

## Child Developmental and Social-Emotional Screenings

### Procedure/Approach

Timely and ongoing screenings are critical for children between the ages of 0-5. The developmental and social emotional guidance that is established during these early years lays out the foundation for lifelong healthy development and school success. Screenings provide a wonderful opportunity during the Initial Home visit to get to know the child's developmental and social emotional growth and begin an important relationship with the parent on how to foster their child's development. With signed parent permission, Southern Oregon Head Start (SOHS) children receive a developmental and social-emotional screening within 45 days of their initial class start date or for home-base upon their first home visit. For children ages 3 and over, an Articulation Screening is also completed. Additional screenings may be completed on an individualized basis as needs and concerns arise. A screening or screenings may indicate the need for a referral for further evaluation where the child may qualify for special education services and/or mental health therapy. SOHS staff will ensure that any needed referrals will be submitted in a timely manner with parent consent.

#### Head Start Program Performance Standards:

- 1302.33-Child Screenings and Assessments
- 1302.41-Collaboration and Communication with Parents
- 1302.42(d)(1)(2)-Child Health Status and Care
- 1302.53(a)(1)-1302.53(a)(2)(ii)-Community Partnerships and Coordination with other Early Childhood and Education Programs
- 1302.60-1302.62-Additional Services for Children with Disabilities
- 1302.45(a)(3)(4)(5)-Supports for Mental Health and Well-Being

### Procedure:

#### Developmental Screening/Ages and Stages Questionnaire-3 (ASQ-3)

1. The ASQ-3 is administered during the initial home visit in partnership with the parent. Children on an Individual Family Service Plan (IFSP) are **not** exempt from this screening. The intent is that as many items as possible on the ASQ-3 are directly observed by the staff and parent. Self-report on items may be used in special circumstances such as when the child's illness prevents direct observation within the 45-day timeline for completion. In that event, self-report

may be used and a second administered ASQ-3 may be needed if concerns arise from observation.

2. When administering the ASQ-3 the Teacher or Home Visitor must ensure that the correct screening according to the child's age is chosen and if the child's primary language is Spanish, the screening should be conducted with the child in Spanish.
3. Once completed, the results are documented on the ASQ Green Summary form by the Teacher or Home Visitor and the center's Area Assistant data enters the results and attaches both the ASQ-3 and the Green Summary form into the data system in the child's electronic file in the ASQ-3 section of the Education tab.
4. Teachers or Home Visitors who have concerns regarding the screening results may rescreen the child within 45 days or recommend to the parent a referral for further evaluation with an Early Intervention Early Childhood Special Education (EI/ECSE) agency.
5. If a rescreen is needed this will be indicated on the ASQ Green Summary form and the center's Area Assistant will enter a rescreen is needed into the data system and set a due date within 45 days of the initial screening.
6. If a referral to EI/ECSE is warranted this will be indicated on the ASQ Green Summary form and the Area Assistant will enter it into the data system and create a Developmental Screening Internal Referral in the Disabilities and Mental Health tab. The Teacher or Home Visitor will follow the [Early Intervention and Early Childhood Special Education Referrals procedure](#).
7. Teachers and Home Visitors will set individualized goals and plan for activities to support those goals based on the ASQ-3 outcomes.
8. If a child is currently receiving EI/ECSE services, the Teacher or Home Visitor will note the IFSP on the green summary form.

### Articulation Screening

1. During the Initial Home Visit along with the ASQ-3 a speech Articulation Screening will be completed for children ages 3 and above. \*Including children on an IFSP.
2. Once completed, the results are documented on the ASQ Green Summary form by the Teacher or Home Visitor and the center's Area Assistant attaches the Articulation Screening into the data system in the child's electronic file in the ASQ-3 section where the ASQ-3 and ASQ Green Summary are also attached in the Education tab.

3. Errors on the Articulation Screening might indicate a possible need for a referral to an EI/ECSE agency, see [Early Intervention and Early Childhood Special Education Referrals procedure](#).

