

CHILD ASSESSMENT

The assessment of young children presents many special challenges. Staff members need to be knowledgeable of children's growth and development. In addition, they need to be aware of the cultural and linguistic diversity among current children and their families. The main purposes for assessment should remain clear: to support learning and development for both individual children and classrooms of children, to identify children who may need additional services, and to aid in effectively communicating progress or concerns with parents. Child outcome data is aggregated for each classroom and program-wide to guide grantees in the continuous improvement of the program. It also informs goal setting, the ordering of program materials, and the planning of staff professional development.

The assessment of young children enrolled in the Great Start Readiness Program (GSRP) must provide information across all domains identified in the *Early Childhood Standards of Quality for Prekindergarten* (ECSQ-PK): social and emotional development, intellectual development, language and early literacy development, creative development, physical development, health; early learning in math, science, social studies; and use of technology.

The Committee on Developmental Outcomes and Assessments for Young Children (2008) affirms that assessments make crucial contributions to the improvement of children's well-being if they are well designed, implemented effectively, developed in the context of systematic planning, and are interpreted and used appropriately.

All GSRP grantees use both an approvable developmental screening tool as the child is enrolled and an ongoing authentic assessment tool throughout the school year.

Policies

Written policies help guarantee consistency over time in dealing with parents, children, staff and other agencies, and contribute to program credibility. A written policy on child assessment, including both developmental screening and ongoing assessment should be addressed in the program's handbook and written in a manner that is understandable to parents. It should include: when screening will take place, how the results will be shared with parents, and let them know that any recommendation for referral will require parental permission. It should also include information on how ongoing assessment is accomplished and how often progress will be reported throughout the year.

Including a confidentiality statement in the parent handbook that refers to the developmental screening process and handling of the results, may make it less worrisome for families and easier to obtain consent. Including information about developmental screening and referral procedures for a suspected developmental

delay or disorder will confirm all children are being treated equally and no child is singled out.

Procedures

Each program should set clear internal procedures for child assessment. Anyone involved in administering developmental screening or ongoing child assessment, or anyone involved in interpreting results should receive training in the chosen tools. Training should emphasize confidentiality and include reports, forms and documentation that teachers can expect to retain in classroom child files.

Staff should be trained in how information is elicited from families, how results are shared with families, along with strategies for communicating with parents who are illiterate or whose native language is not English. In the case of screening, staff should also have knowledge of the local referral protocol and “next steps”.

Decisions should be made as to the specific tools used for both types of assessment, personnel roles, and measures of accountability. Decisions are also made with area partners on the time frame for screenings; is the plan to accomplish this during a spring recruitment event? What is the plan for screening children who enter the program later in the year? Specifying a timeline for review of policies and procedures related to assessment will assure that they are updated as needed.

Developmental Screening

Developmental Screening is 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. Developmental screening is standardized and surveys abilities in broad terms: large and small muscle coordination, perception, language, cognitive development, and emotional and behavioral concerns. Definition Resource: [Council of Chief State School Officers, Early Childhood Education Assessment Consortium.](#)

Definition of developmental screening:

Developmental Screening Is	Developmental Screening is Not
A “snapshot” look at a child’s development, administered within the last six months, or as children are enrolled in GSRP.	An in-depth, exclusive profile of a child’s development.
Intended to identify the need for further assessment to verify delay in any developmental or health domain.	Used to diagnose special needs.
A data source that should be carefully administered to avoid mistaken judgments about children or the program.	Used to determine individual supports for a child’s development.
Part of a larger assessment system including ongoing child assessment, parent involvement, and program improvement.	A pre- and post-test for child development.
Implemented with adaptations or special attention to cultural and linguistic variability.	Used to rank, exclude, or label children.
Comprehensive across developmental domains and includes parental input.	Restricted to pre-academic domains such as language/literacy or mathematics.

