



FIRST 5 SANTA CRUZ COUNTY



ANNUAL EVALUATION REPORT



July 1, 2023 - June 30, 2024

October 2024

Neurodevelopmental Foster Care Clinic

Program Description

The Neurodevelopmental Foster Care Clinic (NDFCC) is an innovative, coordinated approach to address the neurodevelopmental needs of children age 0-5 in the foster care system. The need for identifying and supporting infants and young children who have developmental disorders is clear. As reported by the CDC,

“Developmental delays, disorders, or disabilities manifest in infancy and childhood and can limit a person’s function throughout life... [But] policies and programs that promote early identification of children with developmental delays and facilitate increased access to intervention services can improve health and reduce the need for services later in life.”²⁵

We know early intervention works, yet children who have already endured abuse and neglect typically do not receive the early assessment and coordinated services they need. Children with disabilities are more likely to be abused and neglected and yet, once in the system designed to protect them, their needs may go unaddressed – thereby missing a critical window of opportunity to set a healthy life course.

The Neurodevelopmental Foster Care Clinic is a collaboration between Lucile Packard Children’s Hospital Developmental-Behavioral Program, Santa Cruz County Children’s Behavioral Health, Santa Cruz County Family and Children’s Services, and First 5 Santa Cruz County, and is located at Stanford Children’s Health specialty services clinic in Capitola. The NDFCC takes a holistic approach to evaluate infants and children in the foster care system from 4 months to age 5, in a wide range of developmental and behavioral domains.

Using an interdisciplinary approach, the NDFCC integrates health information and trauma history with developmental assessment, evaluation of social skills, and consideration of environmental conditions. They assess children for delayed language, thinking, and social or motor skills, as well as children who have challenges with sleep, eating, behavior, discipline, or temperament. Their interdisciplinary team focuses on early intervention to address the needs of young children who have recently entered foster care, and to provide comprehensive services to these foster children, their families, and foster families.

To this end, all children in Santa Cruz County under the age of 6 who are in foster care or who are involved with Child Protective Services (CPS) are referred to the program. For children with on-going needs, Stanford Children’s Health holds a developmental and behavioral assessment clinic in Capitola, once a week, for children ages 6-13.

²⁵ Centers for Disease Control and Prevention, Cogswell ME, Coil E, Tian LH, et al. *Health Needs and Use of Services Among Children with Developmental Disabilities — United States, 2014–2018*, Morbidity and Mortality Weekly Report, 71(12);453–458, 2022.

The Neurodevelopmental Foster Care Clinic provides the following services to children ages 0-5:

- A therapist from County Children's Behavioral Health meets with the child and foster family for a mental health assessment of the child (over the age of one).
- A Developmental-Behavioral Pediatric specialist (psychologist or nurse practitioner) evaluates the development and behavior of children and meets with the child, biological family, and foster family to discuss developmental and behavioral history and milestones.
- Standardized developmental and behavioral testing is conducted. The results of the testing and recommendations are provided to the biological and foster families at the end of the assessment.
- A follow-up consultative report is provided to all members of the interdisciplinary team, and the biological and foster families.
- A county Children's Behavioral Health therapist provides on-going counseling to those children needing therapy services.
- A Licensed Clinical Social Worker coordinates and case manages the program, and offers Triple P services to biological and foster clients.
- Children needing developmental services (e.g., occupational therapy, physical therapy, speech therapy, special education) are referred to local resources and the school district in which they reside.
- Any identified medical services (e.g., audiology, ophthalmology) are coordinated through the primary care provider.

One Client's Story

"Mateo" was initially evaluated when he was 7 months old, and showed some delays in multiple domains. We referred him to Early Start for occupational therapy, to an infant specialist to support his continued development, and provided "anticipatory guidance" to his mother to continue to support his development in all domains.

