



## **Selected Developmental Screening Tools: A Resource for Early Educators**

2015

## Contents

<b>Introduction</b> .....	<b>1</b>
<b>Summary Table</b> .....	<b>3</b>
<b>Profiles of Developmental Screeners</b> .....	
<i>Ages and Stages Questionnaire—3rd Edition</i> .....	7
<i>Ages and Stages Questionnaire—Social-Emotional, 2nd Edition</i> .....	12
<i>Battelle Developmental Inventory Screening Test—2nd Edition</i> .....	16
<i>Bayley III Screening Test</i> .....	21
<i>Brigance Screens III</i> .....	25
<i>Developmental Assessment of Young Children—2nd Edition</i> .....	29
<i>Developmental Indicators for the Assessment of Early Learning—4th Edition</i> .....	33
<i>Early Screening Inventory—Revised</i> .....	37
<i>Early Screening Profiles</i> .....	42
<i>FirstSTEp Screening Test for Evaluating Preschoolers</i> .....	46
<i>Learning Accomplishment Profile—Diagnostic Screens</i> .....	50
<i>Parents’ Evaluation of Developmental Status Tools</i> .....	55
<b>About the Author</b> .....	<b>58</b>

Note: This paper was created through Early Educator Central, a web portal federally administered by the U.S. Department of Health and Human Services, Office of Child Care and Office of Head Start, in response to the need for relevant resources to enhance infant-toddler content and coursework. ICF served as the contractor under Contract #HHSP23320095636WC\_HHSP2337034T with the Department of Health and Human Services. The views expressed in the document are those of the author and ICF. No official endorsement by the U.S. Department of Health and Human Services is intended or should be inferred.



## Introduction

Children are varied in their physical, social-emotional, language and communication, and cognitive skills, as well as in their approaches to learning. Some children may not clearly fit within the range of typical developmental patterns. Instead, they develop more slowly or develop differently from their peers in both obvious and subtle ways. Developmental screeners are used to determine if sensory, behavioral, and/or developmental skills are progressing as expected, or if there are causes for concern. Screeners are different from early childhood formative assessments, which are designed to inform classroom instruction decisions. The purpose of early childhood developmental screening is to quickly and efficiently determine whether a child should receive a more thorough, comprehensive evaluation to identify potential difficulties that might necessitate interventions or special education services.<sup>1</sup>

Early educators should be aware of several important considerations regarding developmental screenings:

- Screenings are designed to be brief (30 minutes or less).
- Screenings cannot capture the full range of development, skill, or capacity among children. Screenings are designed to identify risk or potential developmental issues. This means that they tend to focus on distinguishing developmental skills and abilities in the lower range of performance and are not useful for capturing skills and abilities in the higher range of performance.
- Screening only indicates the possible presence of developmental delay or difference and cannot definitively identify or describe the nature or extent of a disability.
- Screening must be followed by a more comprehensive and formal evaluation in order to confirm or disconfirm any red flags raised by the screening process.

The developmental screeners profiled on Early Educator Central were selected because they meet the following criteria:

- The tool was designed for the purpose of screening (not child assessment).
- The screening tool is appropriate for use with children from birth to age five.
- The screening tool covers multiple developmental domains (i.e. physical/motor, cognitive, linguistic, social-emotional).
- The screening tool is available for use by early childhood practitioners (e.g., early education teachers, child care providers, primary care practitioners, home visitors, early intervention providers, etc.).
- The screening tools were included in a previously federally-funded compendium.

[http://www.acf.hhs.gov/sites/default/files/opre/compendium\\_2013\\_508\\_compliant\\_final\\_2](http://www.acf.hhs.gov/sites/default/files/opre/compendium_2013_508_compliant_final_2)

---

<sup>1</sup>Florida Partnership for School Readiness. (2004). *Birth to three screening and assessment resource guide*. Jacksonville, FL: University of North Florida.

[5\\_2014.pdf](#), Moodie, S., Daneri, P., Goldhagen, S., Halle, T., Green, K., & LaMonte, L. (2014). Early childhood developmental screening: A compendium of measures for children ages birth to five (OPRE Report 2014- 11). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

The selected tools include:

- Ages and Stages Questionnaire—3rd Edition
- Ages and Stages Questionnaire—Social-Emotional, 2nd Edition
- Battelle Developmental Inventory Screening Test
- Bayley Scales of Infant and Toddler Development Screening Test-3rd Edition
- Brigance Preschool Screens III
- Developmental Assessment of Young Children-2nd Edition
- Developmental Indicators for the Assessment of Early Learning—4th Edition
- Early Screening Inventory
- Early Screening Profiles
- FirstSTEp Screening Test for Evaluating Preschoolers
- Learning Accomplishment Profile—Diagnostic Screens
- Parents’ Evaluation of Developmental Status (PEDS) Tools

The information included in each individual profile was taken from technical manuals and information provided directly by the developer, including those who administer the screener. The developer of each tool was asked to review the profile for accuracy and completeness. Profiles were updated and revised based on their input. Outside resources such as research articles were not consulted in the development of these profiles.

Each profile includes:

- Background Information
- Availability and Cost of Assessment
- Training and Other Requirements for Assessors
- Availability of an Information Reporting System
- Approaches to Parental/Family Input
- Appropriateness for Children from Different Backgrounds
- Availability of Guidance for Follow-up Actions

A Summary Table is also included to provide an “at-a-glance” overview of the range of information for the selected developmental screening tools.

## SUMMARY TABLE

Screener Title	Developmental Domains Covered (As listed by publisher)	Age Range	Languages of Screener Materials	Training Available Through Publisher or Developer	Must Be Administered by Someone with Technical Background	Scoring Options (Manual, Electronic)	Screener Includes Parent and Family Input	Screener Includes Guidance on Follow-Up Steps	Cognitive testing/focus groups conducted to determine appropriateness for use with diverse populations
<b>Ages and Stages Questionnaire (ASQ-3)</b>	Communication Gross Motor Fine Motor Problem Solving Personal-Social	1 to 66 months	English Spanish French	Yes	No	Manual Electronic	Yes	Yes	Yes
<b>Ages and Stages Questionnaire: Social-Emotional, 2nd Edition</b>	Self-regulation Compliance Communication Adaptive functioning Autonomy Affect Interaction with people	6 to 60 months	English Spanish	Yes	No	Manual Electronic	Yes	Yes	Yes
<b>Battelle Developmental Inventory Screening Test</b>	Adaptive Personal-Social Communication Motor Cognitive	Birth to age 7	English Spanish	Yes	No	Manual Electronic	No	Yes	Yes
<b>Bayley Third Edition</b>	Cognitive Language Motor Functioning	1 to 42 months	English	Yes	Yes	Manual	Yes	No	No

