



Birth to Five: Watch Me Thrive!

Developmental and Behavioral Screening and Support

May 21, 2014

4:00 pm

Head Start Performance Standards

The Head Start Performance Standards require that within 45 days of a child entering Head Start, appropriate screening procedures must be completed to identify any developmental, sensory (visual and auditory), and behavioral concerns. These procedures should be appropriate for the child's age, cultural background, and language and be conducted in collaboration with parents.

Head Start

The Screening and Assessment Process

All Head Start Children

Comprehensive Screening

- Health Status
- Developmental
- Sensory (Vision and Hearing)
- Behavioral

No concern identified

Does not meet disability criteria

Formal Evaluation

Evaluation and determination of eligibility for disability services

Meets disability criteria

Concern identified

Concern identified

Concern identified

Concern identified

Concern identified

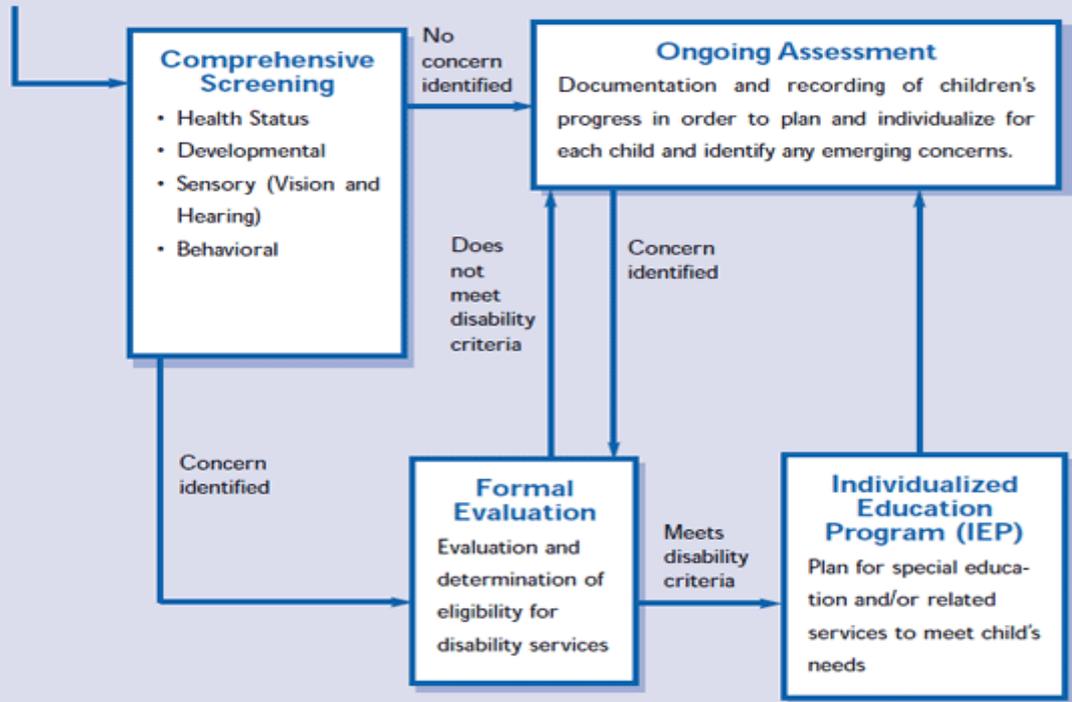
Concern identified

Ongoing Assessment

Documentation and recording of children's progress in order to plan and individualize for each child and identify any emerging concerns.

Individualized Education Program (IEP)

Plan for special education and/or related services to meet child's needs



Presenters Today

Katherine Beckmann, PhD, MPH, ACF

Christy Kavulic, EdD, ED

Dina Lieser, M.D., New York

Jennie Mauer, MPA, Wisconsin

The Issue

- **1 in 4 children**, age 0-5 years, are at moderate or high risk for developmental, behavioral, or social delay
- AAP recommends screening of all children for developmental, behavioral, and social delays at 9, 18, and 24 or 30 months
- Less than 50% of pediatricians use valid and reliable screening tools
- Children who have developmental delays are at greater risk for later emotional and behavioral problems and poor educational achievement