When Mateo was seen 7 months later, he was receiving early intervention services and was making progress in all developmental domains. His mother had taken Triple P classes as part of her CPS case plan. A Children's Behavioral Health counselor met with them for an initial intake and found counseling services were not currently warranted. We arranged for follow-up to ensure that he continues to make developmental progress.

Mateo has a team of professionals coordinating services across systems and agencies including a CPS social worker and public health nurse, a pediatrician, an Early Start occupational therapist, and a coordinator at Stanford Neurodevelopmental Foster Care program to help him thrive.

- Neurodevelopmental Foster Care Clinic, Annual Progress Report

Population Served

| | Provided with diagnoses, services, and referrals | | | Received Triple P services | | | 2023-2024 (Unique) <i>Diagnoses and Referrals + Triple P services</i> |
|-------------------|--|-----------------------------------|--------------------------------|----------------------------|-----------------------------------|--|---|
| | <i>Santa Cruz County</i> | <i>Out of County</i> ¹ | Diagnoses & Referrals Subtotal | <i>Santa Cruz County</i> | <i>Out of County</i> ¹ | Triple P Subtotal | |
| Parents/Guardians | 78 | 16 | 94* | 37 | 95 | 132 | 222 |
| Children | 39 | 8 | <i>(ages 0-5)</i> 47 | 29 18 | 72 19 | <i>(ages 0-5)</i> 101 <i>(ages 6+)</i> 37 | <i>(all ages)</i> 181 |

Source: (Population) First 5 CCD database for July 1, 2023 – June 30, 2024.

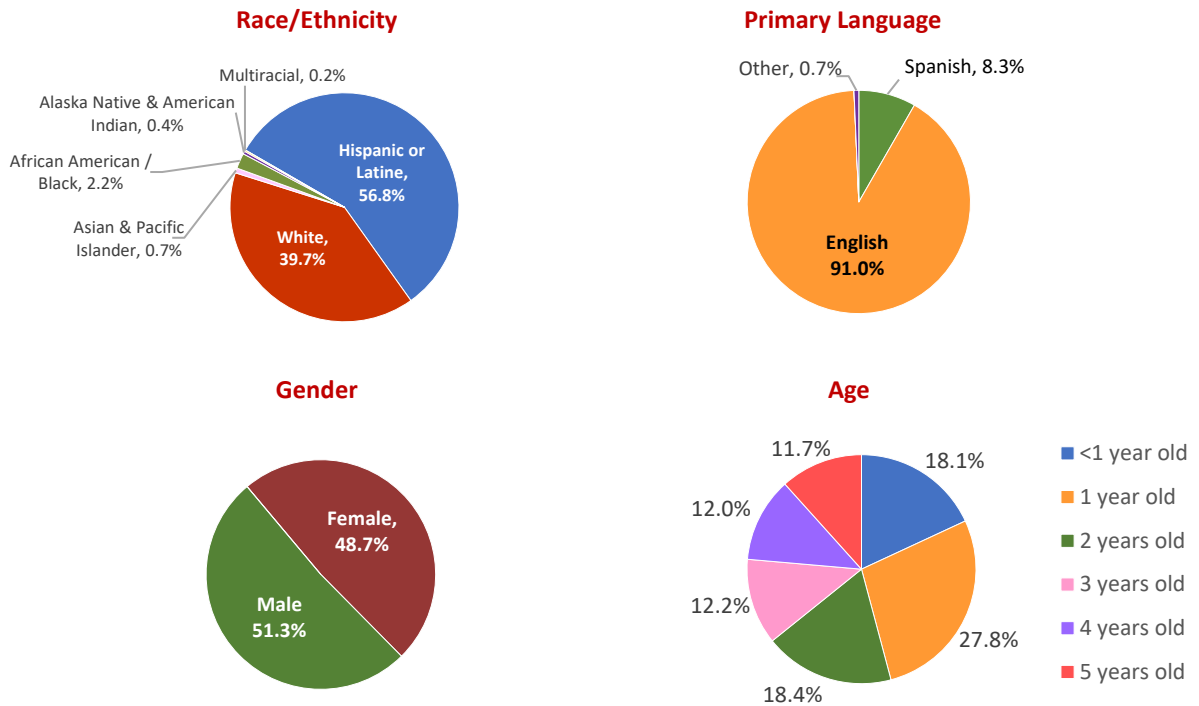
* Estimated number of parents/guardians of foster children who received diagnoses, services, and referrals. These parents/guardians are included here as adults who benefited from the services that their foster/biological children received.

