

*Table 20. How to Describe 1st Five to Primary Care Providers (Attachment Y)*

<b>Site Coordinator Talking Points</b>	<b>Why is this talking point important to include when describing the 1st Five Initiative to providers?</b>
<p>1st Five is a partnership between the Iowa Department of Public Health and primary care.</p>	<p>This is the “what” part of the description of 1st Five. What is 1st Five at its core? It is a partnership between public health and primary care to provide equitable access to developmental screening for all children ages birth to five years old. 1st Five includes referral support for identified developmental concerns, including social support if appropriate.</p>
<p>1st Five works with primary care providers who see children ages birth to five years old for well-child visits to implement surveillance and developmental screening tools into the well-visit process.</p>	<p>This is the “who” part of the description of 1st Five. Who does 1st Five work with, and why is this population important to 1st Five’s mission and goal? 1st Five works with primary care providers to implement surveillance and developmental screening in well-child visits for children ages birth to five years old. 1st Five includes referral support for identified developmental concerns, including social support if appropriate.</p>
<p>1st Five promotes the use of reliable, standardized, and valid developmental screening tools like the ASQ, and the MCHAT-R/F into periodic well-child visits. As an optional screen, the ASQ:SE may be implemented as well.</p>	<p>This provides an example of what tools 1st Five supports and what providers can expect in terms of 1st Five focus on these tools during 1st Five partnership.</p>
<p>1st Five follows AAP Bright Futures recommendations for when screening should occur, at 9, 18, 24 and 30 month well-child visits. These recommendations are also included in the Iowa EPSDT Periodicity Schedule for Iowa’s Medicaid program.</p>	<p>This talking point acknowledges AAP recommendations as the basis for what screening tools 1st Five supports and when a child should receive a developmental screening. The AAP is an organization that most pediatricians and family medicine providers that see children, are familiar with as a leader in medical practice for this population.</p>
<p>When a screening indicates a developmental delay or concern, the provider is able to refer to 1st Five for follow up developmental support. There are no income requirements to refer to 1st Five and the referral is free and at no cost to the parent/caregiver or the practice.</p>	<p>This talking point highlights the additional benefit of partnership with 1st Five - the ability to refer to 1st Five for developmental support. Intentionally tie the concept of screening to referral to 1st Five. The Site Coordinator should seek to embed this understanding for providers that screening prompts referral into 1st Five. Providers that understand this connection between screening and referral to 1st Five have successful partnership with the initiative. Identifying developmental delay early provides an important window of opportunity to</p>

	implement developmental supports, which may assist with reaching future developmental milestones and overcoming delays in time.
<p>1st Five is a one-stop referral resource for connections to early intervention for developmental delay. Connections to community resources are also available should the family need support to overcome barriers that may be present in accessing developmental services for the referred child. Addressing adversity can help mitigate impacts on development.</p>	<p>This talking point provides insight into the referral process for primary care providers. While the emphasis is still on developmental screening and early intervention, 1st Five can, and often does, make referrals for community support. These benefit the whole family and reduce barriers to accessing developmental resources for the referred child, including those that support social determinants of health.</p>
<p>1st Five provides a unique “feedback loop” to the referring provider, which includes status updates on all referrals made. Referral updates and outcomes are included in these periodic updates to the provider and can be tailored to meet provider expectations relative to update needs.</p>	<p>This talking point provides insight into what happens after a child is referred to 1st Five. Providers need to know what this process “looks like” in order to feel comfortable that those next steps after referral include essential follow up.</p>