Identified Prevalence of Autism Spectrum Disorder

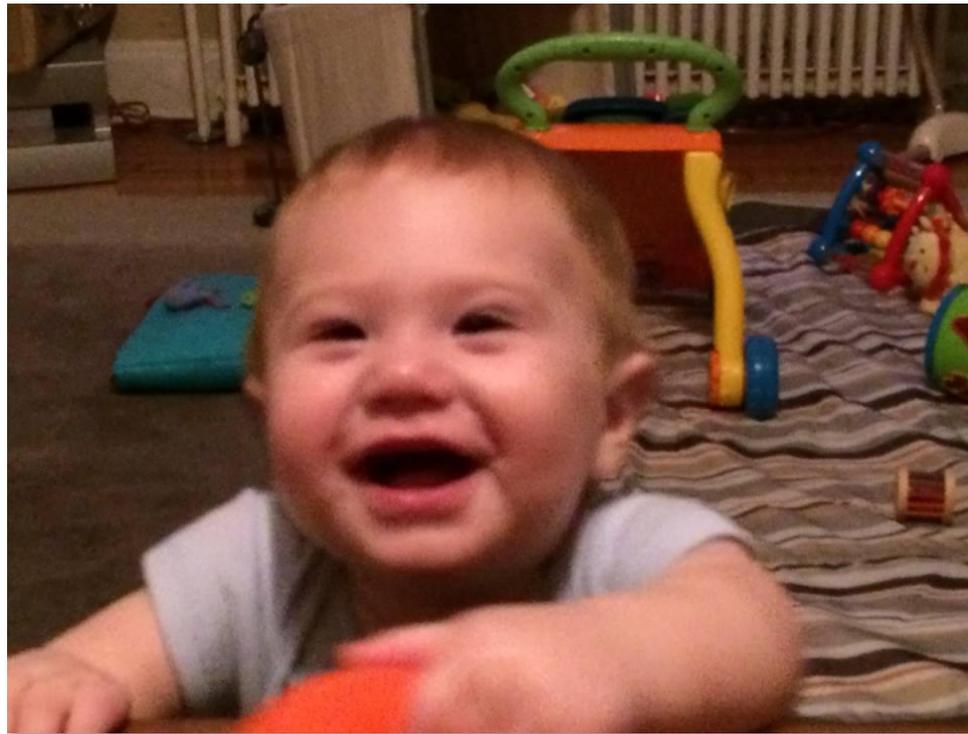
ADDM Network 2000-2010

Combining Data from All Sites

Surveillance Year	Birth Year	Number of ADDM Sites Reporting	Prevalence per 1,000 Children (Range)	This is about 1 In X
2000	1992	6	6.7 (4.5 – 9.9)	1 in 150
2002	1994	14	6.6 (3.3 – 10.6)	1 in 150
2004	1996	8	8.0 (4.6 – 9.8)	1 in 125
2006	1998	11	9.0 (4.8 – 12.1)	1 in 110
2008	2000	14	11.3 (4.8 – 21.2)	1 in 88
2010	2002	11	14.7 (14.3 – 15.1)	1 in 68



Making sure all of our youngest children are screened and given support *early* are important priorities for the U.S. Departments of Health and Human Services and Education.



Public awareness of child development and the importance of families is critical in this effort.



The Partners



Administration for Children and Families

Administration for Community Living

Centers for Disease Control and Prevention

Centers for Medicare and Medicaid Services

Health Resources and Services Administration

Eunice Kennedy Shriver National Institute for
Child Health and Human Development

Substance Abuse and Mental Health Services Administration

Office of Special Education Programs, Department of Education

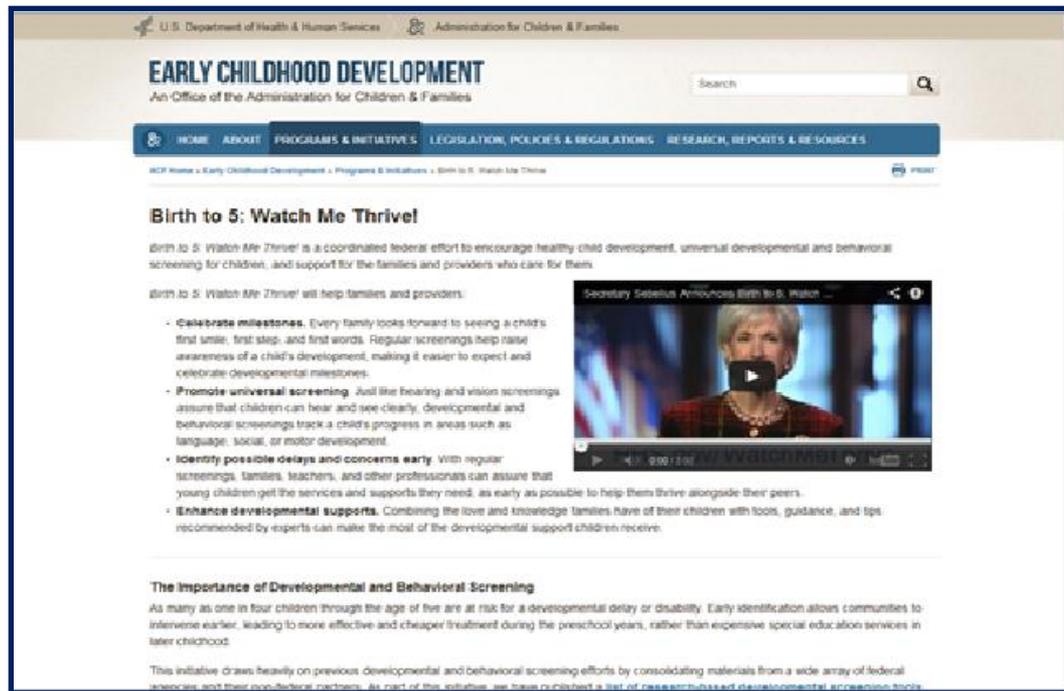
Birth to Five: Watch Me Thrive!

