

Developmental Screening

What's The Scoop?

Office of Early Childhood Education and Family Services

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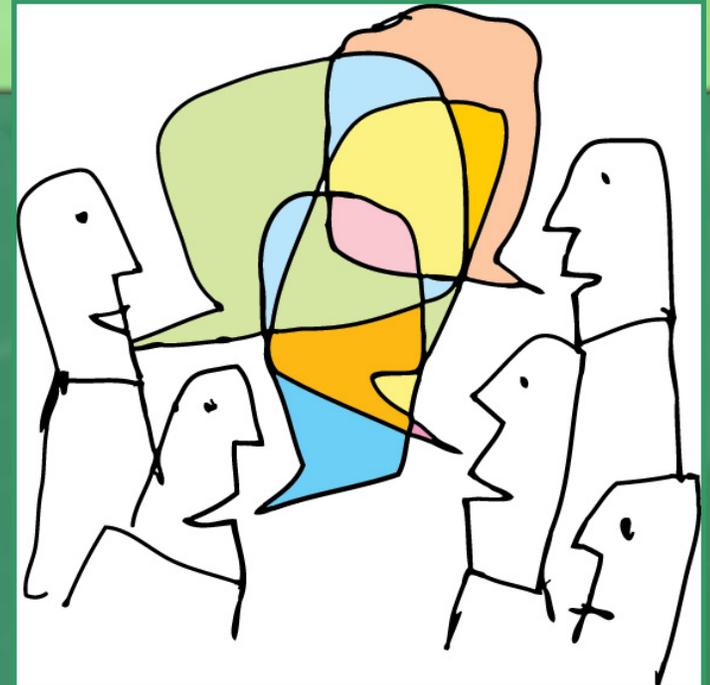
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Objectives:

- Heighten the understanding of developmental screening.
- Provide the opportunity to examine commonly used developmental screening tools.

Turn'n Talk

- Share a memory of your earliest assessment experience.



Interesting Facts

- 17% of children have a developmental or behavioral disability.
- Less than 50% of these children are identified as having a problem before starting school.
- 65% of pediatricians feel inadequate to assess children's developmental status.

Centers for Disease Control and Prevention: Child Development www.cdc.gov

Fact or Myth?

- There are no adequate screening tools for preschoolers.
- It takes a great deal of training to administer screening correctly.
- Screening takes a lot of time.
- Tools that incorporate information from parents are not valid.

What is Developmental Screening?



- ***The use of a brief procedure or instrument designed to identify, from within a large population of children, those who may need further assessment to verify developmental and/or health risks.****
- **Think of a “screen” as a sieve:**
 - ❑ Small problems fall through the screen and aren't of concern.
 - ❑ Large problems are “caught” in the container and need to be addressed.
 - ❑ Some problems are the same size as the holes in the mesh and require further surveillance.

*CCSSO, ECEA SCASS

<http://www.ccsso.org/projects/SCASS/Projects/Early%5FChildhood%5FEducation%5FAssessment%5FConsortium/>

What's the Purpose?



- Discern developmental delays.
- Differentiate between a delay that requires a special education referral and a delay caused by a disadvantaged environment or opportunity to learn.
- Speed up the process in getting children the help they need to enter kindergarten “safe, healthy, and eager to succeed in school and in life.” (Great Start Vision)
- Gain access to small problems early to prevent them growing into more severe problems later.

When Should Screening Occur?



- Birth.
 - e.g., newborn hearing screening, PKU testing
- Periodic well-child checks (EPSDT*, AAP**).
 - Health surveillance.
 - Vision, hearing screening.
 - Different tools at different ages; e.g., autism screening about 24 months.
- **Entrance to preschool.**
- **Kindergarten entry.**

*Early and Periodic Screening, Diagnosis and Treatment required by Medicaid

**Recommendations of the American Academy of Pediatrics
www.aap.org

Commonly Used Developmental Screening Tools

- Ages and Stages
- Battelle
- Brigance
- Denver II
- DIAL-3 (Developmental Indicators for the Assessment of Learning, 3rd Revision)
- ESI-R (Early Screening Inventory- Revised)

A Closer Look at Screeners

- In your group, discuss whether your assessment tool is appropriate according to the guidelines presented.
- Record your findings to share with the whole group.



What's in a Developmental Screening Instrument?

- Wide range of areas of development:
 - Visual-motor/adaptive (eye-hand coordination, visual memory, drawing, block building)
 - Language and cognition (comprehension, articulation, expression, reason, count)
 - Gross motor/body awareness (balance, gross motor coordination).
- Administered one on one; game-like situation using manipulatives and questions; child moves around and responds; often include drawing.

Selecting a Developmental Screening Tool



■ Reliability

- How confident can we be that the tool assesses the same thing when used with different examiners and children?