Note: Due to the increased confidentiality requirements of this partner, it is difficult to track clients who may have received multiple services. Therefore, these numbers likely include some duplicated clients, but is considered a close estimate of the total number of clients served by this program.

¹ "Out of County" clients are funded by non-First 5 sources.

In the following results, data from all the years of this program (2011-2024) have been aggregated in order to present a more robust profile of the children served.

Figure 26: Demographics of Children (ages 0-5) participating in NDFCC (2011-2024)



Source: First 5 Santa Cruz County, Neurodevelopmental Foster Care Clinic records, 2024.

Note: Clients with missing or unknown data for a demographic are excluded from that demographic's analysis. N=1,012.

Outcome Objective: Ensure that all children within the dependency court system age 0-5 in Santa Cruz County receive early developmental and mental health services

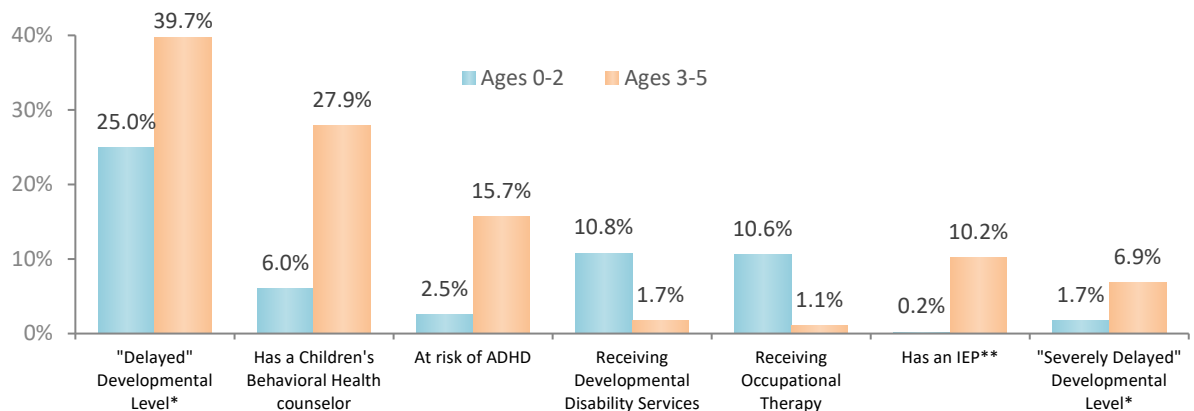
| Measurable Objectives | 2023-2024 |
|---|--|
| By June 30, 2024, up to 100 children will receive comprehensive developmental and behavioral assessments and up to 50 children will have follow-up consultations. | <ul style="list-style-type: none"> • 48 children received comprehensive assessments • 11 children had follow-up consultations. |
| By June 30, 2024, 90% of children referred for therapy, Early Start, educational services, or Triple P will receive the services that were recommended.* | <ul style="list-style-type: none"> • 100% received their recommended services (N=28) |

Source: Neurodevelopmental Foster Care Clinic, *Annual Progress Report, 2024*.

* This analysis only includes children who were referred by NDFCC to services and does not include children who had previous referrals to services from their pediatricians. Note that some children who haven't yet received services may be on Wait Lists for these services, so their referral is still in progress.