Screeners Title	Developmental Domains Covered (As listed by publisher)	Age Range	Languages of Screener Materials	Training Available Through Publisher or Developer	Must Be Administered by Someone with Technical Background	Scoring Options (Manual, Electronic)	Screener Includes Parent and Family Input	Screener Includes Guidance on Follow-Up Steps	Cognitive testing/focus groups conducted to determine appropriateness for use with diverse populations
<b>BRIGANCE Screens III</b>	Expressive language Receptive language Gross motor Fine motor Academics/pre-academics Self-help Social-emotional skills	Birth to 1st grade	English	Yes	No	Manual Electronic	Yes	Yes	No
<b>Developmental Assessment of Young Children, 2nd Edition (DAYC-2)</b>	Cognition Communication Social-emotional Physical Development Adaptive Behavior	Birth to 5 years	English	No	Yes	Manual Electronic	Yes	No	No
<b>DIAL-4 (Developmental Indicators for the Assessment of Learning)</b>	Motor Concepts Language Self-Help Social-emotional skills	2 years, 6 months to 5 years, 11 months	English Spanish	Yes	No	Manual Electronic	Yes	Yes	No

Screening Title	Developmental Domains Covered (As listed by publisher)	Age Range	Languages of Screener Materials	Training Available Through Publisher or Developer	Must Be Administered by Someone with Technical Background	Scoring Options (Manual, Electronic)	Screener Includes Parent and Family Input	Screener Includes Guidance on Follow-Up Steps	Cognitive testing/focus groups conducted to determine appropriateness for use with diverse populations
<b>Early Screening Inventory [ESI-R]</b>	Visual-Motor/ Adaptive Language and Cognition Gross Motor	ESI-P: 3 years, 0 months to 4 years, 5 months ESI-K: 4 years, 6 months to 5 years, 11 months	English Spanish	Yes	No	Manual Electronic	Yes	Yes	No
<b>Early Screening Profiles (ESP)</b>	Cognitive Language Motor Self-Help/Social Articulation Home Health History Behavior	2 years, 0 months to 6 years, 11 months	English	Yes	No	Manual	Yes	Yes	No
<b>FirstSTEp</b>	Cognitive Language Motor Social-emotional skills Adaptive functioning	2 years, 9 months to 6 years, 2 months	English	No	No	Manual	Yes	No	No
<b>Learning Accomplishment Profile-Diagnostic Screens</b>	Social Development Self-Help Gross Motor	Birth to 18 months	English Spanish	Yes	No	Manual	Yes	No	No



Screeners Title	Developmental Domains Covered (As listed by publisher)	Age Range	Languages of Screener Materials	Training Available Through Publisher or Developer	Must Be Administered by Someone with Technical Background	Scoring Options (Manual, Electronic)	Screener Includes Parent and Family Input	Screener Includes Guidance on Follow-Up Steps	Cognitive testing/focus groups conducted to determine appropriateness for use with diverse populations
	Fine Motor Language								
<b>Parents' Evaluation of Developmental Status</b>	Global/Cognitive Expressive Language and Articulation Receptive Language Fine Motor Gross Motor Behavior Social-Emotional Self-Help School	Birth to age 8	English (Forms also translated into 14 other languages.)	Yes	No	Manual Electronic	Yes	Yes	Yes
<b>Parents' Evaluation of Developmental Status- Developmental Milestones</b>	Expressive Language Receptive Language Fine Motor Gross Motor Social-Emotional Self-Help Academic: Pre- Reading; Pre- Math, and Written Language	Birth to age 7 years, 11 months	English Spanish Arabic Chinese French- Canadian Portuguese Serbian Swahili	Yes	No	Manual Electronic	Yes	Yes	Yes



# Ages and Stages Questionnaires-3<sup>rd</sup> Edition (ASQ-3)

**Developers:** Jane Squires and Diane Bricker

**Publisher:** Paul H. Brookes Publishing Co., Inc.

[www.agesandstages.com](http://www.agesandstages.com)

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Gross motor
- Fine motor
- Problem solving
- Personal-social
- An overall section addresses general parental concerns.

## Intended age range:

1-66 months

## Number of items:

Each of the 21 questionnaires contains 30 items. There is also an overall section addressing general parental concerns.

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

Settings in which the ASQ-3 can be used include screening clinics, education and child care facilities, including Head Start and Early Head Start, home settings, and doctors' offices or clinics.

## BACKGROUND

### Purpose

The Ages and Stages Questionnaires-3<sup>rd</sup> Edition (ASQ-3) is a developmental screening system made up of 21 age-specific questionnaires completed by parents or primary caregivers of young children. The questionnaires can identify children who are in need of further assessment to determine whether they are eligible for early intervention or early childhood special education services.

### What is the appropriate time period between administering, recording, or reviewing the data?

The ASQ-3 manual suggests that it is ideal to screen children at regular intervals, from 2 months to 5 years, 6 months, if possible. Ideally, children should be screened initially at 2 and 4 months, then at 4-month intervals until they are 24 months old, and at 6-month intervals until they are 5 years, 6 months old. The developers do not recommend screening children more frequently than every 4-6 months (except at the 2- and 4- month intervals) unless there is some reason to suggest that more frequent screening would be useful (e.g., the child has suffered a serious illness, parents feel their child has changed, etc.).

### How long does it take to administer the developmental screener?

The ASQ-3 questionnaires are completed by parents. Each questionnaire can be completed in 10-15 minutes.

### Language(s) developed for:

The ASQ-3 was developed in English and translated into Spanish and French. Earlier editions of the ASQ are available in Korean. Translations of the ASQ-3 are in development in a number of languages; however, the developers did not provide information about which languages will be available.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

Yes, the ASQ-3 is available to programs without restrictions.

### What is the cost of the developmental screener?

As of 2015, the ASQ-3 Starter Kit, which includes 21 paper masters of the questionnaires (in English or in Spanish), scoring sheets, a CD-ROM with printable PDF questionnaires, the ASQ-3 User's Guide, and a laminated ASQ-3 Quick Start Guide, costs \$275.00. The starter kit contains all 21 questionnaires. Additional copies of the 21 questionnaires (in English or in Spanish) can be purchased separately for \$275.00.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Yes, ASQ-3 training is available through the publisher. Training DVDs are available that show staff how to screen, score, and interpret the results of the ASQ-3. Programs may also arrange for onsite seminars or attend the training seminars held every year by the developers of ASQ-3. Detailed information is available on the company's website (<http://www.agesandstages.com/training/>).

