As a shelter or housing assistance provider, you are providing support on a daily basis to help vulnerable children, youth and families exit homelessness. You are also a partner to these families as they work to obtain permanent housing. As a provider and partner, it is important to talk to families about their child’s development. If developmental concerns are caught early, you can help ensure that children are linked to the appropriate services and receive the extra support they may need. Partnering with families and specialists to learn the signs and act early will assure that children have the best possible start to a bright future.

This Developmental and Behavioral Screening Guide has been specifically designed for shelter and housing assistance providers. In this guide, you will find information on how to engage clients with children under age 5 in conversations regarding the developmental and behavioral health of their children, and how to facilitate referrals for further screening and evaluation when required. Similar guides have been designed and distributed to early childhood teachers, pediatricians, early intervention and behavioral health specialists, home visitors and child welfare workers.

Accompanying this guide is a list of standardized developmental and behavioral screening tools and the Birth to 5: Watch Me Thrive! Toolkit, which includes information about healthy development, developmental and behavioral concerns, where to go for help, how to talk to families, and tips on how to best support children.

We understand that the families you serve have many needs and your programs are often at-capacity. Developmental and behavioral screenings are intended to be brief and low cost, but have the potential to make a large difference in the lives of children and families at a critical time. You don’t need to become a child development expert or add any additional staff or services in order to play an important role in child and family wellness through developmental and behavioral screening.

If you are part of your local Continuum of Care (CoC), we encourage you to work with your CoC partners to implement universal developmental and behavioral screening that will reach every child experiencing homelessness in your community. As local CoCs work to develop a coordinated assessment system, we strongly urge you to include child developmental and behavioral screening in your community’s initial intake process. We hope this guide, together with the tool list and tool kit, will support your work with families and help children reach their full potential.

What influences child development and behavior?

Starting at birth and continuing throughout childhood, children reach milestones in how they play, learn, speak, act, and move. Skills such as taking a first step, smiling for the first time, and waving "bye-bye" are called developmental milestones. Children develop at their own pace, so it’s impossible to tell exactly when
a child will learn a given skill. However, the developmental milestones give a general idea of the changes to expect as a child gets older. Developmental and behavioral screening plays an important role in early detection and linkage to appropriate supports for children who may be experiencing delays for any number of reasons.

Many factors can influence child development, including biology and early experiences with caregivers and peers. Factors like warm and secure relationships, enriching learning opportunities, proper nutrition, exercise, and rest can make a big difference in healthy child development. On the other hand, adverse events such as homelessness, household dysfunction, maltreatment, abuse, neglect, exposure to violence, and/or trauma can have serious negative impacts on child development. To learn more about the effects of adverse early childhood experiences, check out the Early Childhood Trauma and Identifying and Providing Services to Young Children Who Have Been Exposed to Trauma resources in the Birth to 5: Watch Me Thrive! Toolkit.

**Additional Concerns**

We recognize that in the course of conducting screening, providers may discover situations of concern within the family. We know that adverse experiences like being a victim of child maltreatment or exposure to domestic violence have been shown to negatively affect brain and cognitive development, attachment, and later academic achievement and may have enduring physical, intellectual, and psychological repercussions into adolescence and adulthood.

If you suspect a child is being abused or neglected, contact your local Child Protective Service (CPS) or law enforcement agency so professionals can assess the situation. Keep in mind that CPS agencies are better equipped to investigate the home situation and have the resources to provide needed family support. Many States have a toll-free number to call to report suspected child abuse or neglect. To find out where to call, consult the Child Welfare Information Gateway publication, State Child Abuse Reporting Numbers.

If you find that a child is currently part of a family that is experiencing domestic violence, find a safe time and place to speak to the parent. Let her or him know that there is help available by calling the National Domestic Violence Hotline which provides crisis intervention and can help the parent plan for safety and next steps. Contact them at 1.800.799.7233.

For additional resources, check out Childhelp®, a national organization that provides crisis assistance and other counseling and referral services. The Childhelp National Child Abuse Hotline is staffed 24 hours a day, 7 days a week, with professional crisis counselors who have access to a database of 55,000 emergency, social service, and support resources. All calls are anonymous. Contact them at 1.800.4.A.CHILD (1.800.422.4453).

**Why are housing assistance programs important partners in a child’s development?**

Young children who live in low-income families are more likely to have a developmental delay than children who live with higher income families. They are also more likely to face a number of adverse situations that can have negative impacts on their development including parental depression, poor housing conditions (contributing to problems such as lead poisoning and asthma), low birth weight, lack of prenatal care and nutritional deficiencies. These challenges are linked to later behavior problems and poor academic

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achievement.\textsuperscript{2} Supporting the healthy development of young children can reduce the prevalence of developmental and behavioral disorders that are linked to high costs and long-term consequences for health, mental health, education, child welfare, and justice systems.\textsuperscript{3}

In light of these potential risks, developmental and behavioral screening early and periodically is essential. Conducting child developmental and behavioral screenings with families upon intake at your program or at your community’s centralized entry point enables you to identify children at-risk of developmental delays and if necessary, connect them to the appropriate specialists within your community for further evaluation.

