



STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

House Committee on Health

H.C.R. 211, REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A DEVELOPMENTAL SCREENING TASK FORCE TO REVIEW EARLY CHILDHOOD DEVELOPMENTAL SCREENING PILOT PROJECTS, AND MAKE RECOMMENDATIONS FOR THE DEVELOPMENT OF AN EARLY CHILDHOOD DEVELOPMENTAL SCREENING SYSTEM IN HAWAI'I

Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H.
Director of Health

March 29, 2011, 9:00 a.m.

1 **Department's Position:** The Department of Health (DOH) supports the intent of this resolution to
2 develop an integrated, universal early childhood developmental screening system. However, a
3 Screening Task Force may not be necessary since the DOH Family Health Services Division (FHSD)
4 already plans to convene a series of meetings with state, community, professional, and family partners to
5 address a Title V priority to promote early childhood screening and development.

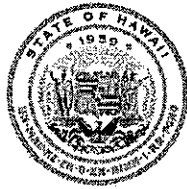
6 **Fiscal Implications:** The DOH cost is staff time to support a Screening Task Force and report on
7 findings and recommendation. Limited staff time is a concern.

8 **Purpose and Justification:** This resolution requests the DOH to convene a Developmental Screening
9 Task Force to review the Aloha United Way (AUW) Early Childhood Developmental Screening pilot
10 projects and their evaluation, and report on findings and recommendations for the development of an
11 integrated, universal early childhood developmental screening system in Hawai'i.

12 The DOH FHSD already has a Title V (Maternal and Child Health Block Grant) priority to
13 promote early child screening and development. FHSD is planning to convene a series of collaborative
14 meetings with state, community, professional, and family partners to address the system of

1 developmental screening and follow-up services. The FHSD collaborative meetings will examine
2 statewide data for children's access to medical homes (primary care providers); American Academy of
3 Pediatrics (AAP) guidelines and Early Periodic Screening, Diagnosis, and Treatment (EPSDT)
4 requirements for well child care including developmental screening; current initiatives addressing
5 primary care provider screening; AYW pilot project data and evaluation; other community
6 developmental screening activities; and gaps in the current system of screening, follow-up, and referrals
7 for developmental concerns. Any recommendations regarding an integrated developmental screening
8 system must fit into the larger systems of health care and early childhood development.

9 Thank you for the opportunity to testify.



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
919 ALA MOANA BOULEVARD, ROOM 113
HONOLULU, HAWAII 96814
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543
March 29, 2011

The Honorable Ryan I. Yamane, Chair
The Honorable Dee Morikawa, Vice Chair
House Committee on Health
Twenty-Sixth Legislature
State Capitol
State of Hawaii
Honolulu, Hawaii 96813

Dear Representatives Yamane and Morikawa and Members of the Committee:

SUBJECT: HCR 211 and HR 182 – REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A DEVELOPMENTAL SCREENING TASK FORCE TO REVIEW EARLY CHILDHOOD DEVELOPMENTAL SCREENING PILOT PROJECTS, AND MAKE RECOMMENDATIONS FOR THE DEVELOPMENT OF AN EARLY CHILDHOOD DEVELOPMENTAL SCREENING SYSTEM IN HAWAII.

The position and views expressed in this testimony do not represent nor reflect the position and views of the Department of Health (DOH).

The State Council on Developmental Disabilities (DD) **SUPPORTS THE INTENT OF HCR 211 and HR 182.** The purpose of the resolutions is to request that DOH: 1) convene a Developmental Screening Task Force to review Aloha United Way's (AUW) Early Childhood Developmental Screening pilot projects and the University of Hawai'i at Manoa Center on Disability Studies' (CDS) evaluation of those pilot projects; and 2) submit a report to the Legislature prior to the convening of the 2012 Regular Session on DOH's findings and recommendations, based on the Task Force's review, for the development of an integrated, universal early childhood developmental screening system in Hawai'i.