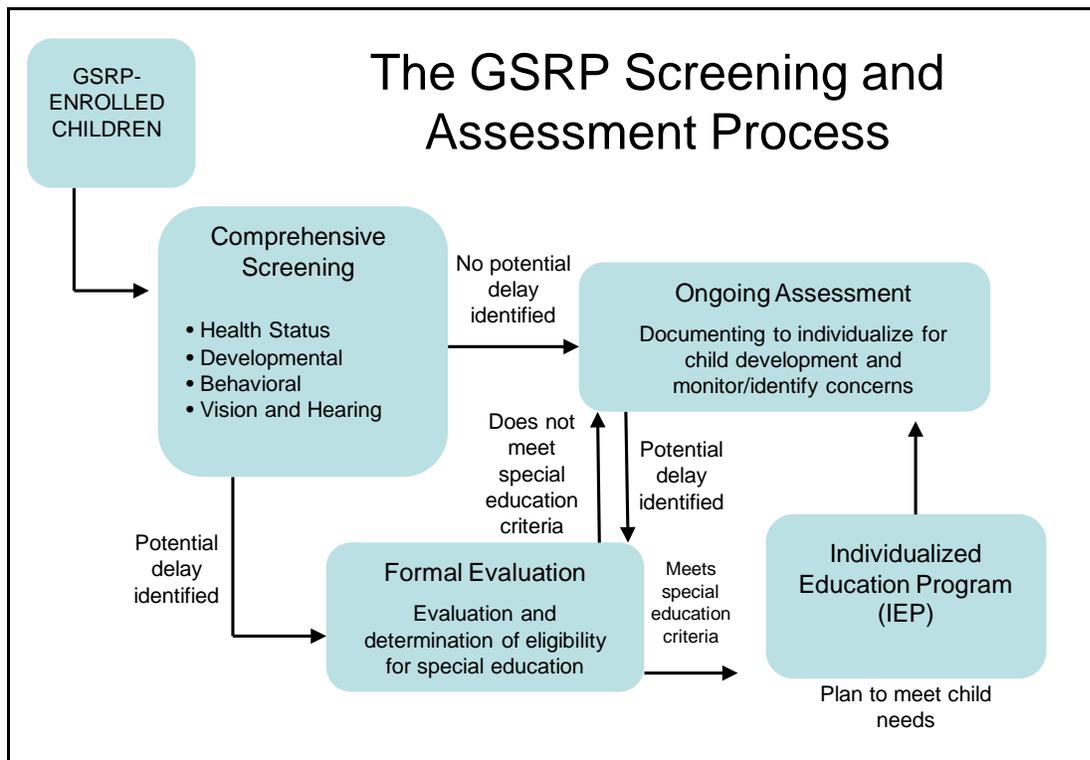
Connecting Screening to GSRP Recruitment:

Collaborative, Systematic, and Regional

A well-integrated “great start early childhood system” engages many community partners to screen very young children for hearing, vision, and developmental growth during regular health checkups. The local Great Start Collaborative (GSC) can provide leadership as staff, parents, and local content experts in health, child development, and mental health, design a collaborative developmental screening approach which is linked to common goals, defined by the GSC. The screening tool(s) selected address all aspects of child development and health, and are aligned with state standards. Provision is made to maintain a database of assessment results, provide for quality assurance and integrity of data, and prepare a variety of reports for audiences and purposes at the family, state and regional level. The National Early Childhood Accountability Task Force (2007) recommends local school districts/agencies support a high-quality early childhood system by creating opportunities for teachers and managers to initiate regional dialogue around child assessment, spanning preschool to grade 3, and related data on demographic trends and learning opportunities.

Screening as a Part of the Assessment System

When developmental screening has not occurred within the last six months, it should be implemented within two weeks of enrollment into the GSRP.



Parents as Partners

Screening has often been associated with a child’s entry into a preschool program, offering reassurance the child is “on track” for achieving typical developmental outcomes. For many families, screening provides the first indication that a disability or health condition may be affecting their child’s development.