For shelter providers:

You have the opportunity to help parents understand and mitigate the impacts that homelessness has on child development. A child’s developmental and behavioral needs should factor into the development of housing plans to ensure that parents and their children are connected to appropriate services as they move into permanent housing. Too often, permanent housing plans focus on the service needs of parents without considering the needs of their children.

For providers of services in permanent housing:

You can talk to parents about their child’s development as part of services assessment planning. If developmental concerns are caught early, you can help ensure that children are connected to the appropriate services and receive the extra support they may need.

\textit{What is developmental and behavioral screening?}

Developmental and behavioral screening is a first line check of a child’s development using a screening tool. A developmental and behavioral screening tool is a formal research-based checklist that asks questions about a child’s development, including language, motor, cognitive, social and emotional development. All children should receive a screening, especially if you are concerned about their development. The results of a screening can help you plan how to best support the development of the children in your program. A screening does \textbf{not} provide a diagnosis, rather, it indicates if a child is on track developmentally and if a closer evaluation by a specialist is needed.

Connecting families to a doctor or specialist is an important next step if a child needs a formal evaluation. A formal evaluation is a much more in depth look at a child’s development, usually done by a trained specialist like a developmental pediatrician, child psychologist, or speech language pathologist, and may involve child observation, standardized tests, and parent interviews or questionnaires. The results of formal evaluations are used to determine eligibility for early intervention services.

\textit{What is developmental monitoring?}

Developmental monitoring is a flexible and repeated observation of children’s developmental milestones over time, usually using a brief checklist. It is different from screening in that it is less formal and it is done on a regular basis. Monitoring can help a parent decide if a child should receive a formal developmental screen or see their healthcare provider sooner than expected. Encouraging families to use developmental

\begin{itemize}
  \item \textsuperscript{2} Glascoe F. (2001). Are over-referrals on developmental screening tests really a problem? \textit{Archives of Pediatric Adolescent Medicine}, 155(1), 54-9.
\end{itemize}
monitoring checklists can help clarify what behaviors they should be observing in their children. Sample checklists can be found in the accompanying *Birth to Five: Watch Me Thrive! Toolkit*.

**How often should children be monitored and screened?**

Children’s development should be *observed*, or *monitored*, on an ongoing basis, at home, in shelter, in child care settings, and anywhere else children spend their time. The frequency of *screenings* is dependent on the screening tool being used. These screenings may be done in early childhood settings, schools, emergency shelters, or in the child’s medical home (the provider for a child’s comprehensive medical care). Although there are specific ages that screening is recommended, screening should be done at any age if you and/or the family are concerned about a child’s development or if the family has not had a screening recently.

Some children may already be screened routinely by other professionals, such as a pediatrician in their medical home. Many other children may not have a medical home and have not, but need to receive a screening. At the initial intake for your program, make sure to ask families whether their children have been screened before, in accordance with the recommended ages. If a child has never been screened before or you have reason to be concerned about the child’s development, you should encourage the family to have you administer a screening. Considering that the children you serve are at higher risk for developmental delays, it is always better to offer to administer a screening if there is any uncertainty.

**A Team Approach**

Developmental and behavioral screening and support is a team effort. There are many different professionals that interact with children and families. Parents and families are at the center of children’s support teams. Other important members of the team include early care and education providers, medical providers, early interventionists, home visitors, housing assistance providers and behavioral health specialists, among others. As a member of the team, you should encourage and remind families to communicate developmental or behavioral concerns, screening results, and support plans to all members of the team. With everyone on the same page, children can get the support they need in every setting.

A developmental and behavioral screening passport, similar to an immunization card, is a tool to help parents keep track of their children’s screening records. It can be used to inform all members of the team of the child’s screening record. A passport is included in this *Birth to 5: Watch Me Thrive Birth to 5: Watch Me Thrive Toolkit*. Encourage families to use it and share it with all of the professionals on the child’s team.

**When should I talk to families about development and screening?**

The intake point within the coordinated assessment system provides a unique opportunity to ensure that all children coming into your community’s homeless system have had up-to-date developmental and behavioral screenings. If a coordinated assessment system does not exist in your community, or does not offer a screening initially, individual programs should strongly consider providing a screening as part of their intake process.
You should talk to all families about developmental and behavioral screening and make sure to explain that it is a normal screen that children go through, like hearing or vision screens. In addition, you can encourage families to talk to their primary healthcare provider at their medical home about their child’s development at every well child visit (regularly scheduled visits with a child’s pediatrician).