The Council supports early developmental screenings that help to identify developmental delays as early as possible so that children and their families have access to necessary treatment and services to leading to better health and education outcomes for children and their families, and in the development of an integrated, universal early childhood developmental screening system in Hawai'i.

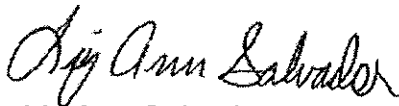
The Council understands that there is an existing DOH work group under the Maternal Child Health Services Block Grant, Title V of the Social Security Act, which is

The Honorable Ryan I. Yamane, Chair
The Honorable Dee Morikawa, Vice Chair
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working to address the need for and strategies to promote early childhood developmental screenings in Hawai'i. **Rather than establish a task force to conduct a review of the AUW pilot projects and CDS evaluation of those pilot projects, we respectfully suggest that the existing DOH work group be expanded to include a representative from AUW and CDS and conduct a review of the pilot projects and evaluation of those projects.**

Thank you for the opportunity to submit testimony **supporting the intent of HCR 211 and HR 182.**

Sincerely,



Liz Ann Salvador
Chair



Waynette K.Y. Cabral, MSW
Executive Administrator



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Written Testimony Presented Before the
House Committee on Health
Tuesday, March 29, 2011

By

Virginia S. Hinshaw, Chancellor

And

Dr. Jean L. Johnson, Associate Director
Center on Disability Studies, College of Education
University of Hawai'i at Mānoa

HCR 211/HR 182 - REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A DEVELOPMENTAL SCREENING TASK FORCE TO REVIEW EARLY CHILDHOOD DEVELOPMENTAL SCREENING PILOT PROJECTS, AND MAKE RECOMMENDATIONS FOR THE DEVELOPMENT OF AN EARLY CHILDHOOD DEVELOPMENTAL SCREENING SYSTEM IN HAWAII.

Aloha, Honorable Chair Yamane, Vice Chair Morikawa and members of the House Committee on Health, mahalo for this opportunity to testify in strong support of SCR 136. I am Jean Johnson, Associate Director for the Center on Disability Studies, College of Education at the University of Hawai'i at Mānoa.

The Center on Disability Studies has enthusiastically participated in the pilot project funded by the Aloha United Way to screen high-risk preschool children in the Wai'anae Community for hearing or vision loss and for delays in the development of communication, fine motor skills, gross motor skills, personal or social problem-solving skills, and social-emotional skills.

Why have we participated? – Because, *we know that*

- Less than one fourth of Hawai'i's children arrive at kindergarten with the readiness skills they need to be successful in the classroom.
- A young child who has an unidentified hearing or vision loss will not achieve the literacy goal of reading at grade level by third grade.
- When children begin school without the learning and behavioral skills they need to succeed in the classroom, their teachers can, as early as kindergarten, predict which children will later drop out of school and not attain a high-school diploma.

We have been conducting the evaluation of this community effort because we *want to prevent disabilities in children* by addressing the needs of at-risk young children. Whereas only about 3-5% of children have a definable disability, approximately 12% of school aged children are served under the Individuals with Disabilities Education Act because they are environmentally disabled as a result of our failure provide high quality learning opportunities for them in early childhood. Without a targeted, universal screen-

ing program, the young children who are most vulnerable and at the highest risk will not be screened and their families will not be assisted in obtaining the services they need.

The Aloha United Way has provided, not only funds for the screening, but leveraged resources to ensure that the children receive the treatment or intervention services they need to address the hearing, vision, and developmental problems that are identified. Children receive treatment for ear infections, glasses for their vision loss, and referrals to agencies that provide evaluations and early intervention services. Families receive training to enable them to better understand and help their children.

This proposed public-private partnership Task Force would not require any appropriation, but would provide to the House recommendations for developing an integrated, universal early childhood developmental screening system for Hawai'i. Targeted, universal developmental screening has been one of the community needs identified by the *Be My Voice Hawai'i Campaign* (www.BeMyVoiceHawaii.org).