### **Social-Emotional Screening, Ages and Stages Questionnaire-Social Emotional (ASQ-SE)**

1. The ASQ-SE is completed with the parent during the Initial Home Visit, within 45 days from the class start date or first home visit for home based. This screening is all self-reported, with the Teacher or Home Visitor asking questions to the parent about their child.
2. Once completed, the results are documented on the ASQ Green Summary form by the Teacher or Home Visitor and the center's Area Assistant enters the results and attaches the screening in the data system in the child's electronic file in the ASQ-SE section of the Education tab.
3. If the screening score is above the cutoff score the center's Area Assistant will create a Social-Emotional Screening Internal Referral in the child's data system file in the Disabilities and Mental Health tab. When a child is exhibiting concerns in the classroom the Behavior and Disabilities Supervisor or Education Coach will review the child's ASQ-SE prior to their first classroom observation. If a child is not exhibiting any concerns in the classroom, the Family Advocate will enter an update note to the Internal Referral stating that there are no concerns at this time. See Mental Health Referral Procedure.
4. The Disabilities and Mental Health Service Area Assistant (Dis-MH SAA) will review all Internal Referrals that have been entered due to elevated ASQ-SE scores, and follow up when necessary with staff. When proper documentation for the Internal Referral has been entered, the Dis-MH SAA will mark the Internal Referral as resolved.
5. When a child needs an EI/ECSE referral that includes social-emotional concerns the ASQ-SE screening will be submitted along with the ASQ-3 to the EI/ECSE agency in accordance with the Early Intervention and Early Childhood Special Education Referrals procedure.
6. Teachers and Home Visitors will set individualized child goals and plan activities based on ASQ-SE outcomes.

## Who needs an ASQ-3, an ASQ-SE and/or Articulation Screening

New children entering EHS	ASQ-3 & ASQ-SE	
New children entering HS	ASQ-3 & ASQ-SE	Artic Screening (3 years and above)
Children Transitioning from EHS to HS	ASQ-3 & ASQ-SE	Artic Screening (3 years and above)

**The ASQ-3 and Articulation Screening Must Be Completed in the Child's Primary Language** (EI/ECSE referrals can only be received in the child's primary language)

## ASQ-3, ASQ-SE and Articulation Screenings are to be completed during the Initial Home Visit

All screenings will be completed on paper forms using the appropriate interval dependent on the child's age with adjusting for children who were born premature. The online ASQ calculator can be used to ensure the correct form is being administered. If an ASQ-3 or Articulation Screening is not completed during the initial home visit it can be completed with the child during class time where results are to be reviewed and discussed with the parent. See [Initial Home Visits 0-5](#) for guidance on what to prepare prior to visit.

## Scoring and Documentation following Screenings

- Finish ASQ-3, Articulation screening and ASQ-SE, if not completed during the Initial Home Visit
  - For the ASQ-3 score each area and fill in the scores to each area on the ASQ-3 summary page

### 1. SCORING RESULTS:

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	27.06	30.00							★						
Gross Motor	36.27	55.00												★	
Fine Motor	19.82	20.00					★								
Problem Solving	28.11	35.00								★					
Personal-Social	31.12	55.00												★	

- For the ASQ-SE score each page and add the totals on the ASQ-SE summary page

- For the Articulation screening count the number of articulation errors and indicate the number of errors where indicated on the Articulation form.
- Complete the ASQ Green Summary form.
  - At the top middle enter the screening month representing the interval (for example, 8, 12, 24, 36, 54, etc..)