You should have a more in depth conversation about screening if you have concerns about a child’s development once they are in your program. As soon as you notice that a child is not developing at quite the same rate as other children in your program, it is important to talk to the family. Remember, all children are different and we do not expect them all to develop at the same pace, but over time, if you notice a child is behind his peers socially, emotionally, or in any other way, you should speak up.

Before conducting any screening, make sure you have the family’s permission. Once you have the first conversation, engage families every step of the way, from explaining what developmental and behavioral screening is to linking them to people and services that can help. Be sure and encourage families to talk to their child’s health care provider and share the results of the screen. You can even help them come up with questions they could ask their Doctor as a result of the screen.

**How do I engage families in the screening process?**

Check the *Birth to 5: Watch Me Thrive!* website for the soon-to-be-released learning module “Talking to Families about Developmental Screening,” to guide you in talking to families. You also can connect all families to parent training information centers, family-to-family health information centers, or parent-to-parent programs that connect parents of children with special needs with experienced parents for emotional support and help finding information and resources. Information on these family support centers is also available in the *Birth to 5: Watch Me Thrive! Toolkit*. Here are a few helpful tips to get you started in the meantime:

**Talk to families before screening**

- When talking to families, it is best to use the primary language spoken in the home.
- *If you are offering to conduct the screening at an intake point:* Start off by expressing how important the first five years are for a child’s development and that developmental and behavioral screenings are suggested at intake to all families with children under age 5.
- *If you have previously worked with the family or are familiar with the child:* Start off by pointing out something positive about the child. Name a skill or behavior the child is doing well and express how excited you are to see his or her progress. If you are concerned about his or her development, point out the specific behavior the child is struggling with and ask if they observe the same behaviors. It is ok to say “I may be overly concerned, but I just want to make sure”.
- Use the *Learn the Signs. Act Early* developmental factsheets available in the *Birth to 5: Watch Me Thrive! Toolkit* to support your observations on the child’s strengths and challenges. This will assure families you are basing your comments on facts.
- Explain what developmental and behavioral monitoring and screening is. Make sure you note that it is a normal process that children go through to make sure they are on track in their development and that it does not judge their parenting skills or mean they are a “bad” parent if their child receives an “at risk” screening result.
- Provide families with informative materials and places they can go to learn more.
- Try to make it a discussion. Give them time to listen, reflect, and provide input.
• Remind families that you do your job because you care about children and families and that you are their partner on their child’s developmental journey.

• Stress that a screening does **not** provide a diagnosis.

• Ask if they know whether their child has been screened in the past. If so, talk about the results in a confidential environment. If the child had an “at risk” screening result, ask if the family has followed up with a specialist or their pediatrician. If not, connect them to an appropriate specialist (additional information below).

**Walking families through the screening process**

• If a family informs you that their child has not been screened in the past or they have concerns about their child, ask the family for permission to perform a screening using a standardized tool and explain the survey will take about 5 minutes.

• If the family gives written consent, find a confidential space to conduct a developmental and behavioral screening using a tool that is appropriate for the families you serve. Most tools are surveys about children’s development that parents can fill out themselves or have read to them.

• Score the developmental and behavioral screening in accordance with the instructions in the tool’s manual.

• If you do not feel comfortable going through the screening process with the parent yourself and would prefer to refer the parent elsewhere for the screening, the *Birth to 5: Watch Me Thrive Toolkit* can help in finding appropriate places to refer, including the child’s medical home or an early intervention specialist.

**Talk to families after an “at risk” screening result**

• Remind families that this is **not** a diagnosis. An “at risk” screen simply means the child is at risk for potential developmental delays and should be evaluated more thoroughly by their primary health care professional, medical home, or another specialist. Even if you are not concerned, an “at risk” result indicates further evaluation is needed. Standardized screening tools detect many delays before delays are overtly apparent.

• Connect the family to the right specialist, like a pediatrician or an early intervention provider, who can confirm the results and do a more in depth evaluation. The *Birth to 5: Watch Me Thrive Toolkit* that accompanies this guide can help you find local resources and specialists.

• Work together to create a list of questions to ask their pediatrician or early intervention provider as a result of the screen.

• Suggest activities that families can practice with their children to help in their development. The tips and learning modules in the *Birth to 5: Watch Me Thrive Toolkit* offer many ideas for activities.

• Use the information in the *Birth to 5: Watch Me Thrive Toolkit* to learn more about development and screening so that you can answer families’ questions as best you can. If you do not know the answer to a question, it is ok to say you are not sure but will find out.