Parents often describe their early experiences with assessment reports as confusing and intimidating. They may have had limited opportunities to state their concerns during well-child visits. They may be fearful of the findings or reluctant to share behavioral or mental health concerns. They may blame themselves if there is a concern.

Parents want and expect support on child development issues. Families can benefit when programs learn how to use the screening process as an opportunity to encourage participation in activities which strengthen communication skills, decision-making skills, and advocacy for their children.

Screening can be a foundational opportunity to build a respectful and reciprocal relationship between program staff and parents. On the first day, staff and parents meet, and should begin to discuss child development and assessment. Screening must not take place without obtaining consent from the parent. Parents should be informed that screening will be a quick survey of the child’s abilities in large and small muscle coordination, perception, language, cognitive development, emotional development, and behavior. They should also know their input is needed to help staff more fully understand the child and that information about the child’s

screening results will be shared as soon as possible. Staff should be prepared to listen for parents' "doorknob concerns," (i.e., "Oh, by the way...").

Sharing Screening Results with Parents

No matter what type of message is being delivered, the staff member meeting with the parent should be prepared, having knowledge of scores from the screening and the parents' input. The parent should have screening protocol or other relevant material available. The atmosphere is calm, quiet, and allows for confidentiality. The scores are explained, and information supplied by the parent is acknowledged. Parent concerns and questions are addressed in an unhurried manner.

Since the majority of children will not have developmental issues, most conferences to share screening results will be very brief, reassuring parents their child is developing well. Regardless of the screening results, discuss activities that can be done with the child to support continued growth and development, and encourage families to try some activities.

When there is a concern but data do not suggest there is a delay, explain the findings but specifically express your concerns. Avoid the "*Don't worry, he'll grow out of it*" approach. Assess risk factors and use discretion when deciding it is appropriate to discuss community resources or other services available. Address parental concerns, and IF UNSURE, REFER.

When data suggest a potential delay, remember it can be devastating for parents to discover there is a concern about their child's development. Reassure parents if a delay is suspected; a referral for follow-up evaluation is the first step in helping their child.

Let parents know you can help with a referral for further observation or evaluation which will help to answer questions about the child's development. Follow-up appointments could be scheduled before the parent/child leave(s) the premises.

Remember, participation is voluntary. If parents refuse services at one point, this does not mean they are refusing forever; follow up! If the family refuses to seek additional services, documentation of the referral should appear in the child's file. Include a statement with the date and time of the conference and the information discussed with the parent. Report parent(s) were not interested in seeking additional services at this time, and sign and date the document. Retain the document in the child's file.

If parents seem to need time to process what they heard, offer to phone them in a couple of days with the information. Share details (as you can) about the purpose of the follow-up evaluation, where and when the evaluation will take place, and the role the parent(s) will play.

Commonly Used Developmental Screening Tools

- [Ages and Stages Questionnaires \(ASQ\)](#)
- [Battelle Developmental Inventory Screener](#)
- [Brigance Early Childhood Screens III](#)
- [Developmental Indicators for the Assessment of Learning](#)
- [Early Screening Inventory-Revised \(ESI-R\)](#)

Ongoing Child Assessment

Ongoing Child Assessment is a process in which the teaching staff systematically observe and record information about the child's level of development and/or knowledge, skills, and attitudes; in order to make a determination about what has been learned, improve teaching, and support children's progress.

Programs must use one comprehensive, research validated tool for child assessment and implement authentic assessment across domains. Teaching teams need to be trained in the selected assessment tool.

