

**Early Childhood Developmental Screening**  
Kerry Miller, M.A.  
Barbara Jackson, PhD  
UNMC-Munroe Meyer Institute  
Department of Education and Childhood Development



---

---

---

---

---

---

---

---

**Objectives**

- Discuss what developmental screening is and why it is important in Early Childhood
- Explore widely-used screening tools
- Practices around interpreting results



---

---

---

---

---

---

---

---

**What is Developmental Screening?**

**Developmental screening** is the early identification of children at risk for cognitive, motor, communication, or social-emotional delays that **may** interfere with expected growth, learning, and development.



---

---

---

---

---

---

---

---

### What is Developmental Screening?

- Brief
- Inexpensive
- Standardized



---

---

---

---

---

---

---

---

### Why screen?

- As many as one in four children aged birth through five are at-risk for developmental delay or disability (National Survey of Children's Health, 2011-12)
- The earlier the better: well-designed early childhood interventions have been found to generate a return to society ranging from \$1.80 to \$17.07 for each dollar spent on the program (Karoly, et al. 2005).



---

---

---

---

---

---

---

---

### Developmental Screening Tools for Infants, Toddlers, and Young Children



---

---

---

---

---

---

---

---

## Ages and Stages Questionnaire (ASQ)

- Communication
- Birth-60 months
- Gross Motor
- Parent Report
- Fine Motor
- 10-15 minutes to complete, 5 minutes to score
- Problem Solving
- Personal-Social




---

---

---

---

---

---

---

---

## Interpretation of ASQ

1. SCORE AND TRANSFER TOTALS TO CHART BELOW: See ASQ-3 User's Guide for details, including how to adjust scores if item responses are missing. Score each item (YES = 10, SOMETIMES = 5, NOT YET = 0). Add item scores, and record each area total. In the chart below, transfer the total scores, and fill in the circles corresponding with the total scores.

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	13.06		●	●	●	●	●	●	●	○	○	○	○	○	○
Gross Motor	37.38		●	●	●	●	●	●	●	●	●	●	●	●	●
Fine Motor	34.32		●	●	●	●	●	●	●	●	●	●	●	●	●
Problem Solving	25.74		●	●	●	●	●	●	●	●	●	●	●	●	●
Personal-Social	27.19		●	●	●	●	●	●	●	●	●	●	●	●	●

Pass - Child's development appears to be on schedule

Monitor -Provide learning activities and monitor

Refer - Further assessment with a profession may be needed




---

---

---

---

---

---

---

---

## Modified Checklist for Autism in Toddlers-revised (MCHAT-R)

- Pretend Play
- 16 months-30 months (target age 24 months)
- Communication
- Parent Report (possible follow-up interview)
- Self-stimulatory behavior
- 10 minutes to complete

Does **not** imply autism diagnosis, indicates need for comprehensive assessment




---

---

---

---

---

---

---

---

## Interpretation of M-CHAT

**Low-risk:** total score is 0-2

**Medium-risk:** total score is 3-7

**High-risk:** total score is 8-20; may bypass follow-up interview and refer for evaluation

**Medium-risk:** administer follow-up interview. If score remains at 2 or higher, screen is positive and child should be referred for evaluation



---

---

---

---

---

---

---

---

## The Survey of Wellbeing of Young Children (SWYC)

- Cognitive
- Language
- Motor
- Social-emotional
- Family risk factor
- Additional section to screen for autism (18-60 months)

- 2 months-60 months
- Parent completed
- 10-15 minutes to complete



---

---

---

---

---

---

---

---



---

---

---

---

---

---

---

---

**Screening instruments do not:**

- Confirm a developmental delay
- Establish eligibility for services through Early Intervention
- Allow for diagnoses to be made



---

---

---

---

---

---

---

---

**Interpreting Screening Results**

- Start by listening and addressing parents' concerns
- Are there cultural factors that contributed to the results?
- Are there health issues that may have effected their performance?



---

---

---

---

---

---

---

---

**Interpreting Screening Results**

- Review with the parents the purpose of the assessment
  - Screenings are not diagnostic
- Do not use the word "Fail" - rather suggests further assessment
- Use words like: "may be learning more slowly" or "may be behind children his age"
- Primary recommendation is to refer for further assessment



---

---

---

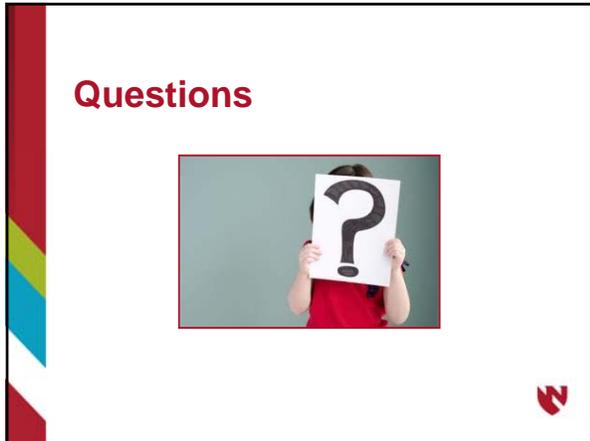
---

---

---

---

---



---

---

---

---

---

---

---

---



---

---

---

---

---

---

---

---