ASQ-3 Age:	ASQ-SE Age:
Screening Month Interval:	Screening Month Interval:
_____	_____

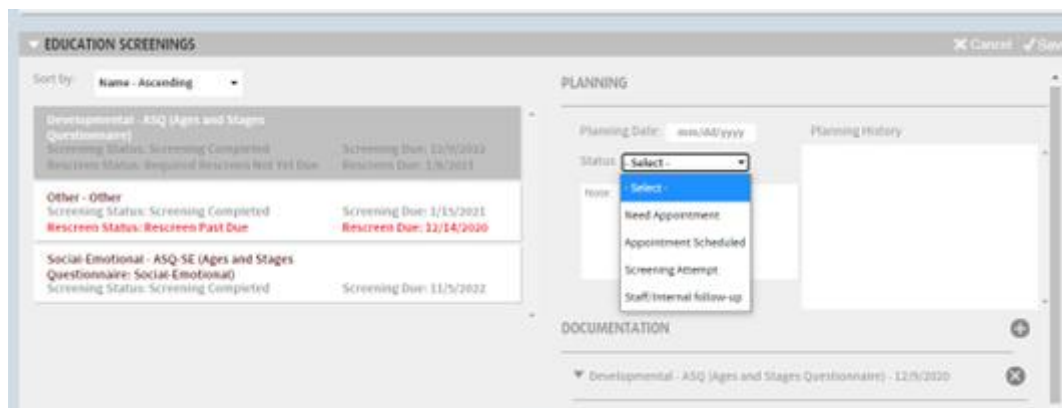
- Transfer scores from the ASQ-3, Articulation and ASQ-SE to the form.
- Areas of concern on the ASQ-3 should be marked rescreen or refer where all areas of concern either need to be marked as a rescreen or all areas of concern marked as a refer. There is not a situation where we would rescreen in some areas but go ahead and refer in others, it's either all will be a rescreen or all will be a refer.
- Complete the top right corner "Teacher Use" so that your AA knows the correct results to enter into SHINE. AAs have been instructed to return any ASQ Summary forms to you if this has not been completed.

Teacher Use:	
ASQ-3	ASQ-SE
<input type="checkbox"/> Exempt	<input type="checkbox"/> Pass
<input type="checkbox"/> Pass	<input type="checkbox"/> Refer Dis/MH
<input type="checkbox"/> Rescreen	
<input type="checkbox"/> Refer Dis/MH	
Rescreen Due Date:	
_____	
Area Assistant Use:	
Data Entry/ Attachment Date: _____	
Copy Gr. Summary sent to Dis/MH Department: _____	

- Give your completed ASQ Summary form and all screenings to your AA as soon as possible. The AA will enter screening results into SHINE immediately to ensure compliance.

**The ASQ-3 and ASQ-SE are due within 45 days from the child's first day of class or for children receiving Home Based services, within 45 days from the child's first home visit.**

**A Detailed Planning Note must be entered if the 45-day deadline was not met.** In SHINE in the Education Tab where our ASQ screenings are documented, just above “Documentation”, enter in a note in the “Planning” section. This should only take place in extreme circumstances with approval.



The screenshot shows the 'EDUCATION SCREENINGS' window in the SHINE system. On the left, there is a list of screenings with columns for 'Screening Status' and 'Screening Due'. The first entry is 'Developmental - ASQ (Ages and Stages Questionnaire)' with a status of 'Screening Completed' and a due date of '12/6/2022'. The second entry is 'Other - Other' with a status of 'Screening Completed' and a due date of '1/15/2023'. The third entry is 'Social-Emotional - ASQ-SE (Ages and Stages Questionnaire: Social-Emotional)' with a status of 'Screening Completed' and a due date of '11/9/2022'. On the right, the 'PLANNING' section is active, showing a 'Planning Date' field, a 'Status' dropdown menu (currently set to 'Select'), and a 'Planning History' field. Below the planning section is the 'DOCUMENTATION' section, which shows a list of screenings with a 'Developmental - ASQ (Ages and Stages Questionnaire)' entry dated '12/6/2022'.

### ASQ-3 Rescreen Criteria and Rescreening Process

ASQ-3s done by parent report in full or in part need to be reviewed for accuracy once the child starts class. Concerns that arise may indicate a need for a rescreen or a referral to EI/ECSE.