Coordinated public outreach campaign to promote awareness of child development and developmental and behavioral screening, referral, and follow-up. Key messages include:

- Celebrating developmental milestones
- Promoting universal developmental and behavioral screening
- Improving early detection
- Enhancing developmental supports



Birth to Five: Watch Me Thrive! Toolkit



1. **A compendium** that reviews implementation, reliability and validity characteristics of screening instruments
2. **User guides**, designed for providers from multiple sectors and the communities in which they live
3. **Collection of resources** to bring awareness to parents and providers about healthy child development

Birth to Five: Watch Me Thrive! Compendium



- First line screening instruments for children, birth to 5 years
- Pertinent information includes cost, administration time, quality level, training required, and age range covered
- Reference for early care and education providers, pediatricians, home visitors, child welfare case workers, mental health professionals, early intervention specialists, and various others

Birth to Five: Watch Me Thrive! User Guides

Early Care and Education Providers



Early Intervention Service and Early Childhood
Special Education Providers

Families



Primary Care Providers

Communities



Child Welfare

Home Visitors



Behavioral Health Providers

Housing and Homeless Shelter Providers





Birth to 5: Watch Me Thrive!

Community Guide



Broad Community Goals and Strategies for Successful Developmental and Behavioral Screening Initiatives and Community Examples

- Raise public awareness about the importance of celebrating developmental milestones with children and families, universal developmental screening, risks for developmental delay and supports for those at risk.
- Engage community leaders.
- Discover common stakeholder interests and goals.
- Provide cross-disciplinary training to relevant providers who interact with young children in the administration of standardized, reliable screening tools.

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Community Guide

- Build systems, communication, privacy assurances, and infrastructures
 - 1) Support expanded screening across early childhood programs and providers while minimizing the risk of duplicate screenings, and
 - 2) Ensure that referrals are successful, feedback loops are utilized, follow up and monitoring occurs, and action plans are shared with all who support young families and their children.
- Improve communication processes across early care and education and primary care.
- Destroy myths that may act as barriers to action.
- Take advantage of medical/health home, health information exchange, and health care reform initiatives.

Birth to Five: Watch Me Thrive! Resources

- Information on developmental milestones
- Every day tips for caregivers to promote healthy development
- Fact sheets on specific developmental disabilities or delays
- Milestone checklists and tracking tools
- Learning modules for providers
- Screening passport for families
- Guidance for finding help locally



Survey of Well-Being for Young Children (SWYC)

Goals

- Integrated screening of child development, autism, behavior, and family risks
- Strong validation and a longitudinal growth curve that provides a systematic look at children and documents development over time
- Sensitive to cultural differences
- Short, parent survey
- Easy to access, administer, and score
- Free and in the public domain
- Amenable to electronic format and cross-system data sharing

Next Steps

- Validation in non-clinical settings
- eSWYC
- ACF Tribal Early Childhood Research Center SWYC Feasibility Study

Developmental Screening Efforts: New York

Dina Lieser, M.D., New York

NY Story

- Priority of Promoting Healthy Development Workgroup of ECAC – need and opportunity
- Explored best Practices Across States
- Convened stakeholders; focus groups/ surveys and meetings (with deeper, broader, cross –systems players)
- Asset mapping for successful programs/ efforts in NYS
- Convened best practices
- Made recommendation for “screening system” : including: professional development/ policy/ payment and outreach/ education
- Step by step moving recommendations along

OUTREACH CAMPAIGN

- Cross- systems: focused messages (vetted)
- Letter/talking points/ parent brochure/posters
- Intentional partnership development
- ECAC anchor



Keep in rhythm
with your
growing child...

The early years set
the stage for healthy
development.