■ Validity

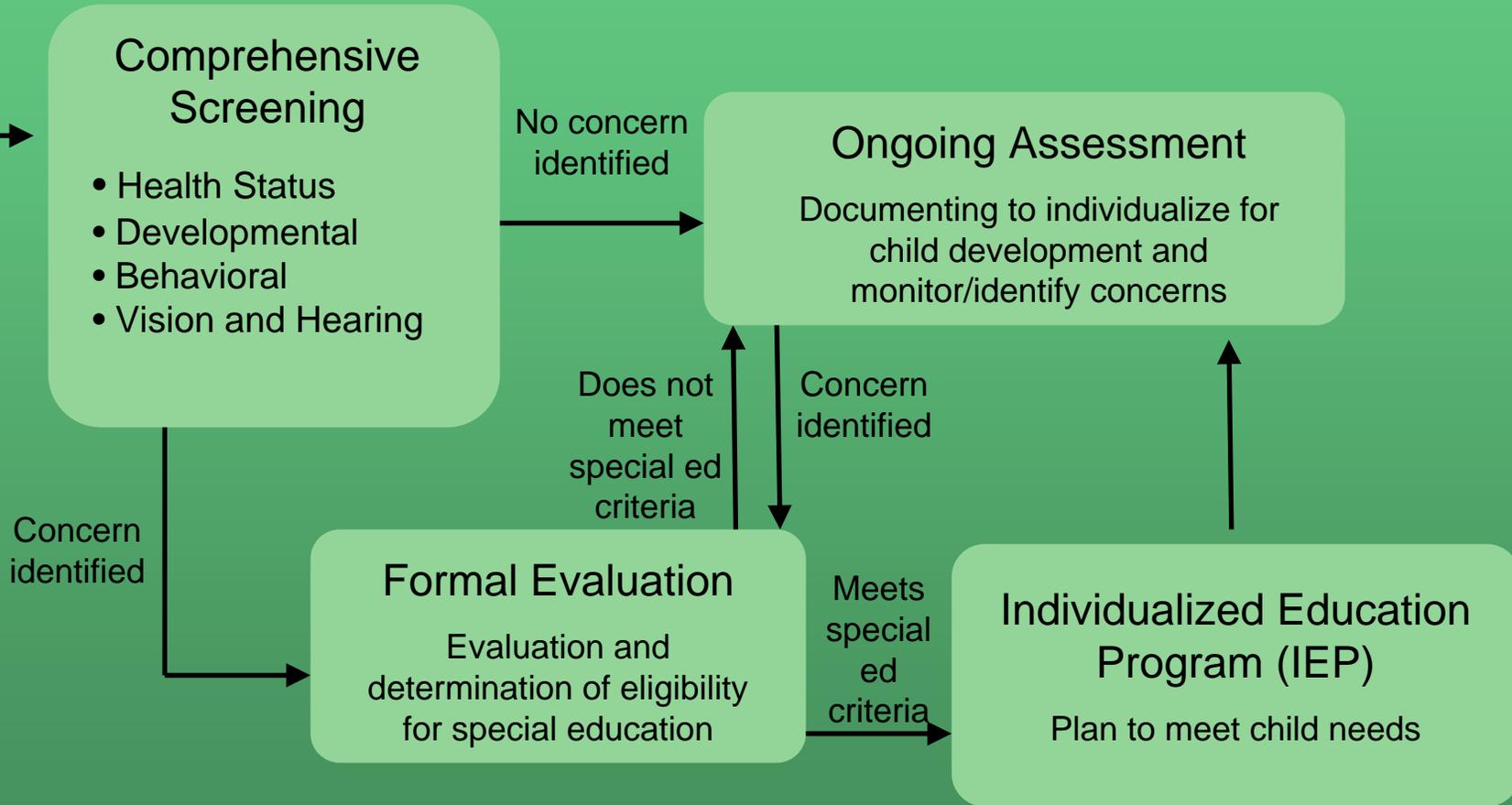
- Does the tool measure what we want it to? Can we draw appropriate inferences from the tool? Tools should identify at least 80% of children not-at-risk as not-at-risk (specificity), and 80% of those at-risk as at-risk (sensitivity).
- Confirmed by comparisons in the tool development
 - Concurrent validity: compare with comprehensive diagnostic assessments.
 - Predictive validity: compare with children's performance at a later time.

Why Not Design Our Own Tool?

- Local tools do not have validity data.
- Accurate referrals make sure children are not missed, but also that children's normal developmental variability is honored; we do not want to misidentify children.
- May not align with the Michigan *Early Childhood Standards of Quality for Prekindergarten*.

The Screening and Assessment Process

CHILDREN



Adapted from *Head Start Bulletin # 70*, 2001.