Again, mahalo for providing me this opportunity to submit testimony in strong support of HCR 211/HR 182

Aloha United Way

200 N. Vineyard Blvd., Suite 700
Honolulu, Hawaii 96817-3938
Telephone (808) 536-1951
Fax (808) 543-2222
auw.org



Aloha United Way

Cover Sheet

Testifying Agency: Aloha United Way
Jody Shiroma Perreira, Acting Chief Operating Officer
Norm Baker, Vice President Community Building

House Committee on Health
Rep. Ryan I. Yamane, Chair
Rep. Dee Morikawa, Vice Chair

House Committee on Finance
Rep. Marcus R. Oshiro, Chair
Rep. Marilyn B. Lee, Vice Chair

Tuesday, March 29, 2011 at 9:00 AM
Conference Room 329

**HCR 211 / HR 182 REQUESTING THE DEPARTMENT OF HEALTH TO
CONVENE A DEVELOPMENTAL SCREENING TASK
FORCE TO REVIEW EARLY CHILDHOOD
DEVELOPMENTAL SCREENING PILOT PROJECTS, AND
MAKE RECOMMENDATIONS FOR THE DEVELOPMENT
OF AN EARLY CHILDHOOD DEVELOPMENTAL
SCREENING SYSTEM IN HAWAII.**

GIVE. ADVOCATE. VOLUNTEER. LIVE UNITED.



Aloha United Way

200 N. Vineyard Blvd., Suite 700
Honolulu, Hawaii 96817-3938
Telephone (808) 536-1951
Fax (808) 543-2222
auw.org



March 29, 2011

House Committee on Health and House Committee on Finance
Rep. Ryan I. Yamane, Chair
Rep. Marcus R. Oshiro, Chair
Tuesday, March 29, 2011 at 9:00 AM
Conference Room 329

HCR 211 / HR 182: Testimony in Strong Support

Dear Chair Yamane, Chair Oshiro and Committee Members:

Aloha United Way strongly encourages your favorable consideration of HCR 211 / HR 182 which establishes a developmental screening task force.

Currently, approximately 20,000 children are in special education tracks in our school system. Each of these children cost an average of \$14,000 more per year to educate than normal education track students. Early detection and intervention with children experiencing developmental delays can divert these children from special education tracks to normal tracks with great savings to the state. This early identification and treatment is accomplished through the developmental screening process.

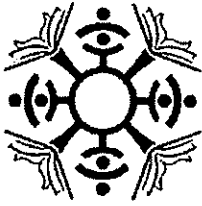
Recent budget cuts have eliminated early screening programs with dire implications for the future impact on our school system. HCR 211 / HR 182 provides an excellent start on rebuilding the comprehensive set of programs needed to ensure each child is ready to learn when they begin their formal education. Aloha United Way strongly encourages favorable consideration of this important legislation.

Sincerely,



Jody Shiroma Perreira
Acting Chief Operating Officer

GIVE. ADVOCATE. VOLUNTEER. LIVE UNITED.



Learning Disabilities Association of Hawaii

245 N. Kukui Street, Suite 205

Honolulu, Hawaii 96817

Telephone: (808) 536-9684

Fax: (808) 537-6780

E-Mail: MMoore@LDAHawaii.org

Neighbor Islands Toll Free

Call 1-800-533-9684

TDD: (808) 536-2280

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The Honorable Ryan I. Yamane, Chair
The Honorable Dee Morikawa, Vice Chair
House Committee on Health
Twenty-Sixth Legislature
State Capitol
State of Hawaii
Honolulu HI 96813

March 28, 2011

Directors

Rachel Moriyama

Steven Nagata, Esq.

Paul Singer

Allene Suemori, Esq.

Frederick W. Tucher

Subject: HCR 211 and HR 182 – REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE A DEVELOPMENTAL SCREENING TASK FORCE TO REVIEW EARLY CHILDHOOD DEVELOPMENTAL SCREENING PILOT PROJECTS, AND MAKE RECOMMENDATIONS FOR THE DEVELOPMENT OF AN EARLY CHILDHOOD DEVELOPMENTAL SCREENING SYSTEM IN HAWAII.