Make sure:

- ✓ You discuss your child's development at every visit with your health care provider
- ✓ Your child receives a developmental assessment (or 'screen') during the check up at:
___ 9 months; ___ 18 months;
___ 24 months; ___ 30 months
and anytime you have concerns



For more information and materials on child development and screening go to: cdc.gov/ActEarly



Because their
futures are in
your hands...

Have you:

- ✓ Discussed child development, including social and emotional health, with the parent at each visit
- ✓ Done a formal developmental screening at:
9 months; 18 months;
24 months; 30 months
- ✓ Done a formal developmental screening if any concerns arise
- ✓ Made necessary referrals and provided follow up if needed*



For more information and materials on child development and screening go to: cdc.gov/ActEarly

*Standard of Care of all children



Because
their futures
are in your
hands...

Are you:

- ✓ Looking for and encouraging developmental milestones?
- ✓ Discussing strengths and concerns with families?
- ✓ Communicating with the child's health provider?
- ✓ Ensuring that each child has received a developmental screen at 9 months, 18 months, 24 months, 30 months and if there are concerns?
- ✓ Making necessary referrals with follow up?



For more information and materials on child development and screening go to: cdc.gov/ActEarly

BIRTH TO FIVE WATCH ME THRIVE

It resonates! credibility, resources, timely, learning community,
strategic priority



DEVELOPMENTAL SCREENING PASSPORT FOR:

Building Bridges Between Systems: Developmental Screening and Celebrating Milestones as a Systems Driver

- Build mechanisms to promote communication at program level (HIPAA/FERPA, education)
- Leverage unique strengths of systems and work towards collaboration
- Strengthens and highlights stakeholder coalitions, communication streams and policy levers that can be repurposed
- Addresses a common gap around health and parent engagement within systems building (varies), ensures infant/toddler focus
- Building bridges takes infrastructure, leadership and intentionality
- Can be realized at the program level * (collaboration, consultation, community linkages, parent engagement, integration)

Pediatrician /Health Champions

- Asset mapping
- AAP Chapter : chapter child care contact/ Chapter leadership
- Academic Medical Centers: ambulatory/ developmental behavioral/ community pediatrics
- Federally Qualified Health Centers
- Local Hospitals/health institutions

Wisconsin Project LAUNCH



Jennie Mauer, MPA
Wisconsin Department of Public Instruction,
formerly the State Coordinator for Project LAUNCH

Wisconsin's Developmental Screening strategy

focused on five broad initiatives:

1. Parent Focus Groups and Provider Interviews
2. Screening Children through LAUNCH Direct Services
3. Developmental Screening Trainings across Early Childhood Settings
4. Development of Promotional Materials
5. Partnering with Other Collaborative/Systems Change Initiatives

Key findings

Parents

- The ASQ-3 is best introduced by someone the family deems a credible and trusted source.
- Some reported mixed feelings of excitement and apprehension about the ASQ-3. Results can be seen as a reflection of how children have been raised; some parents were concerned about feeling judged.
- When explaining the screening results, start with the child's strengths, treat the parent as an expert and full partner, and engage parents in planning for treatment.

Providers

- Educators using the ASQ-3 said that it made them better teachers and classroom managers, strengthened their relationships with parents, and made routine classroom activities easier.
- Organizations using the ASQ-3 had an infrastructure in place to assure its proper implementation.

Emergent Challenges

Surveys of providers trained revealed few were able implement the ASQ-3. Key challenges included:

- **Expense** of purchasing the kit and other supplies.
- **Competing priorities** – most notably, the new YoungStar quality rating system was a challenge for many centers trying to understand and meet the requirements of the new system.
- Need for **more training or help** with tool implementation.

LAUNCH Responses

In response, LAUNCH made the following changes:

- **Allocated funds to purchase ASQ-3 kits** for trained child care providers who could not afford the materials
- A **Train the Trainer program** was launched to sustain efforts beyond Project LAUNCH
- Launched a **technical assistance program** with Milwaukee Public Schools (MPS) Early Care. The new MPS ASQ-3 trainer now provides mentoring to other newly trained MPS child cares
- Developed a **Readiness Checklist** to help child care providers assess their readiness for ASQ-3 implementation, and offered technical assistance accordingly
- Best practice guidance and materials:
<http://www.collaboratingpartners.com/screening-early-identification-howtoworksheets.php>

Birth to Five: Watch me Thrive in Wisconsin

- Consistent guidance
- Platform for policy change
- Best practice guidance
- Open source tool, SWYC



Questions?



Birth to 5: Watch Me Thrive!

www.hhs.gov/watchmethrive

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Thank you for participating in this webinar