

ABCD II PREVENTION AND IDENTIFICATION WORK GROUP REPORT JUNE 14, 2004

Minimum Standards for Identification of Developmental, Social-Emotional, and Behavioral Problems in Children Birth – Three Years

NOTE: As we develop this document, keep in mind that the standards will need to address Kay Johnson's "Three Es"—Which children are eligible, which services are eligible, and which providers are eligible to deliver the service.

Overview of Three-Level Identification System

LEVEL I SCREENING: Periodic reviews of a child's development as an integrated part of a well-child examination to include a review of developmental milestones, behavior, family risk factors, and parent concerns.

Eligible children: All children birth – 3 years who are receiving Medicaid

LEVEL II SCREENING: A standardized procedure to identify children and families at risk for more definitive diagnosis or follow-up.

Eligible Children: Children birth –3 years on Medicaid who in the opinion of the health practitioner need additional developmental, social-emotional, or behavioral screening.

LEVEL III ASSESSMENT: A systematic, comprehensive assessment including standardized measures of the child and family's functioning in order to develop information for diagnosis and treatment.

Eligible Children: Children birth – 3 years who receive Medicaid and who are suspected of having a developmental, behavioral, or social-emotional problem that requires comprehensive assessment.

LEVEL I SCREENING: Periodic reviews of a child’s development as an integrated part of a well-child examination to include a review of developmental milestones, behavior, family risk factors, and parent concerns.

Eligible children: All children birth – 3 years who are receiving Medicaid

Developmental Screening

1. Iowa Health Maintenance Clinical Notes (HMCN)—To be completed at each well-child visit by health professionals including physicians, nurse practitioners, or PAs. May also be completed by nurse and reviewed by the physician, nurse practitioner, or PA.

OR

2. A parent completed developmental questionnaire to be administered at least 3 times by age 4 years by a paraprofessional and reviewed by a health practitioner such as a physician, nurse practitioner, or PA. Recommended tools include:
 - a. PEDS—0-8 years
 - b. Ages and Stages—2 months-5 years
 - c. Development Inventories—3 months-6 years

Social-Emotional and Behavioral Screening

1. Iowa Health Maintenance Clinical Notes—To be completed at each well-child visit by health professionals including physicians, nurse practitioners, or PAs. May also be completed by nurse and reviewed by the physician, nurse practitioner, or PA.

OR

2. A screening questionnaire to be administered at intervals yet to be determined by a health practitioner. Recommended tools include:
 - a. Ages and Stages - Social-Emotional
 - b. Brief Infant-Toddler Social and Emotional Assessment (Carter, 2000)
 - c. Eyberg Child Behavior Inventory (ECBI) (Eyberg, 1992)
 - d. Infant Development Inventory/Child Development Review (Ireton, 1994)
 - e. Temperament and Atypical Behavior Scale - Screener

Screening for Parenting Stress and Family Risk Factors

1. Iowa Health Maintenance Clinical Notes—To be completed at each well-child visit along with administration of the Pediatric Intake Form (PIF) from *Bright Futures* at the initial visit. A shorter version of the PIF would be repeated annually.

OR

2. Use of alternative forms (yet to be determined) that cover similar information on a similar schedule of administration.

LEVEL II SCREENING: A standardized procedure to identify children and families at risk for more definitive diagnosis or follow-up.

Eligible Children: Children birth –3 years on Medicaid who in the opinion of the health practitioner need additional developmental, social-emotional, or behavioral screening.

Developmental Screening

Screening to be provided by a health professional. Recommended tools include:

1. Ages and Stages (review with child and family)
2. Early Language Milestone Scale (0-36 months – speech/language only)
3. Brigance Diagnostic Inventory of Early Development (21 mo – 7.5 yr)
4. Bayley Infant Neurodevelopmental Screen (3-24 mo.)
5. Denver II (0-72 mo.)

PDD/Autism Screening

Screening to be provided by a health professional. Recommended tools include:

1. M-CHAT (sens 87%, spec 97% - need reference)
2. PDDST –II Stage 1, (sens, 89%, spec 84%)

If an autism screen is positive or if there is a high degree of suspicion, refer the child for diagnostic assessment. Refer all children with speech delay for audiological evaluation.

Social-Emotional and Behavioral Screening

Screening is to be provided by a health professional. Recommended tools include:

1. Ages and Stages - Social-Emotional
2. Brief Infant-Toddler Social and Emotional Assessment (Carter, 2000)
3. Eyberg Child Behavior Inventory (ECBI) (Eyberg, 1992)
4. Infant Development Inventory/Child Development Review (Ireton, 1994)
5. Temperament and Atypical Behavior Scale – Screener

Parenting Stress/Family Risk Factors

Screening is to be provided by a health professional. Recommended tools include:

1. Edinburgh Postnatal Depression Scale - EPDS (Cox, Holden, & Sagovsky, 1987)
2. Parenting Stress Index Short Form (Abidin, 1995).
3. *Question: Do we want to recommend screeners for parental psychopathology (e.g., a parent depression scale for use after the first few months following the child's birth)?*

LEVEL III ASSESSMENT: A systematic, comprehensive assessment including standardized measures of the child and family's functioning in order to develop information for diagnosis and treatment.

Eligible Children: Children birth – 3 years who receive Medicaid and who are suspected of having a developmental, behavioral, or social-emotional problem that requires comprehensive assessment.

Developmental Assessment

A complete evaluation of development usually conducted by more than one health professional. There are many commonly used tests. Examples include:

1. Bayley -II
2. WPPSI-III
3. Vineland Adaptive Behavior Scales
4. Preschool Language Scale (by speech therapist)
5. Peabody Developmental Motor Scales, 2nd Ed. (OT/PT)
6. Medical determination if neurological/genetic/orthopaedic/medical testing is indicated

PDD/Autism Assessment

Diagnostic evaluation by experienced clinicians. Audiological evaluation to be included. Medical determination if laboratory testing is indicated.

Question: What evaluations should we recommend routinely?

Social-Emotional and Behavioral Problems Assessment

Screening is to be provided by a _____. Recommended tools include:

1. Bayley Scales of Infant Development II - Behavior Scales (Bayley, 1993)
2. Vineland Social-Emotional Early Childhood Scales (Sparrow, Balla, & Cicchetti, 1998)
3. Disturbances of Attachment Interview (Smyke & Zeanah, 1999)
4. Infant-Toddler Social and Emotional Assessment (Carter & Briggs-Gowan, 1993)
5. Child Behavior Checklist for Ages 1 ½ - 5 (CBCL) (Achenbach & Rescorla, 2000)
6. Temperament and Atypical Behavior Scale Full Assessment (Neisworth et al., 1999)

Parenting Stress and Family Assessment

Screening is to be provided by a _____. Recommended tools include:

1. Parenting Stress Index (Abidin, 1995)

Question: How much detail do we want to list for Level III since our focus is on "screening"?

References:

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Cox, J., Holden, J., & Sagovsky, R. (1987), *British Journal of Psychiatry*, 150, 782-786.

Eyberg, S. (1992). Parent and teacher behavior inventories for the assessment of conduct problem behaviors in children. In L. VandeCreek, S. Knapp, & T. L. Jackson (Eds.), *Innovations in clinical practice: A source book* (vol. 11). Sarasota, FL: Professional Resource Press.

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Robins, D., Fein, D., Barton, M., & Green, J. (2001). The Modified Checklist for Autism in Toddlers: An Initial study investigating the early detection of autism and pervasive developmental disorders. *Journal of Autism and Developmental Disorders*, 31(2), 131-144.

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