**When a child has scored in the black and or/grey in 2 or more areas (except communication/articulation) and you suspect this could be due to just a lack of exposure to concepts and/or practice, this is when you will want to conduct a rescreen before considering a referral. Ensure you provide the child with adequate learning and practice in these areas where you’d then expect to see some growth when you complete the rescreen.**

A pass on an ASQ-3 screening is not intended to reflect that the child passed in every area it means that the child does not need a rescreen or a referral. Rescreens are only needed if there is a concern that the child may need to be referred to EI/ECSE for further evaluation, as continued monitoring can be completed through SmartTeach observation and checkpoints. Children who only score low in one area, so long as it is not the area of communication and/or articulation, do not need a rescreen in that one area as we cannot refer a child for that one area.

Communication is the only sole area to which a child can receive EI/ECSE services and a referral can be based on articulation errors alone. If a child does not qualify in the area of communication and/or articulation, he/she must be at 7% or below in 2 of the other areas in order to qualify.

### 1. SCORING RESULTS:

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	27.06	30.00							★						
Gross Motor	36.27	55.00												★	
Fine Motor	19.82	20.00					★								
Problem Solving	28.11	35.00								★					
Personal-Social	31.12	55.00												★	

**Black area Communication:** Referral is needed and any additional areas in Black will be added to the referral and/or any additional areas in the Grey have potential to be added to the referral.

**Grey area Communication:** Possibly referral, if the child is difficult to understand and/or has articulation errors that meet the referral criteria according to the form, then a referral is needed. If child is Black in any additional areas, we will add that to the referral and/or if the child is Grey in any additional areas there is a potential it will be added to the referral.

**White area Communication:** If the child scores in the Black in at least two other areas consider if it might be just due to a lack of exposure and/or practice and if so, do a rescreen. If you are observing in the classroom considerable concerns, submit a referral.

**Social Emotional/Behavior** concerns are to be factored in as an additional area and an accurate ASQ-SE, based on the classroom and home, will be needed for the EI/ECSE referral. The age of the child at the time of the referral needs to align with the ASQ-SE interval we submit with the referral.

### Considerations:

- Besides lack of exposure and/or practice, children may score low in one or more areas simply because they did not participate or they partially participated but were distracted. There must be observable data as well as data that is accurate to the best of knowledge of the screener, in order to proceed with a referral. **You may need to get creative in order to observe a child's current developmental level in certain areas of the ASQ-3 if they refuse to participate when conducting the ASQ-3 screening in the typical manner. If a child is able to perform a similar or related skill from that of the ASQ-3, you can assume they are able to perform the one on the ASQ-3.**



- An ASQ-3 screening should reflect the child's consistently displayed level of development, and not just how they performed during the time of the screening itself.

When an ASQ Summary form has been marked that a Rescreen is needed, your AA will enter a due date of one month from the initial screening date. Rescreens need to be completed no later than 2 months from the date of the initial screening.

A new ASQ Summary form is to be used for each rescreen and procedures for data entry by the area assistant are the same as for the initial screening with the exception that the new screening will be marked as a rescreen.

### **ASQ-SE Rescreens**

The only time that a child needs an ASQ-SE rescreen is when a referral to either EI/ECSE or a Mental Health agency needs to be made, and the current ASQ-SE is not accurate and/or the past screening age interval no longer represents the child's current age. The screening results should reflect the concerns that are present both at school and at home.

**Teachers and Home Visitors are to contact the Behavior and Disabilities Supervisor or Dis./MH SAA with any questions regarding determining if a rescreen or a referral is needed.**

The Behavior and Disabilities Supervisor and Disabilities and Mental Health Service Area Assistant (Dis./MH SAA) will review all ASQ Green Summary forms to monitoring screening results that the Teacher and Home Visitor has indicated. When errors regarding the results have been identified the Teacher and Home Visitor will be contacted with next steps and the documentation in the child's electronic file (SHINE) will be corrected. This monitoring ensures that children do not get missed when they are in need of a rescreen or an EI/ECSE referral.