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

No, it is not necessary to have a professional background or technical training to complete the ASQ-3. The ASQ-3 was developed as a parent-completed screening tool, and having parents and caregivers complete the screener is the preferred method. Completing a questionnaire independently requires reading skills at a 4<sup>th</sup>- to 6<sup>th</sup>-grade reading level. If parents or caregivers are unable to complete questionnaires independently (due to cognitive disability, limited reading skills, etc.), teachers and program staff can provide support. The manual does suggest that all ASQ-3 users become familiar with the information in the manual, in particular, the information regarding administering the ASQ-3 which appears in chapter 6.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

A parent, caregiver, or teacher can score the ASQ-3 without a professional background or technical training. The manual does suggest that ASQ-3 users become familiar with the information in the manual, in particular the information regarding scoring the ASQ-3.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

The developers do not provide information about the performance of regular checks on administration.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

**Electronic Data Entry.** *Does the developmental screener come with a process for entering information from the screener electronically?*

Yes, the ASQ-3 can be used with online systems called the ASQ Pro (for single sites) and the ASQ Enterprise (for multisite programs). These online management systems help with screening administration, automated scoring, and information storage. An annual subscription to the ASQ Pro costs \$149.95. An annual subscription to the ASQ Enterprise costs \$499.95

**Electronic Reports.** *Can programs generate electronic reports of individual children's data?*

Yes, the ASQ Pro and the ASQ Enterprise online systems can store questionnaire results and follow-up decisions in individual child records. The ASQ Enterprise can also generate multisite reports to show trends across programs.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

The ASQ-3 questionnaires were designed to be completed by parents. They indicate "yes," "sometimes," or "not yet" regarding whether the child exhibits certain skills or behaviors within five areas: communication, gross motor, fine motor, problem-solving, and personal-social. The final overall section provides space for parents and caregivers to note any general concerns.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

Yes, the ASQ-3 manual gives suggestions about how to communicate results of the screening with families. There are suggestions for families of children whose scores indicate typical development and for children whose results indicate the need for further assessment. An example of a feedback letter for parents and caregivers of children whose scores indicate typical development is found in Appendix D (in English and in Spanish) of the manual. The manual suggests that providing feedback to families with children whose scores indicate the need for further assessment should always be done in person due to the sensitive nature of the conversation.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the ASQ-3 is a screener with developmental norms. Norms for the ASQ-3 were developed using questionnaire data collected between January 2004 and June 2008. The sample on which the norms are based included 15,138 children and their families, and was representative of the U.S. population in geography and ethnicity, and includes representation across socioeconomic groups. This norming sample was 53 percent male and 47 percent female. 54 percent of mothers in the sample had at least four years of college, whereas 12 percent had an associate's degree, 23 percent had a high school education, and 3.5 percent had not completed high school. The majority of the reporting caregivers for this sample indicated incomes greater than \$40,000.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

The ASQ-3 is available in Spanish and French. Previous editions of the ASQ are available in Korean.

*How were versions in languages other than English developed?*

The developers do not provide information about the development of the French version of the ASQ-3.

In order to develop the Spanish translation of the ASQ-3, pediatric experts, developmental pediatricians, and practitioners working with young children and families who speak a variety of Spanish dialects reviewed the Spanish-language version of the second edition of the ASQ. Translation errors that were found in the second edition were corrected and minor wording changes were made.

The ASQ-3 Spanish questionnaires have been tested with Spanish-speaking parents in various geographic regions of the United States; however, separate cutoff scores have not been developed for children of Spanish-speaking parents.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

The ASQ-3 is based on parent, family, or teacher report and therefore the developers do not provide information regarding accommodations for screening children with identified or suspected special needs.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

Focus groups have been conducted to assess the cultural appropriateness of several ASQ-3 translations and adaptations. These include studies of Aboriginal Australian (D'Aprano et al., 2014) and Mohawk (Dionne, McKinnon, Squires, & Clifford, 2014) adaptations.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The risk levels on the ASQ-3 are described as "typical development," "need for monitoring," or "need for further assessment."

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

Yes, the ASQ-3 Information Summary sheet provides a list of potential actions that may follow the screening, based on the child's scores and the parent's responses to the overall questions. For example, if the child's scores indicate typical development, children can be rescreened at 4- to 6-month intervals, and parents can be given suggestions for activities to do with their children to support their continued development. If a child's scores indicate the need for further assessment, a referral to a community agency or specialist may be made.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The recommended follow-up steps included on the ASQ-3 Information Summary Sheet provide recommendations for how families might follow up on the results of the screening. In addition, parents can use the activities that are included in the manual for children with typical results or for children who need monitoring and/or referrals. Children may benefit from practicing the skills targeted in these activities.

## REFERENCES

D'Aprano, A., Silburn, S., Johnston, V., Roboinson, G., Oberklaid, F., & Squires, J. (2014). Adaptation of the Ages & Stages Questionnaires for remote Aboriginal Australia. *Qualitative Health Research*, 1-13. DOI: 10.1177/10497323/456289.

Dionne, C., McKinnon, S., Squires, J., & Clifford, J. (2014). Developmental screening in a Canadian First Nation (Mohawk): Psychometric properties and adaptations of Ages & Stages Questionnaires (2nd). *Biomed Central*, 14(23). doi: 10.1186/1471-2431-14-23.

Squires, J., Twombly, E., Bricker, D., & Potter, L. (2009). *Ages and Stages Questionnaires* (3<sup>rd</sup> ed.). Baltimore, MD: Paul H. Brookes Publishing Co, Inc.

# Ages and Stages Questionnaires: Social-Emotional, Second Edition

**Developers:** Jane Squires, Diane Bricker, and Elizabeth Twombly

**Publisher:** Paul H. Brookes Publishing Co., Inc.

<http://www.brookespublishing.com/store/books/squires-asqse/index.htm>

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Self-regulation
- Compliance
- Communication
- Adaptive functioning
- Autonomy
- Affect
- Interaction with people

**Intended age range:**  
2-60 months

## Number of items:

The ASQ: SE-2 is a series of nine separate questionnaires based on age intervals:

2 months (16 items)  
6 months (23 items),  
12 months (27 items),  
18 months (31 items),  
24 months (31 items),  
30 months (33 items),  
36 months (35 items),  
48 months (36 items),  
and 60 months (36 items).

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

The ASQ: SE-2 can be used in home settings, clinical settings (e.g., primary health care clinics, immunization clinics, mental health clinics), center-based settings (e.g., child care, preschool), and other settings (e.g., health fairs, school screenings, community Child-Find activities).

## BACKGROUND

### Purpose

The Ages and Stages Questionnaires-Social Emotional (ASQ: SE-2) is a developmental screener designed to complement the Ages and Stages Questionnaires by providing information specifically addressing the social and emotional behavior of children. The ASQ: SE-2 identifies infants and young children whose social or emotional development requires further evaluation to determine if a referral for intervention services is necessary.

### What is the appropriate time period between administering, recording, or reviewing the data?

The ASQ: SE-2 is intended for use at four to six month intervals between 1 month and 3 years of age, and then at one year intervals through age 5.

