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Research in Developmental Disabilities 27 (2006) 400–410

Research
in
Developmental
Disabilities

Alternative developmental evaluation paradigm in centers for developmental disabilities

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Received 17 January 2005; received in revised form 16 May 2005; accepted 24 May 2005

Abstract

The interdisciplinary evaluation has been a well-established process in centers for neurodevelopmental disabilities, but it is costly and may generate long waiting lists that can delay early diagnosis and treatment. An alternative evaluation paradigm was designed, using a specific screening approach, to improve use of staff time without compromising quality of care. An alternative model (AM) was designed, where a pre-designed selection process was used to sort new patients for either a comprehensive evaluation or a screening procedure, addressing medical, developmental and social issues with the additional use of developmental screening tools. A routine clinic (RC) comprehensive evaluation of each referral, was compared to the AM for waiting time, charges for patients, reimbursement to the center, and parents' and professional trainees' satisfaction. Results showed that waiting time for the screening procedure (10.3 weeks) was significantly reduced (RC 20.6 weeks). Charges for the screening procedure were significantly lower, but center revenues were not affected. Caregivers' satisfaction was maintained and trainees' satisfaction was high. The AM identified medical concerns sooner and encouraged collaboration with community resources. This

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study supports the use of an Alternative Developmental Evaluation paradigm for more effective use of interdisciplinary teams in centers for neurodevelopmental disabilities.

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Keywords: Interdisciplinary assessment; Child development center; Alternative model

According to the National Health Interview Survey (Boyle, Decoufle, & Yeargin-Allospp, 1994) approximately 16.8% of children below age 18 years in the United States have at least one developmental disability and 4.9% having two or more. Mental retardation, speech and language disorders, attentional, emotional and conduct problems, autism spectrum disorders and motor disabilities can interfere significantly with academic and daily living functioning (Yeargin-Allospp, Murphy, Oakley, & Sikes, 1992). Early detection and proper evaluation of these conditions lead to early intervention and treatment of medical and developmental problems (Ramey & Campbell, 1987; Sonnander, 2000). The interdisciplinary evaluation process has been a well-established model for evaluating children in centers for developmental disabilities. The interdisciplinary team concept recognizes that the nature of developmental disabilities is multifactorial. Various professionals assess the child individually and then meet as a team to compare data, review findings, and arrive at joint recommendations for care and management. This model ensures a comprehensive appreciation of the child and the total needs of the family (Farrell & Pimentel, 1996; Lipkin, 1996). Interdisciplinary evaluation of every referral requires a generic multiple disciplines' involvement for every child. This practice sometimes may be costly and also generate long waiting lists due to the lengthy time allocated for such evaluations, which may result in delay in diagnosis and access to care. How to use effectively the tertiary referral developmental evaluation center and specifically the multidisciplinary team evaluation is a major question in today's health care environment. The fiscal impact of managed care and the reductions in subsidies for such evaluations from other funding sources also are important factors that are forcing changes and the need to reevaluate current procedures and practices.

We designed an alternative evaluation paradigm, using a specific screening approach to prioritize the needs of the child. The goals were to streamline the number of comprehensive evaluations, reduce cost and time for patients, and improve use of professional staff time and availability of services, without compromising quality of care and revenues for the center. Effectiveness of this paradigm means serving more clients in a timely manner without compromising the quality of care. Our main objective for this study was to examine an alternative model of team evaluation that will effectively use the experienced multidisciplinary team in a tertiary center for Developmental Disabilities and compare it to the traditional approach.

1. Method

1.1. Participants and procedure

The tertiary center for Developmental Disabilities in Birmingham (part of the Civitan International Research Center) is a referral center for the entire state of Alabama as well as

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