

# Child Lead Exposure Elimination Grant- Testing in Head Start Centers

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# Description



- The Head Start Integration Project packages maternal and child health programs and delivers age-appropriate educational content and services to children and parents using an integrated approach.
  - Education and Outreach
  - Service Delivery
  - Referrals and Linkages to additional services
  - Project Coordinator, Service Integration Specialists, and Coordinating Team (DHD Maternal and Child Health Programs, participating Head Start centers and external agencies)

Inputs	Activities	Outputs	Outcomes	Impacts	
<u>Resources</u>	Direct Services	Direct Services			
Financial support	Administer lead screenings and	Number of children lead screened	1600 children between 0-5	Improve utilization of	
Participating Head Starts	other maternal and child health	Number of children who received	educated and /or screened for	available maternal and	
DHD Mobile Unit	services	other services	lead	child health services	
Program educational materials	Look up current WIC	Number of parents to receive			
Satisfaction assessment	information to offer WIC	information WIC eligibility and	Increase lead screening rates in	Improve health outcomes	
	services	enrollment	participating head start centers	for children and families	DETROIT
Staff and Equipment	Education and Training		by 20%		HEALTH
Lead screening materials	<ul> <li>Attend early head start and</li> </ul>	Education and Training		Reduce health disparities	DEPARTMENT
Consent form(s)	head start parent meetings to	Number of parent meetings	100% of children identified with	and health inequities	
Medicaid outreach expert Nurse -	provide education on lead	attended	EBL linked to lead case		
(immunizations)	prevention and other MCH	Number of parents in attendance	management and abatement	Strengthen community	
2 trained Service Integration	services	Percent of parents satisfied with	services	partnerships	
Specialists	Provide education to children	information provided			
Vision and Hearing screening	prior to receiving services	Percent of parents who found the	100% of parents enrolled in		
equipment		information valuable	participating head start centers		
	Partnership and Linkages		received information about lead		
Database/sources	Provide linkages to case	Partnership and Linkages	prevention and resources		
(EMR/secure cloud storage)	management and abatement	Data Sharing Agreement			
MIWIC, MCIR, CHAMPS, HHLPSS	resources	Number of services modified on	80% of parents attending parent		
Technical Support	provide linkages for other	referral form	meetings satisfied with the		
Policies/ procedures	maternal and child health	Number and percentage of parents	information presented		
Partnership agreements	services	referred to other services by			
	Ensure non-duplication of	service type			
Partners	services among partners	Number of partnership meetings			
Healthy Start Centers	• Explore and engage relevant	held			
Oral Health) Wayne CHAP	services and partnership as a	Number of organizations in			
MIHP Infant	result of parent feedback	attendance			
Behavioral health specialist	Hold partnership engagement     discussion at least quarterly				
ClearCorps Detroit	discussion at least quarterly				
Housing Revitalization					
Department					

# Objectives



- **Project SMART Objective 1:** One year from project start date, increase lead screening rates among children enrolled in Head Start and Early Head Starts by 20%
- **Project SMART Objective 2:** One year from project start date, 100% of children and parents received information lead prevention.
- **Project SMART Objective 3:** One year from project start date, 100% of eligible families linked to case management and lead abatement services.

# Activities

#### **Direct Services**

- Administer lead screenings and other maternal and child health services
- Look up current WIC information to offer WIC services

#### **Education and Training**

- Attend early head start and head start parent meetings to provide education on lead prevention and other MCH services
- Provide education to children prior to receiving services

#### **Partnership and Linkages**

- Provide linkages to case management and abatement resources
- provide linkages for other maternal and child health services
- Ensure non-duplication of services among partners
- Explore and engage relevant services and partnership as a result of parent feedback
- Hold partnership engagement discussion at least quarterly



### **Expected Outcomes**



- 1600 children between 0-5 educated and /or screened for lead
- Increase lead screening rates in participating head start centers by 20%
- 100% of children identified with EBL linked to lead case management and abatement services
- 100% of parents enrolled in participating head start centers received information about lead prevention and resources
- 80% of parents attending parent meetings satisfied with the information presented

### Measurements



- Direct Services
- Number of children lead screened
- Number of children who received other services
- Number of parents to receive information WIC eligibility and enrollment
- Education and Training
- Number of parent meetings attended
- Number of parents in attendance
- Percent of parents satisfied with information provided
- Percent of parents who found the information valuable
- Partnership and Linkages
- Data Sharing Agreement
- Number of services modified on referral form
- Number and percentage of parents referred to other services by service type
- Number of partnership meetings held
- Number of organizations in attendance

# Evaluation



- 1,274 students received lead education
- 521 children tested for lead
- 27 children had an elevated blood lead level
  - 16 children received follow up
  - 4 received lead case management services previously
  - 2 children moved outside of the City of Detroit
  - 5 children were contacted for follow up outside of our protocol timeline
- 7 received venous confirmatory testing
  - 3 had an ebll  $\geq$  4.5mcg/dL

# Barriers



- Constant communication and follow up with Head Start centers
- Inconsistent reporting of center needs
- Incomplete consent forms
  - Low participation compared to testing needs
- Need additional staff support from centers during testing day
- Short window to test children
  - Centers preferred testing to be completed before lunch/nap time
- Paperwork
  - Documentation of lead tests including notifying MDHHS
- Coordination with internal DHD program
  - Immunizations

### Successes

- Centers very appreciative of services
  - Many parents not in compliance with lead testing requirements
- Identified children with elevated blood lead levels
- Educated students, staff members and parents
  - Lead
    - Nutrition
    - Hand-washing
  - Exercise
- Service delivery

- Tested in 37 centers
- Every parent received health resources
- Partnerships
  - Starfish
  - Matrix
  - New St. Paul
  - Renaissance
  - United Children and Families
- Children were very excited about their DHD key chains



### Questions