### How long does it take to administer the developmental screener?

The ASQ: SE-2 questionnaires are completed by parents. The questionnaires take approximately 10-15 minutes to complete.

### Language(s) developed for:

The ASQ: SE-2 was developed in English and translated into Spanish.



## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

Yes, the ASQ: SE-2 is available to programs without restrictions.

### What is the cost of the developmental screener?

As of 2015, a complete ASQ: SE-2 Starter Kit costs \$275.00. This kit contains everything needed to start screening children with the ASQ: SE-2: nine print masters of the questionnaires and scoring sheets that can be photocopied, a CD-ROM with printable PDF questionnaires, and the ASQ: SE-2 User's Guide. The Starter Kit is also available with Spanish questionnaires. Additional master copies of the nine questionnaires (in English and Spanish) can be purchased separately for \$225.00.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Yes, training is available through the publisher on how to administer and score ASQ: SE-2. There are many different types of training available including onsite seminars and training by DVD. Detailed information is available on the company's website: <http://www.agesandstages.com/training/>.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

The original ASQ and ASQ: SE were developed as parent-completed screening tools, and it is best that parents or caregivers complete the screeners. However, child care providers, teachers, and early interventionists can also complete the ASQ: SE-2. Parents, caregivers, and teachers do not need to have technical training to complete the ASQ: SE-2.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

A parent, caregiver, or teacher can score the ASQ: SE-2 without technical training.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

The developer does not provide information regarding the performance of regular checks on faithful administration.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

### Electronic Data Entry. Does the developmental screener come with a process for entering information from the screener electronically?

Yes, both the ASQ: SE-2 and the ASQ-3 can be used with online systems called the ASQ Pro (for single sites) and the ASQ Enterprise (for multisite programs). These online management systems help with screening administration, automated scoring, and information storage. An annual subscription to the ASQ Pro costs \$149.95. An annual subscription to the ASQ Enterprise costs \$499.95.

### Electronic Reports. Can programs generate electronic reports of individual children's data?

The ASQ Pro and the ASQ Enterprise create both individual child reports and program-level reports. The ASQ Enterprise can also generate multisite reports to show trends across programs.



## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

The ASQ: SE-2 is designed to be completed by parents or caregivers.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

Yes, the ASQ: SE-2 does include some recommendations on how to share the screening results with the child's family.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the ASQ-SE-2 is a screener with developmental norms. The ASQ-SE-2 norming sample included 10,074 children whose families contributed at least one completed questionnaire and 2348 whose families contributed two or more questionnaires at different age intervals (e.g., at 6 and 12 months). The children in the sample were between the ages of 1 and 72 months. The sample was representative of the U.S. population in terms of ethnicity, geographic region, parent education, income, and gender of children (based on 2010 U.S. Census data).

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

Yes, the ASQ-SE-2 is available in Spanish.

*How were versions in languages other than English developed?*

The final English version of the ASQ-SE-2 was translated into Spanish by several native Spanish speakers with Head Start experience representing different Spanish-speaking dialects and countries. The Spanish translation was used with 153 children whose families were non-English speakers.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

The ASQ: SE-2 is based on parent observation; therefore, accommodations for children with identified or suspected special needs are not needed.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

Items for the ASQ-SE were assembled into a preliminary version called the Behavior-Ages and Stages Questionnaires (B-ASQ). Practitioners in approximately 50 programs across the United States used the B-ASQ with a diverse population of young children and parents. Practitioners and parents then completed questionnaires to provide feedback on the clarity of the meaning of the items and the appropriateness of the items, and suggestions for revisions and additions of items. This input was included in the final revisions of the B-ASQ, which was renamed the Ages and Stages Questionnaires-Social-Emotional (ASQ-SE). For the ASQ-SE-2, focus groups of parents, practitioners, and diverse users were conducted to give feedback on revising current items and adding new items. An iterative item development and testing process occurred with focus groups and diverse populations across two years.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

Children are classified as "okay" (no further evaluation of social-emotional competence is indicated) or "at risk" (further evaluation of their social-emotional status is indicated).

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

Yes, the manual contains criteria that provide program staff with guidelines for how to interpret ASQ-SE scores and what types of follow-up are recommended. For example, if a child scores above the cutoff (indicating that there is the potential for a developmental delay or social/emotional concern), possible follow-up steps include:

- 1) Refer the child for diagnostic social-emotional or mental health assessment or
- 2) Provide the parent with information and support, and monitor the child using the ASQ-SE.

The manual also recommends that program staff look at other factors that may have influenced the results of the screening (e.g., setting/time of screening, the child's health, developmental factors, and family/cultural factors) and gather additional information before making a referral decision.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The manual suggests providing parents with information or referrals to appropriate agencies for areas of concern. There is no additional information in the manual on how families might follow up on the results of the screening.

## REFERENCES

Squires, J., Bricker, D., & Twombly, E. (2015). *The ASQ: SE-2<sup>nd</sup> edition user's guide for the ages and stages questionnaires: Social emotional*. Baltimore, MD: Paul H. Brookes Publishing.

Squires, J., Bricker, D., & Twombly, E. (2003). *The ASQ: SE user's guide for the ages and stages questionnaires: Social emotional*. Baltimore, MD: Paul H. Brookes Publishing.

# Battelle Developmental Inventory, 2<sup>nd</sup> Edition – Screening Test

**Developers:** U.S. Office of Education, Columbus Laboratories of Battelle Memorial Institute

**Publisher:** Riverside Publishing

<http://www.riversidepublishing.com/products/bdi2/index.html>

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Adaptive
- Personal-social
- Communication
- Motor
- Cognitive

## Intended age range:

Birth to 7 years

## Number of items:

The BDI-2 Screening Test contains 100 items. However, not all 100 items are used for every child. There are 2 items for each of the five developmental areas for 10 age groups. Thus, a child will most likely complete only 10 items. The Screening Test can be used to determine whether or not to administer the full BDI-2.

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

The BDI-2 Screening Test can be used in a variety of settings, including Head Start-Early Head Start Centers, programs funded for children with special needs, pre-schools, child care centers, homes, and medical facilities.

## BACKGROUND

### Purpose

The Battelle Developmental Inventory, 2<sup>nd</sup> Edition Screening Test (BDI-2 Screening Test) is a developmental screener that can be administered to get an initial snapshot of a child's development. The BDI-2 Screening Test is made up of items from the Battelle Developmental Inventory-2<sup>nd</sup> edition, which is a 450-item standardized assessment. The full assessment can be administered after the Screening Test if the administrator believes the child may be at risk for developmental delay. This profile will focus only on the Screening Test, not the full BDI-2 Assessment.

### What is the appropriate time period between administering, recording, or reviewing the data?

Rescreening with the BDI-2 Screening Test could be done in as little as six months, especially if interventions or services have been put in place for a child.

