Head Start/Private Childcare Centers
- Reach Out and Read Clinics
- Early On - CAPTA Referrals (Inquiry vs Referral)
- Spanish Version/SE Version (Staffing Issues)

# BENEFITS TO PARTNERS

## ◎ Family Access

- Privacy; scheduling
- Educates on normal development
- Resource/referral, if indicated

## ◎ Enterprise/Provider Access

- Database for Screens
- Maintained at ISD
- Runs Aggregate Reports
- Paperless
- Common County Tool - consistency for pd, dialogue, data, and referral to special education

# FUNDING/SUPPORT

## Initial Funding

- OAISD General Fund
- AARA Funds
- GSC Implementation Dollars

Future Funding.....depends on where we go and the leadership/support the community provides



**Oakland**

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# Ages and Stages Online: Oakland County

- Parents visit [www.greatstartforkids-oakland.org/developmentalscreenings](http://www.greatstartforkids-oakland.org/developmentalscreenings)
- Complete the online questionnaire
- Developmental Screening Specialist receives the score
- Response letter emailed to family
  - Score and what it means
  - Activities
  - Upcoming parent workshops and playgroups
  - Early learning calendar
  - Phone number for Developmental Screening Specialist for questions
  - If recommending a referral, phone number and contact information for that program



# Ages and Stages Online: Oakland County

- ASQ-3 (general development) is available to all families in Oakland County; as they complete the screening there is a prompt which gives the URL to complete a ASQ:SE
  - Brookes Publishing suggests that a social emotional screen is always done in conjunction with a general development screen
- If a child's score shows concern on the ASQ-3 in the "personal social" area and the parent did not complete the ASQ:SE we also send a prompt at that point in the letter to the family
- Of the general development screenings completed, about 25% of families also complete the ASQ:SE. We will be monitoring this as we move into FY11.