Child assessment data is collected daily across the preschool routine. Anecdotal observations are written about what children are learning and doing (not responses to closed-ended questions or pull-out testing). Notes on child-initiated language and behaviors are more likely to demonstrate the highest level of functioning in a domain. High-quality observation records are the evidence for reliable and valid child progress data. It is important to create a plan for how observations will be recorded. What are anecdotes recorded on? Is a camera sometimes used? Are pieces of children's work collected with the child's words about them recorded on the back of each piece? Although a variety of systems could be effective, it is important to think through an approach of recording evidence so the program's choice can be practiced consistently and efficiently.

Observational assessments provide a mechanism for evaluating a wide range of knowledge and skills and show children's growth over time. Data are reviewed for individual children and aggregated at the classroom level to inform daily classroom practice.

Ongoing communication between parents and teaching staff should inform child assessment. Teaching staff share individual developmental profiles with parents by exchanging information to support children's learning and development at home and at school. This is done both formally through conferences and home visits, and informally during drop-off and pick-up times and other times parents are present utilizing notes, e-mail, etc.

Data are aggregated program-wide to provide information for program improvement. Results are shared with the local GSRP Advisory Committee, the school board or governing board of the grantee and the public. This process offers

data for accountability and grows program support. See the *Program Evaluation* section of this manual for additional information on continuous improvement efforts.

Supplemental Child Assessment

If review of ongoing child assessment data reveals that many children are presenting differently than expected in any developmental domain, a first course of action is always to ensure staff have focused professional development in the domain in question. The professional development should have strong connections to the ongoing child assessment tool and the comprehensive curriculum. The early childhood specialist should support staff as skills are strengthened, practiced, and subsequent data are collected on child development. If, after focused staff support, data show children are still not making expected developmental gains, some programs may choose to supplement their comprehensive child assessment tool with companion assessments to generate further information in a specific domain. Any additional assessment selected needs to meet the essential components of appropriate assessment as indicated below.

Essential Components of Appropriate Assessment

GSRP requires adherence to the following guidelines when selecting and utilizing an assessment method. A quality program:

- Uses sound developmental and learning theory to plan and conduct child assessment and looks beyond cognitive skills to assess the whole child.
- Uses a research-validated, reliable assessment tool and process that is ongoing, cumulative, and in the language a child understands.
- Uses children's involvement in ordinary classroom activities, not artificially contrived activities, to gauge children's growth.
- Documents children's growth, development, and learning over time with observation and anecdotal reports, parent, provider, and child interviews; products and samples of children's work; standardized checklists; and children's self-appraisals.
- Involves all members of the staff who have regular contact with the children.
- Arranges assessment so it does not bring added stress for children or teachers.
- Uses assessment results as a guide for curriculum and teaching decisions and the need for intervention for individuals and classrooms.
- Uses results to determine the need for specialized screening and/or intervention.

The above components reflect the 2003 Joint Position Statement of the National Association for the Education of Young Children (NAEYC) and the National Association of Early Childhood Specialists in State Departments of Education (NAECS/SDE) entitled, [*Early Childhood Curriculum, Assessment, and Program Evaluation*](#).

GSRP essential components also reflect the National Education Goals Panel, in their document entitled, [Principles and Recommendations for Early Childhood Assessments](#), February 1998.

Commonly Used Ongoing Child Assessment Tools

Teaching teams need to be provided professional development opportunities in the selected assessment tool. The following tools meet the essential components of appropriate assessment and have demonstrated alignment with the *Early Learning Expectations for Three- And Four-Year-Old Children* in the ECSQ-PK.

Assessment, Evaluation, and Programming System

[Assessment, Evaluation, and Programming System \(AEPS\) for Infants and Children, Second Edition](#)

Introduction:

Age range: birth to 6 years. AEPS test results may now be used as second cutoff scores that can corroborate findings from standardized developmental measures. Step-by-step instructions for using the cutoff scores and related technical data are provided. AEPS meets the federal Office of Special Education Programs (OSEP) child outcomes reporting requirements. Online version also available.

