

## Screening for Developmental Delay in Primary Care



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We Can't Wait 2021

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## Learning Objectives

Understand	Understand the importance of standardized screening for developmental delay in the general population as well as special populations
Understand	Understand the link between development and mental health
Explore	Explore ways to support family readiness around screening results and referrals
Learn about	Learn about community resources, including how to make referrals

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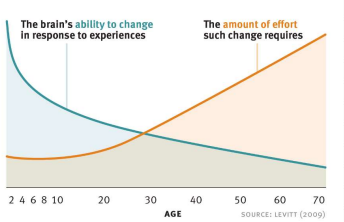
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## Brain Development in Children

80% of a child's brain is fully grown by age 3  
(90% by age 5)



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Hospital  
Columbus, Ohio

Center on the Developing Child • HARVARD UNIVERSITY  
[www.developingchild.harvard.edu](http://www.developingchild.harvard.edu)

SOURCE: LEVITT (2009)

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Dr Jack Shonkoff

“The most important time is now”



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Development and Behavior



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Rate of Developmental Delay



Recent estimates in the United States show that about **one in six** children aged 3 through 17 years has one or more developmental delay.

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Everything starts with Primary Care

**WHOLE CHILD CARE**

MIND HEALTH, EMOTIONAL WELL BEING AND SOCIAL INTEGRATION

PHYSICAL HEALTH AND OPTIMAL FUNCTIONING

**FAMILY / CAREGIVER**

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### Pediatric Setting

- ACCESS** Almost all families take their babies to see a pediatric primary care provider
- TRUST** Parents trust their pediatric primary care provider
- ACCEPTED** The pediatric office is a non-stigmatizing setting
- FREQUENT** New parents attend 12-13 well-child visits within the first 3 years of life; half occur in the first year

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## How to Identify Children at Risk?

Believe in your observation

Get your history

Never underestimate parent concern

Provide routine developmental surveillance

Use standardized tools

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## AAP Screening Guidelines

- Developmental surveillance at every well-child visit
- Standardized screening at 9, 18, and 30 months
- Autism screening at 18 and 24 months
- Whenever a concern is expressed!
- Whenever a concern is observed!

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## Why is Standardized Screening Important?






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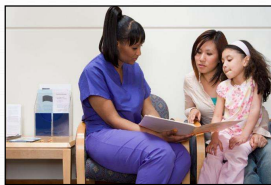
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## General Development Screening Tools



- General Development
  - Ages and Stages Questionnaire-3 (ASQ-3),
  - Survey of Well-Being of Young Children (SWYC)
  - PEDS: Developmental Milestones (PEDS:DM)



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## Autism Screening Tools

- CSBS: Communication & Symbolic Behavior Scales (1-6 yrs)
- M-CHAT-R: Modified Checklist for Autism in Toddlers (1-2.5 yrs) with Follow up
- SCQ: Social Communication Questionnaire, Lifetime (4 yrs+)



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## Socio-emotional Screening Tools

- ASQ-SE: Ages and Stages Questionnaire: Socio-Emotional
- CBCL: Child Behavior Checklist
- PSC-17: Pediatric Symptom Checklist



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## Limits of Screening Tools



- Many are parent report
- Won't catch all the at-risk or delayed children
- Various other circumstances may affect the results

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## Special Populations: Chronic Disease

Children with chronic illness have a 20-35% increased risk of having developmental vulnerabilities (delays) at kindergarten entry




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## Special Populations: Child Welfare Services



30-50% rate of delay

In SD County, the Developmental Screening and Enhancement Program (DSEP) provides universal screening and care coordination



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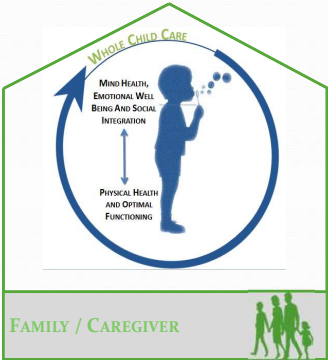
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## Everything starts with Primary Care





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## Family Readiness: What You May See and Hear



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## 3 Break-out Groups

Think of a time when you were working with a family and identified a developmental or social-emotional concern and need. Parent was not ready for acceptance of this concern, nor would they entertain a referral.

- What are the risks?
- How did you handle?
- How might you address this going forward?

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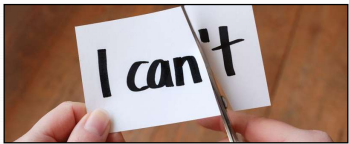

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## Support Readiness: Motivational Interviewing

- Basic Skills- OARS
  - Open-ended questions
  - Affirmations
  - Reflections
  - Summarizing

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## Reason for Early Intervention

- Early experiences have a powerful influence on the development of:
  - Cognitive and social skills
  - Brain architecture
- Skill development and brain maturation are hierarchical processes in which higher level functions depend on, and build on, lower-level functions
- Capacity for change in neural circuitry is highest earlier in life and decreases over time

\*Thanks to Zero to Three

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## Early Intervention: Public and Private

Under Part C of IDEA, children 0-3 are entitled to infant programs and developmental therapies

- Lowest cost to parents and highest yield
- CA Early Start (part of Regional Centers) for at-risk children
- Health Plans (medical necessity)

Under Part B of IDEA, children 3+ may qualify for services from schools

- Health Plans must cover if school offerings do not fully meet the need (parents may incur more costs)

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## Resources: San Diego County

- Screening and Referral
- Comprehensive Evaluations
- Treatment
  - Healthy Development Services
  - Therapy under health plan

Severity	Age	Program
Mild to Moderate	0-5	Healthy Development Services
Moderate to Significant	Under 3	California Early Start (or part C under IDEA in your state) Private therapy- Health Plans
Moderate to Severe	3+	Local School District
Severe (5 categories)	3+	Regional Center/Dept of Developmental Disability

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## Resources: Riverside County

- Screening and Referral
  - Help Me Grow Inland Empire - [helpmegrowie.org](http://helpmegrowie.org)
  - HealthySteps: CPCMGMurrieta & Temecula Pkwy
- Comprehensive Evaluations (DEC and ADI)
- Treatment

Severity	Age	Program
Mild to Significant	Under 3	California Early Start Private therapy- Health Plans
Moderate to Severe	3+	Local School District
Severe (5 categories)	3+	Inland Regional Center

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## In Summary

- Standardized developmental screening is critical
- Children with chronic disease cannot wait
- Early intervention has the greatest yield
- Parents need help and time getting started
- Resources are available



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## Questions



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