**Program Directory**

Early On: 248. 209. 2084 or 866.456.2084

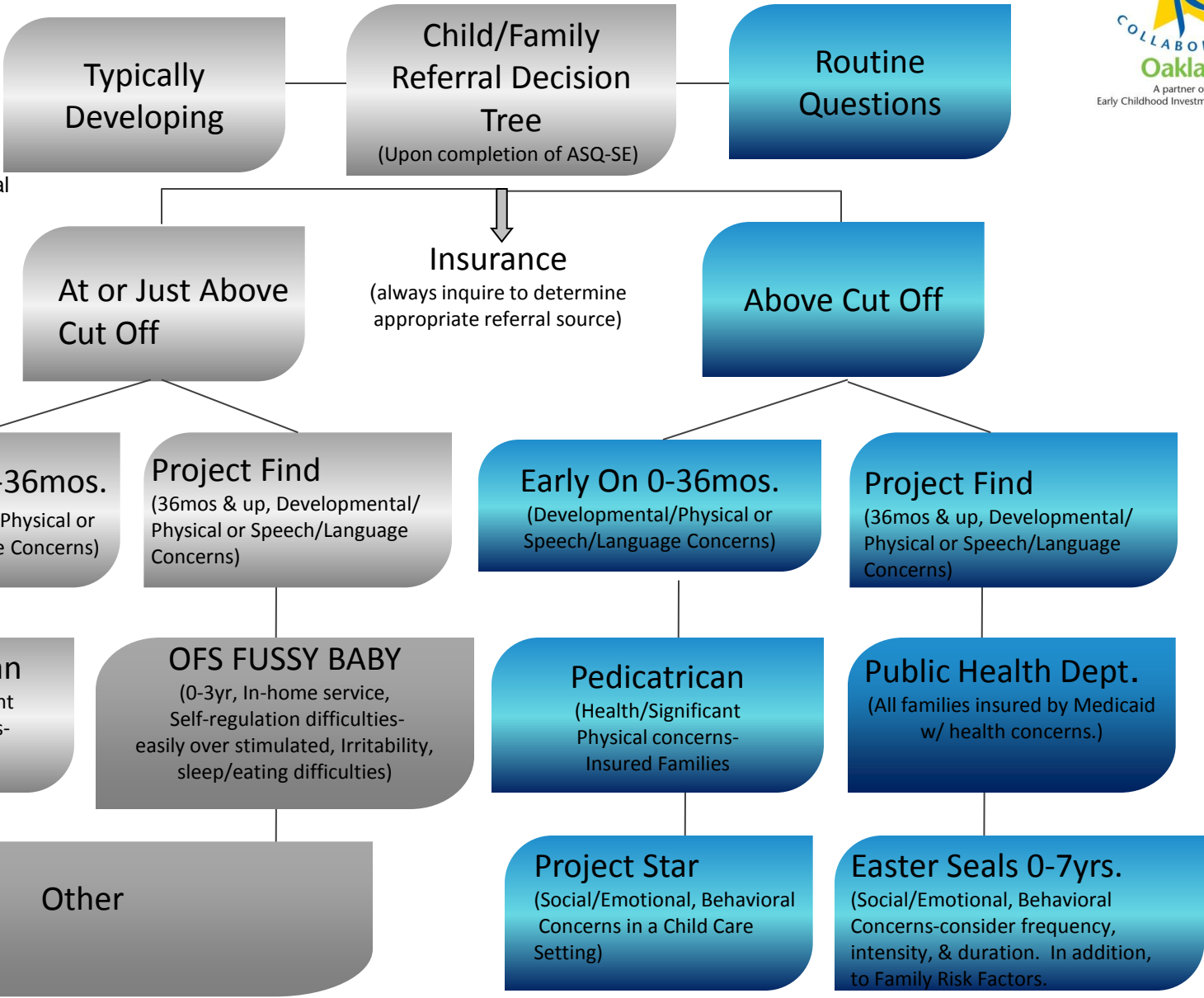
Project Find: 248. 209. 2258

OFS Fussy Baby: 248. 858. 7766 ext. 209

Project Star: 248. 209. 2366

Easter Seals- MI Infant Mental Health: 248. 483. 7804

Oakland County Health Division:  
Nurse on call- 248-858-1406



**For Emergencies- Always contact Pediatrician or Local ER**



# Pilot Site: Application Process

- Created an application process to select a diverse set of sites
- Helping sites see the benefits of being involved
- Benefits to sites include:
  - Access to the ASQ-3 and ASQ:SE online program for parents and staff (Starter Kits will also be available for programs)
  - Access to the data collected for your site
  - Technical assistance from an ASQ Technical Assistance Consultant with GSC-O



# Pilot Site: Application Process

- Pilot site preferences for phase 1:
  - Must serve a minimum of 75 children living in Oakland County ages birth to five years to provide ongoing ASQ screenings
  - At least a portion of the children served must be under age three and include infants as well as toddlers
  - At least 75% of parents must commit to participate by completing the online ASQ screening at suggested age intervals (approximately 2-3 months)
  - Must have computer and internet accessibility on site for staff and/or parents
  - Must attend 1 training on the system and 3 follow up technical assistance meetings
  - Must refer children to Early On, Project Find and other resources as appropriate
- Site will be selected based on diversity in geographic location, race/ethnicity of children, income level, program setting (i.e. child care, pediatrician office, parent support program, etc.)

# Supporting Pilot Sites

- ASQ Technical Assistance Consultant
  - Monitor pilot site performance
  - Point person for questions/concerns
  - Calls and face to face meetings to address challenges, next steps
  - Plan technical assistance meetings for pilot sites
    - 1<sup>st</sup> - focused on introducing system/initial information
    - 2<sup>nd</sup> - focused on addressing challenges/creating a timeline
    - 3<sup>rd</sup> - will focus on reporting
- Created a frequently asked questions page



# Health Division

- **Process**
  - Begin with Nurse Family Partnership program (home visiting)
- **Successes**
  - Have completed a lot of screenings
  - Bring technology to their home visits
- **Challenges**
  - Large site
  - Coordination and training



# Preschool Programs

- Process
  - Parent and teacher complete screen
  - Tool for discussion during conferences
  - Open to others in district
- Successes
  - Choice to start slow
- Challenges
  - Helping teachers to see benefits not an “extra thing”



# Home Visiting Programs

- Process
  - A part of the home visit
- Successes
  - Use as a follow up tool for when no longer in the program
- Challenges
  - For one program it is additional work (no technology during home visit)



# Pediatrician

- Process
  - During well child visits
- Successes
  - HIPPA requirements
  - Billing
- Challenges
  - Creating a system for a busy practice (whose responsibility, etc)

# Hospital

- Process
  - Children born at hospital receive letters at regular intervals for completing the screening
- Successes
  - An existing program on paper-now online
- Challenges
  - Monitor if being online increases or decreases number of screens completed