### How long does it take to administer the developmental screener?

The BDI-2 Screening Test can take 10 to 30 minutes, depending on the age of the child.

### Language(s) developed for:

The Screening Test was developed for English, but there are also materials available in Spanish (more information on this is provided later in this profile).

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

In order to purchase the developmental screener, the person purchasing it must have the following (these restrictions do not necessarily apply to the person administering the developmental screener):

1. Certification as an occupational therapist, physical therapist, or another medical profession. Other medical professions include pediatricians, nurse practitioners, office nurses, visiting nurses, home health care workers for infants and young children, and Head Start specialists. Further information about these restrictions can be found on the publisher's website (see 1<sup>st</sup> page) or by calling the publisher.
2. Specific undergraduate-level training in one or more of the following: intelligence/cognitive testing, basic tests and measurements, speech, hearing, language assessments, education diagnostics, and developmental milestone assessment.

### What is the cost of the developmental screener?

As of 2015, the BDI-2 Screening Test Kit with manipulatives can be purchased separately from the BDI-2 for \$405.70. This includes materials for 30 children. There are several different electronic packages that can also be purchased for use of the BDI-2 Screening Test on a computer or a hand-held device.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Yes, training is available on how to administer and score the BDI-2 Screening Test.

Training is available through the publishing company, as well as through independent trainers across the country. Detailed information is available on the publishing company's website:

<http://www.riversidepublishing.com/products/bdi2/training.html>.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

Yes, the developers recommend that people administering the Screening Test have college-level training. The primary user groups include preschool, kindergarten, and primary school teachers, special educators and early intervention providers. Additionally, the BDI-2 developmental screener is appropriate for use by speech-language pathologists, psychologists, and diagnosticians. Users should have significant understanding of the purpose of the measure and familiarity with child development.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

No; however, people who interpret and report the results of the screener should have a higher level of training and supervised experience. The manual suggests that they have college-level training.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

Yes, the developers recommend that a professional train and be available to those who are administering the BDI-2 Screening Test for consultation and to make sure the data are being collected accurately.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

**Electronic Data Entry.** *Does the developmental screener come with a process for entering information from the screener electronically?*

Yes, the BDI-2 developmental screener can be entered electronically. Using the electronic score pad replaces the need for a paper record pad. The Spanish-language version can also be entered electronically.

**Electronic Reports.** *Can programs generate electronic reports of individual children's data?*

Yes, electronic reports can be generated. Reports are available at the child level, for program monitoring by program directors or administrators. There are also special reports that are available for use in Head Start monitoring and for Individualized Education Plan development.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

No, the BDI-2 Screening Test does not include tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

Yes, the manual includes some recommendations on how to share the screening results with a child's family. The manual emphasizes that families have a right to be informed of the results in simple and clear language so they understand them. Thus, the people who administer the developmental screener have an ethical responsibility to communicate the results, explain the meaning of the scores, and provide possible implications or recommendations based on the results. There are several charts that can help parents visualize the results and how their child is developing in comparison to other children of the same age. Additionally, there is guidance for talking with families of children with disabilities.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the BDI-2 does have developmental norms that were created using a sample of 2,500 children ages birth-7 years old. The sample was representative of the U.S. population in age, gender, geography and race/ethnicity (based on 2001 U.S. Census data), and included representation across socioeconomic groups. The BDI-2 Screening Test does not have separate norms from the full BDI-2. There are no developmental norms for the Spanish-language version of the BDI-2 Screening Test.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

Yes, the BDI-2 Screening Test is available in Spanish. The developers state that the Spanish version can be administered after a child is given the English version if it becomes apparent that the child does not know enough English to complete the English version. Or, the items that the child scored incorrectly on the English version can be administered from the Spanish version. Additionally, they state that the scoring process for the Spanish version is not different from the English version. This means that the scores for Spanish-speaking children are compared to the norms and developmental abilities of the English-speaking children with whom the BDI-2 Screening Test was developed.

*How were versions in languages other than English developed?*

The Spanish version of the BDI-2 Screening Test is not a complete translation of the BDI-2 Screening Test in English. The visual materials needed for administering the measure were translated, as well as the record forms and score reports.

Ninety-six percent of the full BDI-2 assessment English items were translated into Spanish. Twenty of the full BDI-2 assessment items needed significant modification when translated from the communication, motor, and cognitive domains.

Three of the items were a part of the BDI-2 Screening Test. The modifications occurred when there was not a comparable word in Spanish for the original English word, or when the item had to do with rhyming words that did not rhyme when translated into Spanish. Translation occurred through a consensus process to determine what would be appropriate for many different groups of Spanish speakers in the United States. After items were translated the first time, they were reviewed for grammar issues and cultural biases. Items were revised and reviewed twice more before a final set was published.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

Yes, there are accommodations for screening children with identified or suspected special needs. The person administering the BDI-2 Screening Test should be familiar with behaviors that may interfere with a child's ability to respond, limitations based on the disability of the child, and relevant information about the child, such as medication and assistive technology. There is particular guidance for children with motor, vision, hearing, or speech impairments or deafness, emotional or behavioral disturbance, and multiple disabilities. For example, a child with a motor impairment might take longer to make small movements, so allowing more time for the child to complete the task might be necessary.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

During the development of the BDI-2 Screening Test, individuals from five racial/ethnic/linguistic groups (African American, American Indian and Alaskan Native, Asian, Hispanic, and White) and representing both sexes reviewed items from the original BDI. These groups compiled the information and used it to select, revise, or delete items for the final version of the full BDI-2 assessment and the BDI-2 Screening Test.



**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

If the BDI-2 Screening Test is administered first, the scores indicate “pass” or “refer.” If the scores indicate that the child should be referred, then the full BDI-2 can be administered.

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

The manual gives guidance about follow-up steps that might occur after a more detailed evaluation is completed. Some children will likely be screened with just the Screening Test, while others will be screened with both the Screening Test and the full BDI-2. Thus, the follow-up steps might vary based on which tool(s) are used.

The manual does provide information about using the results of the full BDI-2 to help develop an Individualized Education Plan. The key elements include long-term goals, short-term objectives, and evaluation criteria.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

Yes, a parent report that assists parents in understanding the results of the screening can be produced.

## REFERENCES

Newborg, J. (2005). *Battelle developmental inventory (2nd ed.) examiners manual*. Rolling Meadows, IL: Riverside Publishing.

Newborg, J. (2005). *Battelle developmental inventory (2nd ed.), Spanish, user's guide*. Rolling Meadows, IL: Riverside Publishing.



# Bayley-III Screening Test

**Developer:** Nancy Bayley

**Publisher:** Pearson

<http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=015-8027-23X>

**Developmental domains addressed in the developmental screener, as stated by the publisher:**

- Cognitive
- Language
- Motor

**Intended age range:**

1 to 42 months

**Number of items:**

The Bayley-III Screening Test contains 136 items.