Dear Representatives Yamane and Morikawa and Members of the Committee:

Learning Disabilities of Association of Hawaii (LDAH) appreciates this opportunity to provide testimony for the important purposes to be addressed under HCR 211 and HR 182, and wishes to demonstrate its strong support for the resolution. As the Chief Executive Officer for this organization, I can attest that the single most important activity we can do to benefit children in Hawaii is to identify and respond to their needs early. The benefits of early identification through universal screenings and intervention for identified needs are significant in several ways.

Undisputed scientific research demonstrates the absolute importance of early identification of needs in young children and the lifelong benefits of early intervention. Ideally, developmental, social emotional, hearing and vision needs should be detected and addressed prior a child starting school. Early intervention significantly improves a child's ability to be ready for school and children who start school "ready" in all areas, demonstrate lasting ability to be successful throughout school. Statistics show that these children are far more likely to participate in higher education and positive contributions to society. Cost studies show that every dollar spent on early identification and intervention saves approximately four dollars in services necessary when children's special needs are not discovered until they are older.

LDAH has administered the first pilot project funded under Aloha United Way (AUW) since January 2009, serving first the Waianae-Nanakuli area and later, all of

Oahu. This project will have screened somewhere between 3,600 and 4,000 previously unscreened children age 5 and younger by the end of its 3rd year of operation. Developmental or social emotional delays, hearing or vision problems, and concerns identified by parents are being detecting in approximately 25% of children through this project. Connection to follow-up services has been offered or provided for all of these children to resolve detected problems. Both AUW funded pilot projects in operation reflect a paraprofessional model of community-based (outreach) screening and service provision and referral that could be used to support pediatricians in reaching all children under age five in Hawaii.

HCR 211 and HR 182 would provide for a task force to organize existing and new resources to potentially reach all children in the state, five years of age and younger, providing them with early comprehensive screenings, treatment and connection to a medical home. Benefits to children would be considerable and long lasting. Cost savings for the state, over time, would be substantial.

Therefore, LDAH strongly supports HCR 211 and HR 182 and the resolutions' intentions. Thank you again for this opportunity to provide testimony on this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Michael K. Moore', with a long horizontal line extending to the right.

Michael K. Moore
Executive Director



Hearing date:
Tuesday, March
29, 2011
9:00 a.m.
House Committee
on Health
Room 329

To: Representative Ryan Yamane, Chair
Representative Dee Morikawa, Vice Chair

From: Elisabeth Chun, Executive Director
Good Beginnings Alliance

Date: Tuesday, March 29, 2011, 9:00 a.m.
Conference Room 329

Subject: **HCR 211: Requesting the Department of Health to convene a developmental screening task force to review early childhood developmental screening pilot projects, and make recommendations for the development of an early childhood developmental screening system in Hawaii.**

The Good Beginnings Alliance is a policy and advocacy organization focused on Hawaii's youngest children and their families. We strive to ensure a nurturing, safe and healthy development for all children from pre-birth to age eight. We believe all children deserve safe and supportive environments that meet their needs as they grow and develop. Good Beginnings is also a member of One Voice for Hawaii's Children (www.onevoiceforchildren.net), an alliance of organizations and individuals committed to the development of an effective and equitably funded early childhood system that gives all young children the opportunity to arrive at kindergarten safe, healthy and ready to succeed. The following information is provided to help you in your decision-making process.

The initial results from the Aloha United Way's early childhood developmental screening pilot projects indicate some serious areas of concern with over 1 out of 5 children exhibited a developmental delay that needed follow up services. Left undetected with no services provided, these children could face significant problems when entering kindergarten. Moreover, they would start school not ready to succeed. There will be great benefit in a Department of Health task force reviewing these projects and making recommendations for the development of an early childhood developmental screening system. Finally, this HCR and the Aloha United Way pilot projects directly support the Health outcomes for the Early Learning Council's Early Childhood System Development.

Mahalo for your consideration. For more information contact: Good Beginnings Alliance; phone: 531-5502; lchun@goodbeginnings.org