**Talk to families after a “low risk” or “no risk” screening result**

• Discuss the results with the family and ask them to share results with the child’s primary health care provider or medical home and child care provider, if applicable. Remind them that monitoring children’s development should be ongoing when they are with the child, in child care settings, and elsewhere.
• Give them materials that describe their child’s next developmental level. The Learn the Signs. Act Early Milestones Moments booklets included in the Birth to 5: Watch Me Thrive Toolkit can serve this purpose.

• All children have strengths and challenges. Use the screening results to talk about them. The Birth to 5: Watch Me Thrive Toolkit offers ideas for activities that families can do with their children to help in their development.

• If you are still concerned about a child’s development after a “low risk” or “no risk” screen, speak with the family and ask them to share your concerns with their child’s primary health care provider who may administer another test or refer to child to a specialist who can do a more thorough evaluation.

How do I refer families to the right specialist after screening?

There are people in and around your community who can help children with developmental concerns. Many children have a regular primary health care provider or medical home that can look at developmental concerns more closely. Ask families to take the results of their screen or a milestones checklist to their child’s primary health care provider or medical home.

Find the Right Screening Tool

- **Ages:** What age groups do I serve and what screening tools are made for those ages?
- **Time:** How much time does it take to use this screening tool? Which tool is practical within a child care or Head Start program?
- **Cost:** What is the cost for the screening tool and its ongoing use within early care and education programs?
- **Training:** Is there training required to use this screening tool? How much training is required? What type of training is recommended?
- **Languages:** Does the screening tool need to be available in different languages to fit the needs of the families I serve?
- **Culture:** Is it culturally appropriate?

Whether or not the child has a medical home, if a child under 3 years of age has an “at risk” screening result, connect the family to a local early intervention program. Early intervention is available in every state and territory of the United States and offers child evaluations free of charge. The Birth to 5: Watch Me Thrive Toolkit accompanying this guide provides a description of the early intervention system and a state by state directory of early intervention coordinators, sometimes called “Part C coordinators”. If the child is age 3 or older, you can help connect the family to their neighborhood public school, which can provide information on evaluation, even if the child is not in kindergarten yet. Screening is encouraged for children in your program up to age 5. After age 5, schools are able to administer screenings for the child.

If you are interested in helping the family locate a pediatric health care professional for the child, contact your state Maternal and Child Health Hotline. The Birth to 5: Watch Me Thrive Toolkit provides information on how to get connected. You also can connect families to parent training information centers or family to family health information centers. Information on these family support centers is also available in the Birth to 5: Watch Me Thrive Toolkit.
**How do I select the right screening tool to fit my needs?**

The compendium of screening tools that accompanies this Guide may help you learn more about the tool your program is currently using or help you find a screening tool to fit your needs. This list describes the evidence base behind certain standardized screening tools. Information is included on the cost, time to administer, training requirements, ease of use, and other factors that can help you find the right tool. Programs should not interpret this list as recommending or requiring the use of a particular tool. Rather, it should be used to learn about a selection of screening tools that are supported by research and help you make informed decisions about the best fit for your program or CoC. All screening tools are sensitive to social-emotional development, which may be of particular concern for the families you serve.

Many early intervention systems and medical homes have adopted their own standardized developmental screening tools. When choosing a screening tool, it may be helpful to align with local referral and child service agencies to support developmental screening activities recommended by the early intervention provider or medical home. It is also important to learn about whether the screening tool in use measures what it is supposed to measure with accuracy. Read about the tool in the compendium of screeners that accompanies this Guide to make sure the tool is of high quality and accurate in tracking development.

**How do I use this list of screening tools?**

The list of screening tools that accompanies this document is made up of two sections: a section of summary tables and a section of individual profiles. If you are looking for a new tool, start at the summary tables as they provide an overview of many different tools. The tables may help you narrow the range of tools to consider. Once you narrow down the screening tools that may fit your needs, you might choose a smaller set of tools to read about in more detail in the individual profile section. If your program already uses one of these tools, you can go straight to the profile section to read more about it.

**Making a difference**

Research indicates that the first five years of a child’s life are critical to brain development, academic achievement, and later life outcomes. The moments it takes to conduct a developmental and behavioral screen can change the trajectory of a child’s life forever. By incorporating a system of regular developmental and behavioral screening into your community’s coordinated assessment or program intake process, YOU can play an important role in making sure all children thrive. We hope you find this User Guide, Screening Compendium, and *Birth to 5: Watch Me Thrive! Toolkit* useful in supporting young children and their families on their developmental journey. Visit [hhs.gov/watchmethrive](http://www.hhs.gov) for a complete set of resources.
Birth to 5: Watch Me Thrive!

Celebrating Developmental Milestones • Implementing Universal Screening • Improving Early Detection • Enhancing Developmental Supports