Advancing Early Detection of Diagnosis of Cerebral Palsy for High-Risk Infants in BC

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Why does this matter?

- Currently in British Columbia (BC) Canada, a surveillance and care gap exists for infants at high risk of cerebral palsy (CP).
- A recent review of the Canadian CP Registry found the mean age of diagnosis in BC to be 25 months.
- Despite presence of risk factors, many are not eligible for care by neonatal follow-up units.

Standardized Service Delivery in:

- Identification and surveillance of high-risk infants
- Quality of care & enhance patient experience
- Referrals for early intervention and support



CP Early Diagnosis Clinic

1st Appointment (4-6 months CA)

- Parent interview
- Standardised physical tests (e.g. HINE)
- Diagnosis and care planning
- Provides resources package
- Referrals for early intervention



2 weeks phone follow-up



2nd Appointment (10-12 months CA)

- Motor/ Developmental assessment (DAYC / AIMS)
- Confirms diagnosis if unable to make diagnosis at the first visit
- Follow up plan

DIAGNOSIS PROVIDED

(2ND APPT.)

Following The **AACPDM** Care Pathway for early diagnosis of CP

CPEDC intake criteria Based on evidence review of highrisk factors of CP

- < 1 year old
- Has an abnormal GMA result
- Demonstrates at least one of the medical criteria or clinical/ developmental risk factors for CP

CA – Corrected Age

CP – Cerebral Palsy

GMA – General Movements Assessment

HINE - Hammersmith Infant Neurological Examination

DAYC - Developmental Assessment of Young Children

AIMS – Alberta Infant Motor Skills

What did we do?

 The CP Early Diagnosis Clinic (CPEDC) was launched in November 2021 to provide timely assessments and direction for care to infants at high risk of CP in BC.

Outcomes & Significance

DIAGNOSIS PROVIDED

(1ST APPT.)

13%

68%

Nov 2021 – Oct 2023

29%

Mean Admission Age (CA)

7 ± 5 months

Mean Diagnosis Age (CA) # of children assessed (2nd appt.)

■ CP

■ No CP

Probably of

10 ± 5 months

Confirm

No CP

primary care clinicians

Expansion of the intake criteria to increase

initiatives with community &

Knowledge translation

Next Steps:

accessibility of assessment for all high-risk children

We are scaling up: Capacity increases to 80-100 patients per year

- Objectives: To decrease the diagnosis age for highrisk infants to 4-12 months and facilitate early intervention
- To develop a new diagnostic and followup pathway for high-risk infants

Satisfaction Survey:

Survey Response Rate: 63%

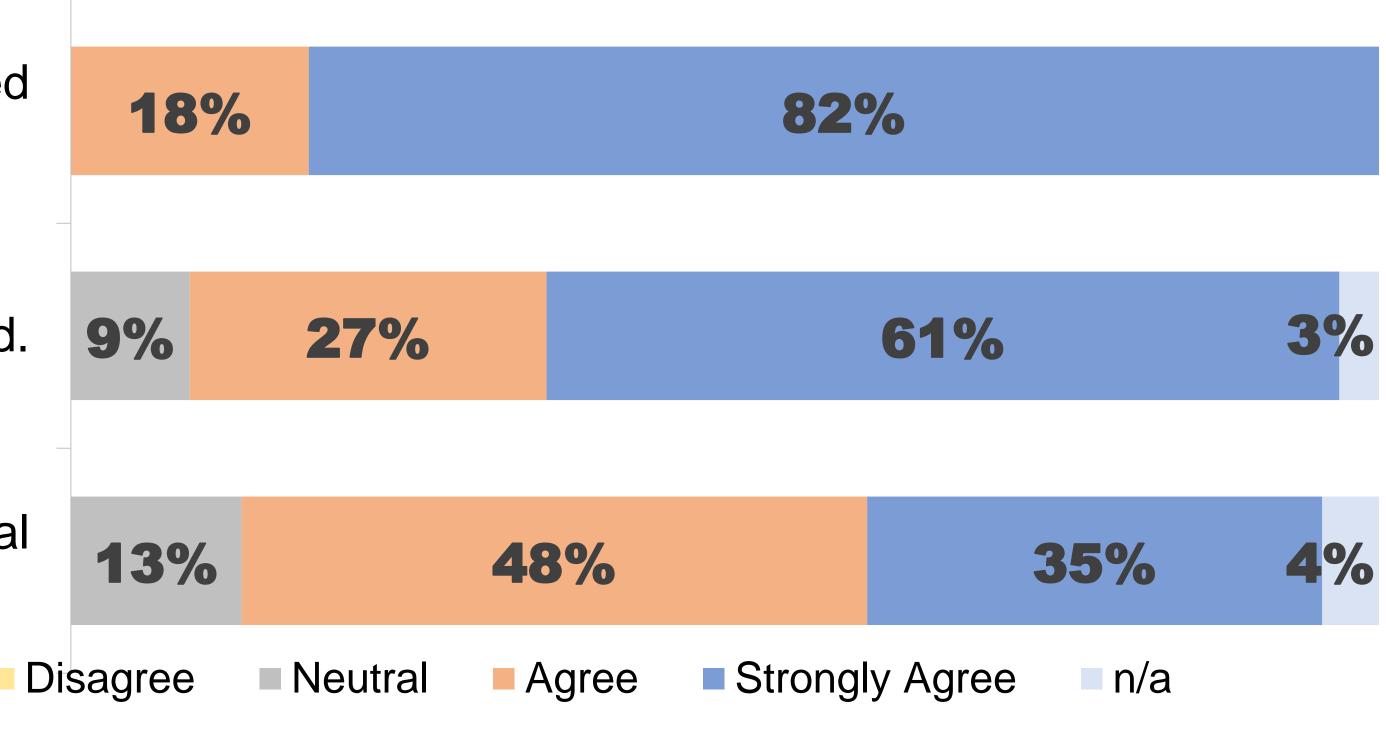
The appointment was beneficial to my child and

I understood the discussion at the end of the appointment/ the diagnosis (if given) and related information discussed during the family conference.

I understood what the next steps are for my child. 9%

The family resource booklet 'A Guide to Cerebral Palsy' meets my family's needs.

Strongly Disagree



of children assessed (1st appt.)

% OF PATIENT HAD

DIAGNOSIS PRIOR TO APPT.

11%

26%

Positive Family Feedback

"Appreciated the team approach to one assessment. Saved my child from being assessed multiple times. And saved us parents from having to share the information with multiple providers."

"Accessibility to early diagnose is important and our family is thankful for it."

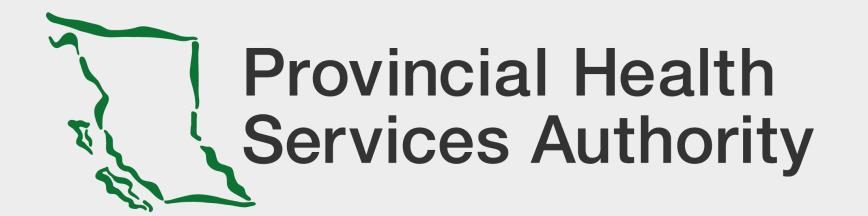
"The process of diagnoses usually has been long, sad and too many experiences where I felt like I wasn't been heard, respected and supported. Sunnyhill was the opposite of that. Your facility and the people in it are amazing and an example of what health care should be. Thank you!"

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Sunny Hill Health Centre



Provincial Health Services Authority





Division of Developmental Pediatrics Department of Pediatrics | Faculty of Medicine

Learn more about **Sunny Hill Health Centre** at BC Children's Hospital