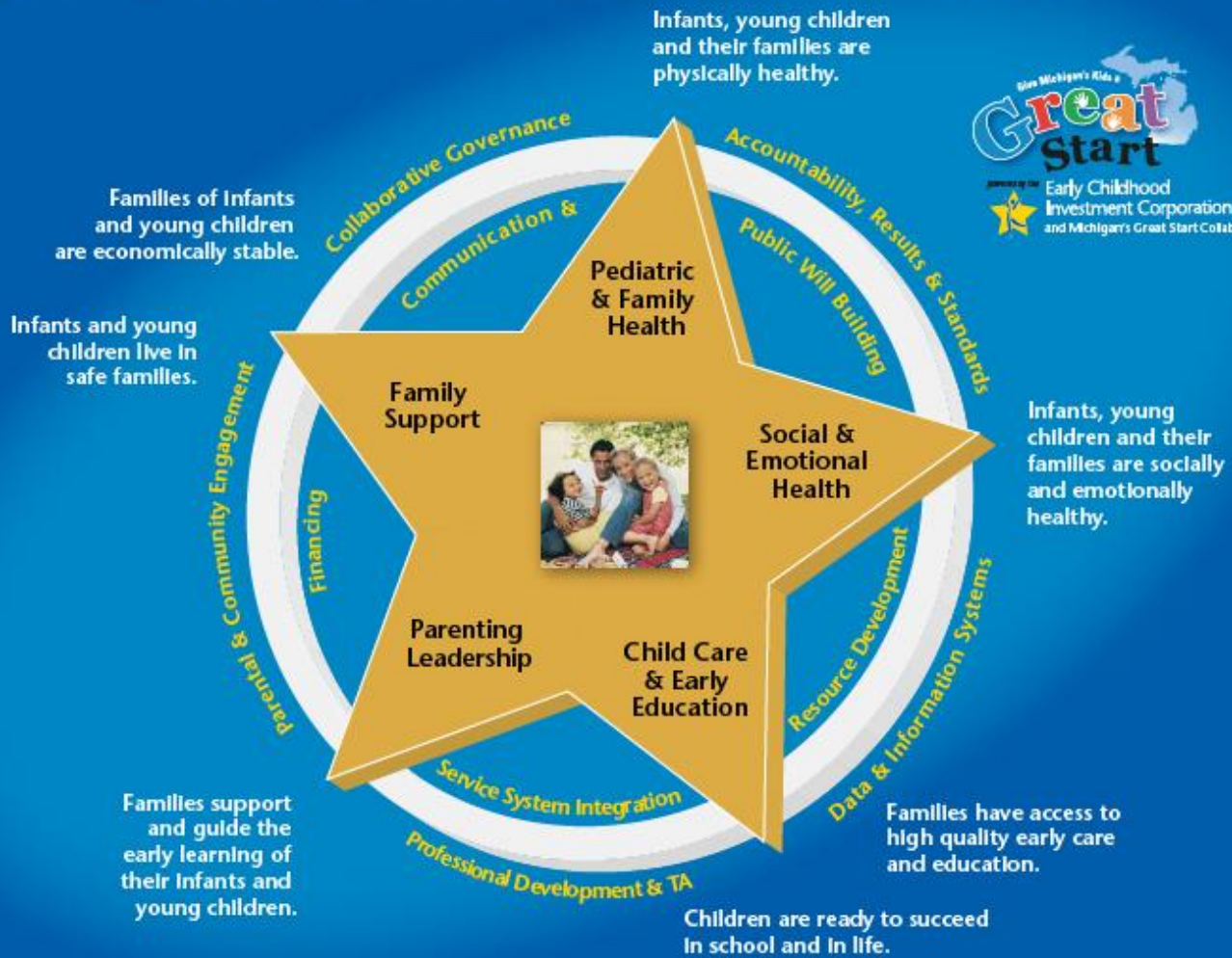
# Next Steps

- Goal for FY 2011 is to add 5 more pilot sites
  - Local hospital parenting program
  - Local hospital/pediatrician that serves high risk population
  - Homeless families
  - Early learning communities
  - School districts for school readiness data

# Cross-Component Application

## Michigan's Great Start Initiative

Vision: A Great Start to make every child in Michigan safe, healthy, and eager to succeed in school and in life.



# Ages & Stages Online



# Why is Genesee County doing this?

- ⦿ We have nearly the highest levels of risk factors of poverty, infant mortality, teen pregnancy and child abuse & neglect in the state
- ⦿ A system needed to be developed to start tackling these issues earlier
- ⦿ ASQ provides the opportunity for frequent monitoring
- ⦿ Early detection means children and their families get help sooner
- ⦿ Preventive care can save \$100s (even \$1000s) of dollars in later medical treatment and special education

**What were the pieces that got us started?**

# “Baby Court”

(MITC – Maltreated Infant-Toddler Treatment Court)

- Less than 5 years ago we only had 1 Infant Mental Health Specialist in the County
- Justice Maura Corrigan & Judge Weiss
- Support from United Way
- What does the current network look like
- CMH “support group model”
- Need for training beyond “Baby Court”