**In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?**

The Bayley-III Screening Test can be administered in any environment free of distractions. Ideally, the room should be quiet, free of distraction, and large enough for the child to crawl/walk/jump. The optimal arrangement would include the examiner, the child, and one caregiver in the room during testing.

## BACKGROUND

### Purpose

The Bayley-III Screening Test is designed to assess the cognitive, language and motor functioning of infants and young children to quickly determine whether a child is progressing according to normal expectations and to determine if future evaluation is needed. The Bayley-III Screening Test is made up of items from the Bayley Scales of Infant and Toddler Development, Third Edition, which is a 326-item standardized assessment. When in-depth assessment of cognition, language or motor functioning is needed, the full Bayley-III scales should be used. This profile will focus only on the Screening Test, not on the full Bayley-III assessment.

### What is the appropriate time period between administering, recording, or reviewing the data?

The developers do not provide information about the appropriate time period between initial screening and possible re-screening.

### How long does it take to administer the developmental screener?

Testing time for children 12 months and younger is 15-20 minutes; testing time for children 13 months and older is approximately 30 minutes.

### Language(s) developed for:

The Bayley-III Screening Test was developed in English.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

The Bayley-III Screening Test can be purchased by individuals with certification or membership in a professional organization that requires training and experience in assessment or someone who has a master's degree in a relevant field or license to practice in the healthcare field.

### What is the cost of the developmental screener?

As of 2015, the Bayley Scales of Infant and Toddler Development, Third Edition (Bayley-III) Screening Test cost \$230.10. It includes materials and forms needed to assess 25 children, the screening test manual and stimulus book, the picture book and manipulative set.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Members of the Pearson Training and Consultation Team provide training for users of the Bayley-III Screening Test. The need and objectives for the training are determined based on customer request. The training may be delivered in-person or via live webinar.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

Yes, examiners must have experience and training in assessment to administer the screener. Eligible examiners include psychologists, early childhood specialists, trained technicians and other professionals with experience and training in assessment and an understanding of testing young children.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

Those scoring and interpreting the Bayley-III Screening Test must have experience and training in assessment. Eligible scorers include psychologists, early childhood specialists, and other professionals with experience and training in assessment and an understanding of testing young children. Test interpretation should adhere to the Standards for Educational and Psychological Testing (see <http://teststandards.org/> for more information).

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

No, regular checks on administration are not required.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

### Electronic Data Entry. Does the developmental screener come with a process for entering information from the screener electronically?

No, there is no scoring software for the Bayley-III Screening Test.

### Electronic Reports. Can programs generate electronic reports of individual children's data?

No, electronic reports cannot be generated.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

Yes, the Bayley-III Screening Test includes parent and family input on a child's skills and development. Behaviors may be scored only if they are observed by the examiner; caregiver reports are insufficient for scoring but should be noted on the Record Form. The presence of a parent or caregiver during the administration is recommended. Given adequate instructions, examiners can ask the caregiver to help encourage the child to respond to test items.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

No information is provided about sharing the results with a child's family.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the Bayley-III Screening Test has developmental norms. The norms were based on a sample of 1,675 children (from the larger Bayley III sample of 1,700 children). This group of 1,675 children was based on national standardization samples representative of the U.S. population for ages 1 to 42 months (based on October 2000 Census data). Children with a variety of disabilities were excluded from participation. However, a representative proportion (approximately 10%) of children with special needs (including Down syndrome, Cerebral Palsy, Pervasive Developmental Disorder, premature birth, language impairment, and those at risk for developmental delay) was added to the normative sample.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

No, the Bayley-III Screening Test is not available in languages other than English.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

According to the developer, the Bayley-III Screening Test is appropriate for use with children who are diagnosed with special needs. Flexibility and modifications may be necessary for children with physical or language impairments, but results should be evaluated with professional judgment. Children who may not be functioning at age level can still be screened with this developmental screener as long as their level of functioning is at a level above the minimum age for the assessment. However, they may not begin at the item corresponding with their chronological age. The manual gives guidance as to where to begin for these children.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

The developers did not examine appropriateness for diverse populations in this way.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The risk levels on the Bayley-III Screening Test are described as "At Risk," "Emerging," or "Competent."

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

The developers do not provide information about follow up steps based on the results of the screening.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The developers do not provide information regarding recommendations for how families might follow up on the results of the screening.

## REFERENCES

Bayley, N. (2006). *Bayley Scales of infant and toddler development screening test (3<sup>rd</sup> ed.)*. San Antonio, TX: NCS Pearson, Inc.

# BRIGANCE Screens III

**Developers:** Albert H. Brigance  
**Publisher:** Curriculum Associates, LLC

<http://www.curriculumassociates.com/products/detail.aspx?title=BrigEC-Screens3>

**Developmental domains addressed in the developmental screener, as stated by the publisher:**

- **Physical Development** (Gross Motor Skills and Fine Motor Skills)
- **Language Development** (Receptive Language Skills and Expressive Language Skills)
- **Adaptive Behavior** (Self-help Skills and Social-Emotional Development)
- **Academic Skills/Cognitive Development**

**Intended age range:**  
Birth to first grade

**Number of items:**  
Each of the age-specific screeners (Infant, Toddler, Two-Year-Old) consists of up to 11 assessments with between 2 and 16 items within each assessment.

**In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?**

The BRIGANCE® Screens III can be used in early childhood program settings, pediatric clinics, and at screening fairs, which are often offered in communities in collaboration with health care providers.

## BACKGROUND

### Purpose

The BRIGANCE® Screens III are developmental screeners used to quickly and accurately identify those children who may have developmental problems such as language impairments, learning disabilities, or cognitive delays and those children who may be academically talented or gifted. The BRIGANCE® Screens III include the Early Childhood Screen III (0-35 months), the Early Childhood Screen III (3-5 years), the Early Childhood Screen III (K & 1), the Early Head Start Screen III (for children ages 0-35 months), and the Head Start Screen III (for children ages 3-5 years). The Head Start editions include the same age-specific screeners as the Early Childhood editions, include information specific to Head Start programs, and relate the content of the screeners to the Head Start domains. This overview will focus on content in the Early Childhood Screen III (0-35 months) and the Early Head Start Screen III, which address both infant and toddler populations.

### What is the appropriate time period between administering, recording, or reviewing the data?

According to the BRIGANCE® Screens III Technical Manual, screening can be scheduled for any time during the year. Rescreening is recommended for children who score low in the first screening. The second screening should be conducted four to six weeks after the first screening or after remedial activities have been implemented. In addition, children at psychosocial risk should be rescreened within six months of initial screening to review progress and make any needed referral decisions. Midyear or end-of-year screening, compared with initial screening, allows educators to measure growth and monitor progress children are making during the year.

