

The Washington State Community Feeding Team Survey

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Introduction

The Washington State Community Feeding Teams provide family-centered, interdisciplinary, and comprehensive evaluation and services focusing on feeding and nutrition concerns for children with special health care needs. As part of an interdisciplinary team, providers are able to address feeding and nutrition concerns in a cost-effective manner that can benefit families by avoiding multiple visits and duplicated services. The feeding teams work directly with families to set up intervention goals and plans.

Project Context:

No comprehensive instruments have evaluated the current status and services provided by each team.

Project Overview:

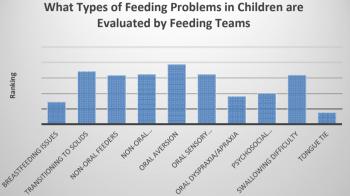
To develop an assessment instrument to evaluate the current service procedures and models being used by each feeding team.

Project Aim/Purpose:

To evaluate the services provided by feeding teams and prioritize/identify training and support for their work with children with special health care needs.

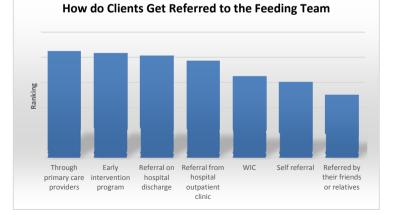
Methodology

A 24 question survey was developed and sent out to feeding teams through Catalyst. 12 out of 18 feeding teams submitted the survey.



Topics Reviewed by the Survey:

- Funding sources for feeding teams
- Referral procedures for children with feeding difficulties
- Feeding team composition
- Training/support needs
- Effectiveness of online education tools



Findings:

9 out of 12 teams reported the number of children they saw were increasing; 2 reported stable, and no team reported decreasing.
Public insurance is the primary funding source for feeding teams.
Clients were referred to feeding teams mainly through primary care providers, early intervention programs, and at hospital discharge.
Children with oral aversion, difficulty transitioning to solids, and non-oral feeders are the most common feeding problems evaluated by feeding teams.

•Most clients didn't receive services prior to being referred for evaluation by the feeding team.

•Services are provided in various locations given the diverse feeding team composition.

•The most common assessment tools reviewed prior to appointment include reports from other health care providers, medical charts provided from the child's primary-care provider, and questionnaires completed by the family describing feeding concerns.

•The majority of teams apply the interdisciplinary model to provide services.

Training/Support Needs by Feeding Teams:

·Behavioral approach to feeding problems

•Details on reimbursement strategies and codes

•Cultural competency considerations when working with families