# SKIP to a Great Start

- ◎ Staff are all have basic training in IMH
- ◎ Children were being identified lacking the social skills to succeed in kindergarten
- ◎ Increased interactions with Teen Parents
- ◎ Poverty increasing creating higher stress on families
- ◎ Network of 60 parent educators across the county
- ◎ Resource/Referral

# HOW DOES IT WORK

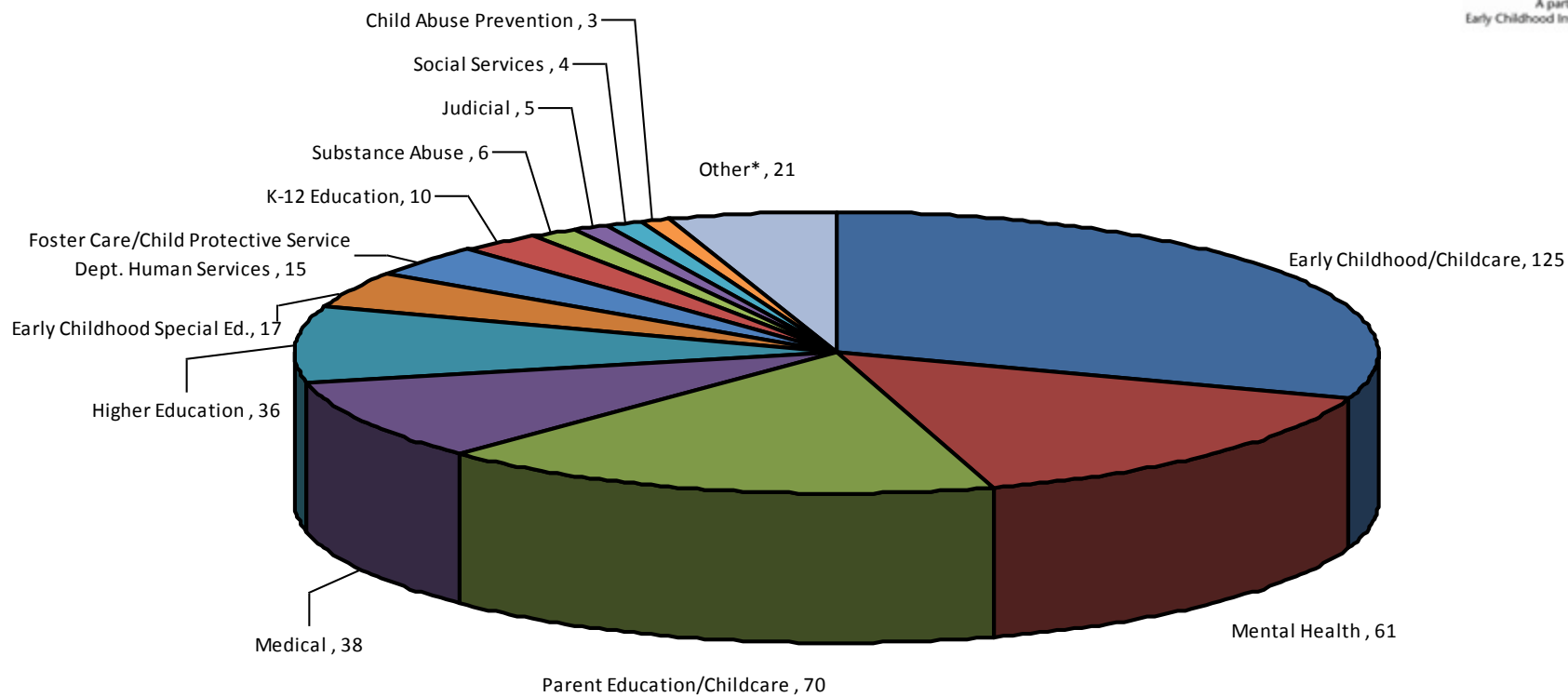
## PARENT PERSPECTIVE



- Parents visit [www.greatstartgenesee.org](http://www.greatstartgenesee.org)
- Complete the online questionnaire
- ISD receives copy of screen via email alert
- Results communicated to parent with information on community resources

<b>Employment Sector</b>	<b>Number of Attendees</b>	<b>Number of Training Impact Hours</b>
Early Childhood/Childcare	125	1,125
Mental Health	61	457
Parent Education/Childcare	70	980
Medical	38	322
Higher Ed	36	216
Early Childhood Special Ed	17	155
Foster Care/Child Protective Service/Department of Human Services	15	79
K-12	10	69
Substance Abuse	6	28
Judicial	5	36
Social Services	4	22
Child Abuse Prevention	3	24
Other*	21	96
<b>Total</b>	<b>411</b>	<b>3,609</b>

\*The other category is comprised of attendees where they did not list or we could not find where they were employed or the organization they represented.