### How long does it take to administer the developmental screener?

Each age-specific screen in the BRIGANCE® Screens III can be administered and scored in about 10-15 minutes.

### Language(s) developed for:

The BRIGANCE® Screens III were developed in English. The BRIGANCE® Spanish Directions Booklets provide directions in Spanish for the Core Assessments and the Supplemental Assessments of the Screens III. Data Sheets, Parent Feedback Forms, and the Parent Report for the Self-help and Social-Emotional Scales are also provided in Spanish.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

Yes, the BRIGANCE® Screens III are available to programs without restrictions.

### What is the cost of the developmental screener?

As of 2015, the Early Childhood Screens III Kit (0-35 months) and the Early Head Start Screen III Kit cost \$309.00 each. The Early Childhood Screen III Kit (3-5 years), the Early Childhood Screen III Kit (K&1), and the Head Start Screen III Kit cost \$279.00 each. A Kit includes: a Screens III screening manual (0-35 months, 3-5 years, K&1, Early Head Start, or Head Start), 60 Data Sheets (assorted ages based on the screening manual), the Screens III Technical Manual, the Screens III Accessories (for 0-35 months and Early Head Start only), and a canvas tote.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Yes, training is available on how to administer and score the BRIGANCE® Screens III. The screener's publisher, Curriculum Associates, offers free online training modules on the BRIGANCE® Screens III. Please see [www.CAtraining.com](http://www.CAtraining.com) for more information. Additionally, in-person professional development sessions are available for purchase.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

No additional training or specific qualifications are required to administer the BRIGANCE® Screens III. The Screens III can be used by teachers, paraprofessionals, special educators, psychologists, occupational and physical therapists, day care and early childhood teachers, and speech-language pathologists. The BRIGANCE® Screens III Technical Manual recommends that all Screens III administrators become familiar with the directions and scoring procedures provided and administer the screens in strict accordance with the directions accompanying each screener.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

Administrators of the BRIGANCE® Screens III do not need technical training to score the measure. However, the Screens III Technical Manual states that it is critical that all administrators become familiar with the directions and scoring procedures and score the screens in accordance with the instructions provided.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

Regular checks on faithful administration are not required; however, oversight by administrators to ensure strict accordance with the instructions provided in the screens can help ensure accurate results.



## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

**Electronic Data Entry.** *Does the developmental screener come with a process for entering information from the screener electronically?*

Yes, the BRIGANCE® Screens III can be scored by hand or with the BRIGANCE® Online Management System. A year's license to use the Online Management System costs \$4.00 per child. (Volume discounts are available.)

**Electronic Reports.** *Can programs generate electronic reports of individual children's data?*

Yes, the BRIGANCE® Online Management System generates reports of screening data for individual children as well as across classrooms, schools, programs, or districts. To support educators, reports include easy-to-interpret graphs and data tables, clear explanations of next steps, and recommendations for ongoing assessment and instruction. Parent reports are also available.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

Yes, the BRIGANCE® Screens III include Parent Feedback Forms that allow parent(s)/caregiver(s) to respond and communicate information about their child that can help guide program decisions for their child. Parents respond to questions about their child's skills and behaviors in key developmental areas by checking the appropriate box (rarely/no, sometimes, most of the time/yes).

The Screens III also include Parent Reports for gathering information from parent(s)/caregiver(s) about a child's self-help skills as well as social and emotional skills. Also, most of the assessments for infants and for toddlers can

be administered by parent report (interviewing the parent/caregiver or someone who knows the child well).

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

Yes, the BRIGANCE® Screens III include several recommendations on how to share the screening results with a child's family. The BRIGANCE® Online Management System also includes a Parent Report to support this communication.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the BRIGANCE® Screens III are screeners with developmental norms. The *BRIGANCE® Screens* items were initially drawn from the *Inventory of Early Development*, a broader assessment, which was first published in 1978 and revised in 1991. In 2004, the 1991 edition was updated and became the *Inventory of Early Development II*. The *Screens* were updated in 1995, 2001, and 2005. Selected assessments from the *BRIGANCE® Inventory of Early Development III* were standardized and validated in 2012 on a nationally representative geographic, demographic, and socioeconomic sample. Items from these standardized and validated assessments were selected to create the age-specific screens in the *Screens III*.

The items in the BRIGANCE® Screens III were tested on a nationally representative sample of children (n=1,929) from each region of the U.S. (Midwest, Northeast, South, and West). The sample closely matched the U.S. population on a number of important demographic variables (e.g., age, gender, race/ethnicity, socioeconomic status) as reported by the U.S. Bureau of the Census and the U.S. Department of Education's National Center for Education Statistics.



**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

The BRIGANCE® Screens III are available in Spanish.

*How were versions in languages other than English developed?*

As part of the recruitment process for the standardization study, English language learners were included in the sample. For children who spoke primarily Spanish at home, assessment directions were provided in Spanish. Family members completing the Parent Report were given the option to use a Spanish translation of this form. All child-facing stimuli were unaltered, with the exception of literacy items that required reading. These items were translated into Spanish as well. Providing these Spanish-language resources ensured that English language learners (for whom Spanish was the dominant language) could be included in the normative sample (although separate norms were not developed for this subsample).

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

Yes, the BRIGANCE® Screens III screening manuals include suggested accommodations and adaptations for children with motor impairment, hearing impairment or deafness, vision impairment or blindness, severe speech impairment, emotional disturbance and behavioral problems, significant health problems, autism and developmental disorders, and traumatic brain injury.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

The developers do not provide information about whether the appropriateness of the BRIGANCE® Screens III for diverse populations was addressed in this way.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The BRIGANCE® Screens have a range of results, including: below potential delays cutoff with risk factors, below potential delays cutoff without risk factors, above potential delays cutoff (i.e., within normal limits), and above cutoff for gifted/talented.

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

Yes, the screening manuals include thorough guidance about follow-up steps based on the results of the screening.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

Yes, the screening manuals include many recommendations on how families might follow up on the results of the screening.

## REFERENCES

- Glascoe, F.P. (2010). *Technical report for the BRIGANCE® screens*. North Billerica, MA: Curriculum Associates, LCC.
- French, B. (2013). *BRIGANCE® screens III technical manual*. North Billerica, MA: Curriculum Associates, LCC.

# Developmental Assessment of Young Children – 2<sup>nd</sup> Edition (DAYC-2)

---

**Developers:** Judith K. Voress and Taddy Maddox  
**Publisher:** Pro-Ed

<http://www.proedinc.com/customer/productView.aspx?id=5157>

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Cognition
- Communication
- Social-emotional development
- Physical Development
- Adaptive behavior

**Intended age range:**  
Birth to 5 years

**Number of items:**  
380 total items. The number of items assessed depends on the child's level of development and the number of domains the examiner wishes to assess.