Domains:

Fine motor
Gross motor
Cognitive
Adaptive
Social-communication
Social

Print Components:

Administration Guide
Test for Birth to Three Years and Three to Six Years
Curriculum for Birth to Three Years
Curriculum for Three to Six Years
Child Observation Data Recording Form
Child Progress Record/Family Report
AEPS® Forms CD-ROM

[COR Advantage](#)

Introduction:

The HighScope Child Observation Record (COR), COR Advantage, is an observation assessment tool designed for use with children aged 2 years 6 months to 6 years in early childhood settings, including preschools, child care, and Head Start programs. COR Advantage charts children's development and progress over time. Teachers collect information about each child throughout the school year in many different areas. It is not necessary to have implemented the HighScope educational approach in order to use this assessment. COR Advantage meets the federal OSEP child outcomes reporting requirements. COR Advantage is available through an online subscription plan. Print version is also available; components can be purchased individually or as a kit to accommodate one year's use with twenty-four children. Spanish materials are also available.

Domains:

Approaches to Learning
Social and Emotional Development
Physical Development & Health
Language, Literacy, & Communication
Mathematics
Creative Arts
Science and Technology
Social Studies
English Language Learners (Optional)

Print Components:

User Guide
Scoring Guides
Desk References
Child Anecdote Booklets
Family Booklets (in both English and Spanish)
Child Summary and Class Summary Forms

[Teaching Strategies GOLD](#)

Introduction:

Teaching Strategies has developed Teaching Strategies GOLD, a new assessment system for children from birth through Kindergarten. It focuses on 36 basic objectives and two additional objectives related to English language acquisition. It is web or print-based and can be used with any developmentally appropriate curriculum.

Domains:

Socio-Emotional Development
Cognitive Development
Oral Language
Physical Development
Literacy
Mathematics
Science and Technology
Social Studies
The Arts
English Language Acquisition

Print Components (in English and Spanish):

Objectives for Development & Learning
Child Assessment Portfolio
Child Assessment Portfolio Summary Form
On-the-Spot Observation Recording Tool
Assessment Opportunity Cards
Family Conference Forms
Classroom Objectives Poster

[The Work Sampling System](#)

Introduction:

Work Sampling is a researched curriculum-embedded assessment to help teachers document and evaluate children's skills, knowledge, and behaviors by using actual classroom-based experiences, activities, and products. The results inform and improve instruction while fitting into the existing curriculum. The Work Sampling System is based on seven categories, or domains, of classroom learning and experience. The System is also available online.

Domains:

Personal and Social Development
Language and Literacy
Mathematical Thinking
Scientific Thinking
The Arts
Physical Development and Health

Print Components (some available in Spanish):

Developmental Guidelines and Checklists
Portfolios
Summary Reports

Resources:

Council of Chief State School Officers (CCSSO). 2006. [*Assessing Students with Disabilities: A Glossary of Assessment Terms in Everyday Language*](#). Authored by the policy to Practice Study Group of the Assessing Special Education Students (ASES) State Collaborative on Assessment and Student Standards SCASS. This work builds upon earlier work by the Early Childhood Education Assessment SCASS of the CCSSO and includes a glossary of terms and acronyms.

[Head Start Resources](#)

National Association for the Education of Young Children and the National Association of Early Childhood Specialists in State Departments of Education, 2003. [*Early Childhood Curriculum, Assessment, and Program Evaluation*](#).

[Principles and Recommendations for Early Childhood Assessments, February 1998.](#)

Snow, C., VanHemel, S, eds., 2008. [*Early Childhood Assessment: Why, What and How?*](#) A report of the Committee on Developmental Outcomes and Assessments for Young Children for the National Research Council of the National Academies. National Academies Press. Washington, D.C.

[*Taking Stock: Assessing and Improving Early Childhood Learning and Program Quality, 2007.*](#) A report from The National Early Childhood Accountability Task Force, commissioned by the PEW Charitable Trust, Foundation for Child Development and the Joyce Foundation.