# INFANT MENTAL HEALTH TRAININGS 2010

- “Importance of Attachment to Life” – February 25, 2010
- “Happiest Baby on The Block” with Dr. Harvey Karp – April 23, 2010
- “Understanding Relationship Development in Pregnancy and Early Postpartum” with Priscilla Tait, MS, CMN, IMH-E® (IV) – June 10, 2010
- “Sensory Integration” with Rhonda Mattiuzzo, Karen Carpenter and Theresa Flange, Occupational Therapists Registered – June 30, 2010
- “Developmental Perspectives on Intervention with Toddlers and Parents” with Douglas Davies, M.S.W., Ph.D. – September 9, 2010
- “Play in the Lives of Children” with Diane Kukulis, ACSW, LMSW

September 23, 2010



## Participants in ASQ Online

### Family/Caregiver

- Universal web address where parents/caregivers may access ASQ-3 and ASQ-SE

### Providers

- SKIP to a Great Start sites (All 21 School Districts)
- Optional for GSRP/Tuition Pre-K to purchase in
- GSRP Programs can access at no cost in collaboration with their local SKIP site
- Children's Trust Fund Secondary Prevention Partners (Hamilton Community Health Network & Easter Seals)

### Potential Providers

- Mott Children's Health Center
- Pediatrician's Office
- Head Start

# BENEFITS TO PARTNERS

- Family Access
  - Engages parents not involved with any early childhood program.
  - Educates on normal development
  - Resource/referral, if indicated
- Provider Access
  - Maintained at ISD
  - Runs Aggregate Reports
  - Paperless
  - Common County Tool – consistency for pd, dialogue, data, and referral to special education

# FUNDING/SUPPORT



## Initial Funding

- GSC Implementation Dollars
- Great Parents Great Start

Future Funding.....depends on where we go  
and the leadership/support the community  
provides



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# Ages and Stages Online: Pilot Sites

- This GSC-O project includes seven pilot sites who agreed to offer screenings to their clients.
- Unique range of types of sites:
  - Two preschools (Head Start, GSRP, Tuition Based Programs)
  - Two home visiting programs (work with parents in our most at risk community)
  - One hospital (ongoing screenings for births)
  - One pediatrician
  - Oakland County Health Division



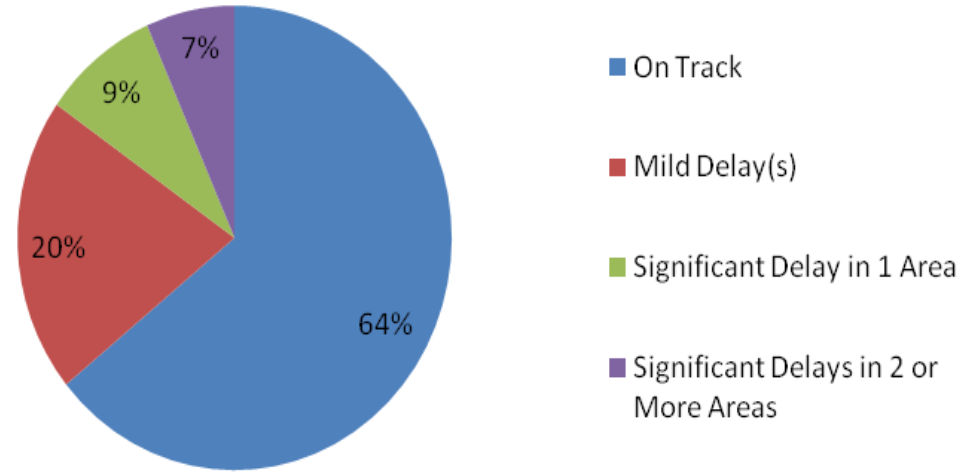
# Project Purpose/Intended Outcomes For Children and Families

- The overall goal for *families* is that parents would have a better understanding of their child's development (including social and emotional development).
- The ASQ-3/ASQ: SE offers parents:
  - A tool to help them observe and communicate about their child's growth
  - A road map for development in the early years
  - A link to community resources and supports
  - Reassurance
- This project allows us to offer research based interventions for children whose screening results show a developmental lag or a need for social emotional intervention.
  - These services will not only assist the development of targeted children, but they will encourage parent participation in the project and improve county wide school readiness.