In the analyses of the following diagnoses, services, and referrals, all the data since the commencement of NDFCC have been aggregated (2011-2024) in order to present a more robust portrait of the extent to which NDFCC is helping children in the dependency court system obtain comprehensive developmental and behavioral evaluations to identify early intervention, mental health, or educational needs.

Figure 27: Percentage of Children in NDFCC (ages 0-5) with these diagnoses and services, at Intake (2011-2024)



Source: Neurodevelopmental Foster Care Clinic, Data Template, 2011-2024.

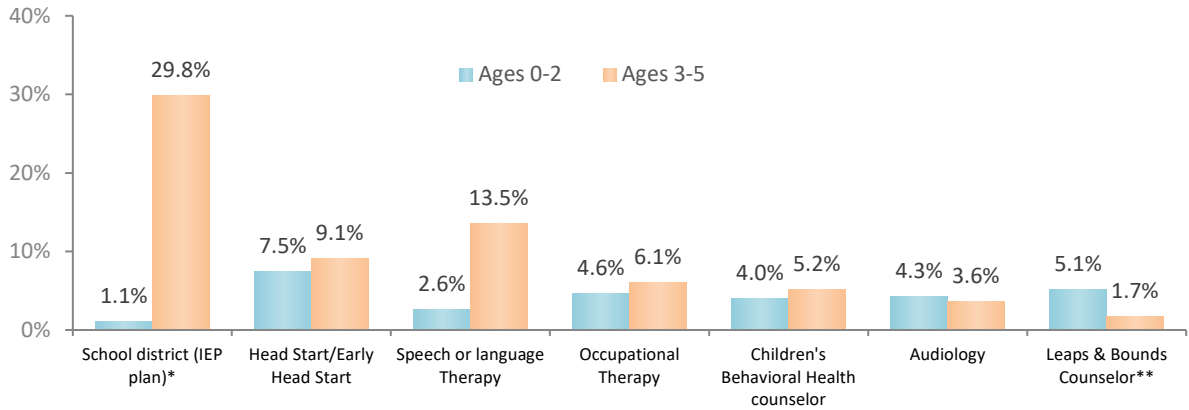
Note: Data for different diagnoses and services were not always collected every year. Therefore, the number of children analyzed for each diagnosis and service may vary. Only diagnoses and services with percentages higher than 4% for at least one age group are shown.

* Children's developmental levels were assessed using one of two standardized assessments, depending on the age of the child: the *Bayley Scales of Infant and Toddler Development* or the *Wechsler Preschool and Primary Scales of Intelligence, 3rd edition*.

** IEP = Individualized Education Program

N: (Ages 0-2) 639-650; (Ages 3-5) 360-362.

Figure 28: Percentage of Children in NDFCC (ages 0-5) provided with these referrals (2011-2024)



Source: Neurodevelopmental Foster Care Clinic, Data Template, 2011-2024.

Note: Data for different referrals were not always collected every year. Therefore, the number of children analyzed for each referral may vary. Only referrals with percentages higher than 4% for at least one age group are shown.

* IEP = Individualized Education Program

** The Leaps & Bounds program is designed to support the healthy development of children ages 0-5 whose parents are recovering from methamphetamine or other drug use and who are participating in the County's Dependency Drug Court Program.

N: (Ages 0-2)=650; (Ages 3-5)=362.

Outcome Objective: Positive Parenting Program (Triple P)* services will be provided for biological parents of children served in the NDFCC

| Client Outcome Objective | 2023-2024 |
|--|---|
| By June 30, 2024, up to 50 biologic parents or other caregivers will participate in Triple P Level 2 Seminars/Level 3 Workshops. | 38 (unique) parents participated in Level 2 Seminars |
| By June 30, 2024, up to 75 biologic and foster parents will receive one-time Triple P Level 2 individual consultations. | 94 (unique) parents participated in Level 2 Individual consultations |

Source: First 5, Triple P Master Client Data Collection Template, 2024.

* See the section on Triple P in this report for more information about this program.