## **CDSA Referral and Community Outreach:** Strategies for Increased Community Awareness and Collaboration

The continuity of a positive working relationship between the CDSA and community partners is a critical factor in early intervention. The most effective strategies to enroll children in the Infant-Toddler Program take into account our community partners involved in the intake and referral process. When CDSAs are recognized as integral community partners, they are more likely to locate eligible children through referral sources, such as medical providers. CDSA staff can better ensure that children who are potentially eligible are referred to the ITP in a timely manner by building rapport, credibility, and trust with referral sources on an ongoing basis. This document serves as a guide for CDSA staff to focus on effective strategies to build relationships and increase opportunities to locate, evaluate and enroll children and their families in the ITP.

## 1. FACILITATING THE REFERRAL PROCESS

- Ensure that all referral sources understand the CDSA referral process.
- At the time of the initial referral, be sure to obtain pertinent information (such as, name of a primary contact person as well as a title (e.g., James Jones MD or Mary Smith, nurse).
- Provide feedback/updates to the referral source in a timely manner using the North Carolina Infant Toddler Program *Referral Update Form*.
- Address all written correspondence (i.e., status notification update letters) specifically to a primary contact person to ensure that the referring staff receive all communication in a timely manner.

## 2. IDENTIFYING AND COLLABORATING WITH COMMUNITY PARTNERS

- Expand your medical outreach to include family practitioners and hospitals/NICU, as well as pediatricians.
- Contact and collaborate with appropriate local community partners (e.g., Smart Start ABCD Coordinator, Community Care of NC and CHIPRA (Children's Health Insurance Program Reauthorization Act), Quality Improvement Specialists, Care Coordination for Children (CC4C) staff to ensure relationships with medical practices in your area have been established and work is not duplicated.
- Identify other community partners who may interact with families of young children (e.g., childcare facilities, Child Care Resource and Referral, and parent education resources). Promote ongoing relationships with your community partners.
- Offer educational workshops and presentations to your community partners about the importance of early intervention services.

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• Increase outreach to professional contacts and agencies that provide assistance to the under- served populations (e.g., those eligible for and enrolled in Medicaid, those in foster care, or families who are homeless or transient). Professional contacts may include (but are not limited to) private counseling practices, social service agencies, agencies that provide substance abuse treatment, shelters, children's centers, social and faith ministries, and Guardians Ad Litem.

## 3. COMPILING AND UTILIZING USEFUL INFORMATION

- Identify data regarding the frequency of referrals by specific referral source (e.g., individual provider practices) and by type of referral (e.g., medical referral vs. parent referral). Share referral source data with appropriate community partners (i.e., ABCD Coordinators) to enlist their help in building credible and positive relationships with providers who do not refer children who are potentially eligible to the CDSA consistently.
- Educate medical practices to better understand the importance of early identification of young children (birth 3 years) with possible developmental delays and immediate referral to CDSA, rather than waiting to see if the child's development improves. Consider making brief face-to-face visits to medical practices with identified community partners.
- Reach out to the referral sources to discuss why referrals from their office to the CDSA are not coming or have declined. Work closely with partners who have access to medical practices (e.g., ABCD coordinators, CCNC and CHIPRA QI specialists.)
- Establish routine, verbal contact with community partners to answer questions, provide additional information, and build a trusting relationship with the CDSA.

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