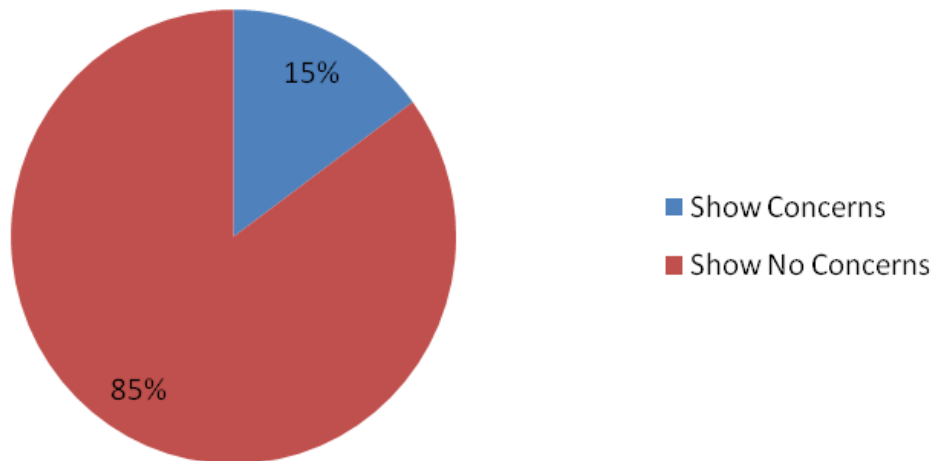


## Screening Results

## ASQ-3 Results



## ASQ:SE Results

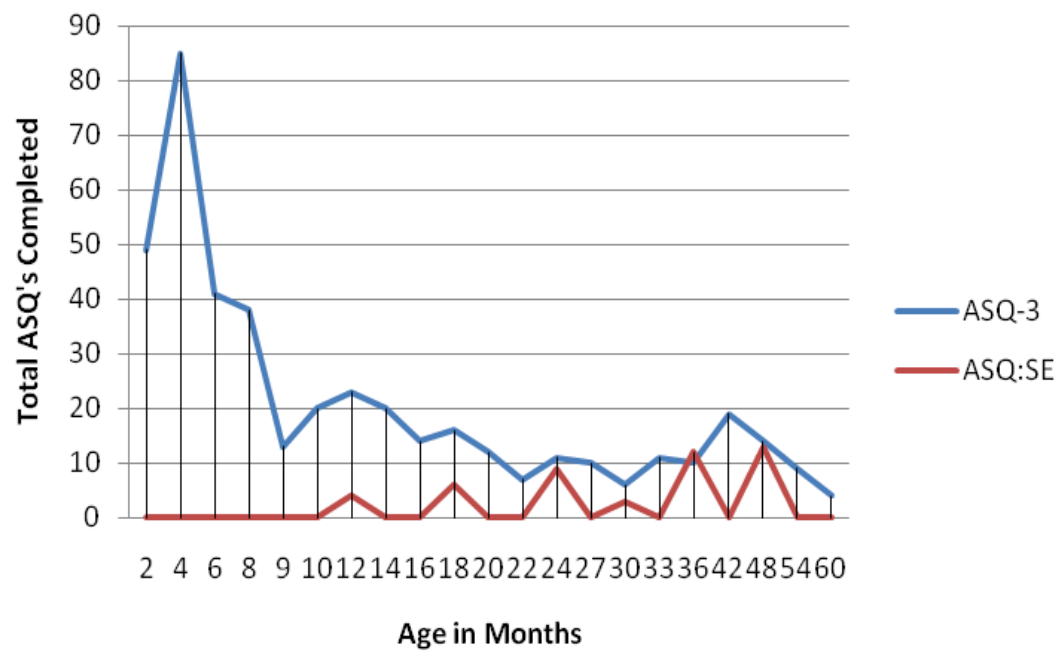
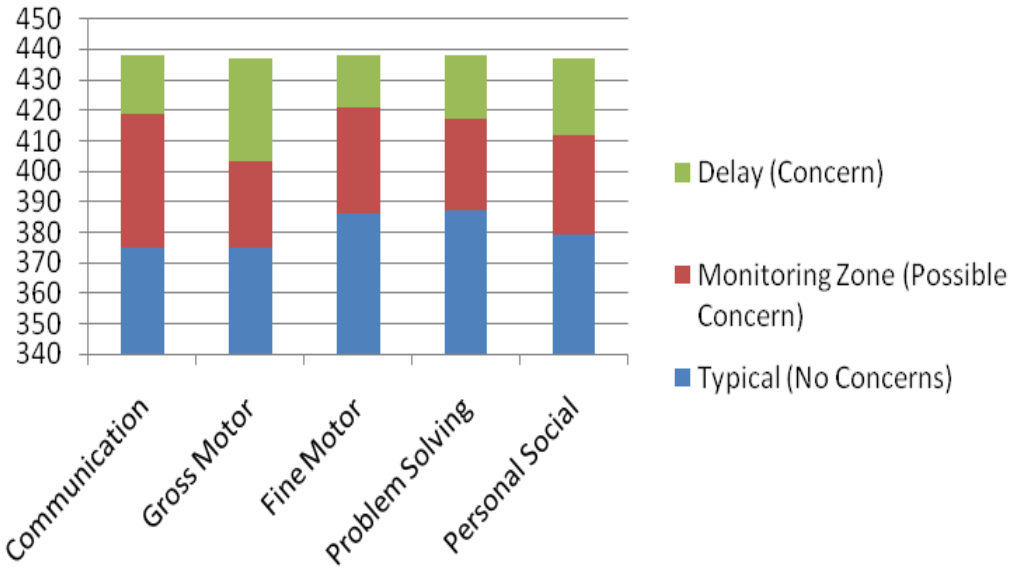




# Project Purpose/Intended Outcomes For Professionals

- The overall goal for *professionals* who work with young children is that they would understand the importance of developmental screenings as a first indicator for developmental delays.
- The ASQ-3/ASQ: SE offers professionals:
  - A tool to help them observe and communicate with parents about their child's growth
- This project allows us to provide training, coaching and support that allow early care and education staff to support the developmental and social and emotional needs of all children.
  - Using evidence based practice models for professional development including a national framework for supporting social and emotional competence developed by the Center on the Social and Emotional Foundations for Early Learning and the Technical Assistance Center for Social Emotional Interventions

# ASQ-3 Results by Category





# Project Purpose/Intended Outcomes For Our Community

- The overall goal for this project is that the use of *routine* developmental screenings would increase in Oakland county and that through increased screenings we would be able to build community data that would be used for future planning as well as advocacy efforts.
- The ASQ-3/ASQ:SE offers our community the opportunity to:
  - Develop a community database on young children's development
  - Build school readiness trend data for a better understanding of service gaps and needs
- By increasing access and use of the ASQ and ASQ SE and by utilizing the data provided from the scores, the adults in children's lives will be better prepared and better informed to help children develop the skills for academic, professional and economic success.
  - A comprehensive data analysis will be used to create a public community dashboard to measure and track current developmental scores.

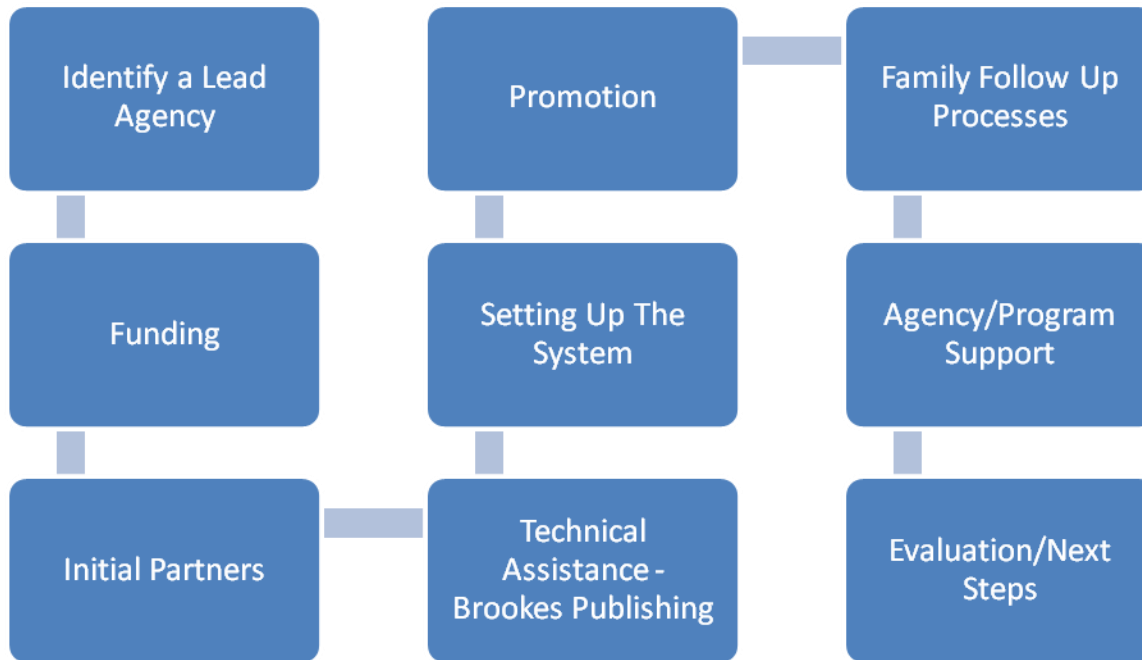


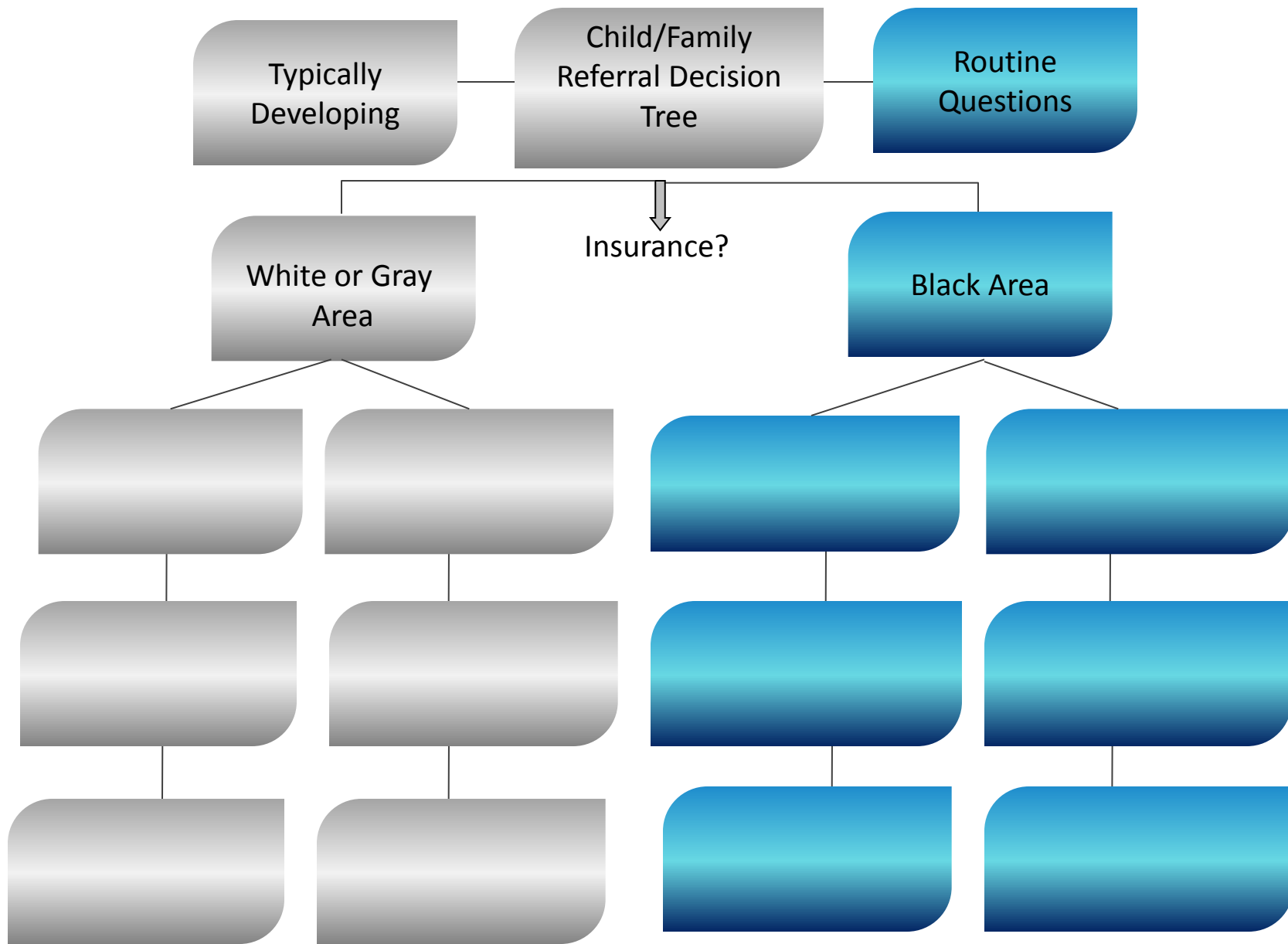
# Funding for this Project

- Initial funding was braided from:
  - Great Start Collaborative-Oakland state funded Implementation Funds
  - Early On federal funding
  - Oakland Schools general fund
  - American Reinvestment and Recovery Act (ARRA) funding
- Additional funding opportunities include:
  - United Way 2011 Agenda for Change Early Childhood Investment Fund focuses on three key areas
    - Outreach and Engagement for demographic representation
    - Research based interventions
    - Community level data system
  - Oakland University/Beaumont Hospital Research Award
    - Two additional pediatricians

# Getting Started in Your Community

\*Notes to Self\*





For Emergencies- Always contact Pediatrician or Local ER

Lessons Learned: discussion

Networking/ Q&A