**In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?**

Skills may be assessed through observation, interview of caregivers, and direct assessment; therefore possible settings include home, school/center, day care center, Head Start-Early Head Start or medical facilities, among others.

## BACKGROUND

### Purpose

The Developmental Assessment of Young Children – Second Edition (DAYC-2) is an individually administered, norm-referenced measure of early childhood development for children from birth through age 5 years 11 months. It has three major purposes: 1) to help identify children who are significantly below their peers in cognitive, communicative, social-emotional, physical, or adaptive behavior abilities; 2) to monitor children's progress in special intervention programs; and 3) to be used in research studying abilities in young children.

### What is the appropriate time period between administering, recording, or reviewing the data?

The developers do not provide information regarding the appropriate time between initial screening and rescreening.

### How long does it take to administer the developmental screener?

10-20 minutes for each of the 5 domains.

### Language(s) developed for:

The DAYC-2 was developed in English.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

Yes, the DAYC-2 is available to programs without restrictions.

### What is the cost of the developmental screener?

As of 2015, the cost of the DAYC-2 complete kit was \$345.00. The complete kit contains the examiner's manual, 25 scoring forms for each domain (cognitive, communication, physical development, social-emotional development, and adaptive behavior), 25 mini poster-packs of the Early Child Development Chart, and 25 examiner summary sheets. Additional DAYC-2 scoring forms (in packages of 25) can be purchased for \$41.00. Additional examiner summary sheets (in packages of 25) can be purchased for \$27.00.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

The publisher does not offer training on the DAYC-2; however, a qualified examiner should not have difficulty administering the DAYC-2 appropriately when following the instructions in the examiner's manual. The developers do advise that examiners consult local school policies, state regulations, and position statements of professional organizations regarding test administration, interpretations, and issues of confidentiality before administering the DAYC-2.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

The developers report that qualified examiners are likely to be early childhood specialists, school psychologists, diagnosticians, speech-language pathologists, physical therapists, occupational therapists, or other professionals who have some formal training in assessment and early childhood development.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

According to the developers of this screener, the same qualifications pertain to examiners and those scoring the screener: qualified examiners will be able to score the DAYC-2.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

The developers do not provide information about the performance of regular checks on administration.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

### Electronic Data Entry. Does the developmental screener come with a process for entering information from the screener electronically?

Yes, there is an Online Scoring and Report System available for the DAYC-2. Examiners are able to enter total scores for each Domain or enter scores on individual items. However, the examiner will need the paper protocols for administration.

### Electronic Reports. Can programs generate electronic reports of individual children's data?

Yes, the Online Scoring and Report System can generate reports at the individual child level.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

The DAYC-2 includes a parent or other caregiver interview as one option for gathering information that the examiner cannot observe during the assessment.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

The developers do not include information about how to share the screening results with the child's family.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms?*

The DAYC-2 is a screener with developmental norms.

*Which populations are included in the norming sample?*

The norming of the DAYC-2 was completed with a sample of 1,832 children ages birth through 5 years, 11 months. The DAYC-2 norming sample is representative of the US population according to the 2010 Statistical Abstract of the United States. Approximately 51% of the norming sample was male. Approximately 77% of the sample were White, 15% Black/African American, and 3% were Asian/Pacific Islander. Eighty-two percent of the sample were of Hispanic origin. Fifty-three percent of the sample had parents with a high school diploma and some college coursework.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

The DAYC-2 is not available in languages other than English.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

The developers do not provide information about suggested accommodations for screening children with identified or suspected special needs.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

The DAYC-2 manual does not provide information about cognitive testing or focus groups regarding diverse populations.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The DAYC-2 describes children as very superior, superior, above average, average, below average, poor, and very poor. Children who fall within the below average, poor, and very poor ranges may not have attained developmental levels that are expected for children their age.

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

No, the DAYC-2 does not come along with guidance about follow-up steps based on the results.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

No, the DAYC-2 does not include recommendations on how families might follow up on the results of the screening.

## REFERENCES

Voress, J. K., & Maddox, T. (2013). *Developmental assessment of young children* (2<sup>nd</sup> ed.). Austin, Texas: Pro-Ed.

# Developmental Indicators for the Assessment of Learning (DIAL-4)

**Developers:** Carol Mardell and Dorothea S. Goldenberg  
**Publisher:** Pearson

<http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=14753>

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Motor
- Concepts
- Language
- Self-help
- Social-emotional skills

**Intended age range:**  
2 years, 6 months to 5 years, 11 months

**Number of items:**  
The full assessment contains 20 items, each of which contains several tasks. It is not always necessary to administer the full assessment based on the child's level of development.

**In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?**

The DIAL-4 can be used in settings where developmental screening often takes place, including centers, school districts, homes, pediatric offices, and health fairs.

## BACKGROUND

### Purpose

The Developmental Indicators for the Assessment of Learning, Fourth Edition (DIAL-4) is an individually administered developmental screener designed to identify children who are in need of intervention or diagnostic assessment in the following areas: motor, concepts, language, self-help, and social-emotional skills. A shorter version of the DIAL-4, called Speed DIAL-4, is also available. The Speed DIAL-4 consists of 10 DIAL-4 items and takes approximately 20 minutes to administer.

### What is the appropriate time period between administering, recording, or reviewing the data?

The developers do not provide information regarding the appropriate time between initial screening and rescreening.

### How long does it take to administer the developmental screener?

The DIAL-4 takes 30-45 minutes to administer.

### Language(s) developed for:

The DIAL-4 was developed in English and Spanish.



## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

Yes, the DIAL-4 is available to programs without restrictions.

### What is the cost of the developmental screener?

As of 2015, the cost of the DIAL-4 complete kit is \$655.00. The complete kit contains materials in both English and Spanish, including the manual, 50 record forms (in English), 1 record form (in Spanish), 50 cutting cards (used to assess a child's ability to cut straight and curved lines), 50 parent questionnaires (in English), 25 Teacher Questionnaires (in English), manipulatives, dials, operator's handbooks (in English and Spanish for motor, concepts, and language areas) plus the Speed DIAL and training packet. Additional DIAL-4 record forms (in packages of 50, available in English and Spanish) can be purchased for \$37.85. Additional parent questionnaires (in packages of 50 in English or Spanish) can be purchased for \$37.90, and additional teacher questionnaires (in packages of 25 in English) can be purchased for \$18.95.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Yes, some training is available on how to administer and score the DIAL-4 through Psych Corps, a division of Pearson, the publisher of the DIAL-4. The information needed for training is contained in the DIAL-4 kit. This includes the manual, the training packet, and the training presentation (DVD or through the Internet).

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

Teachers, professionals, or paraprofessionals can administer the DIAL-4 or Speed DIAL-4 if they have been trained in the use of the test materials. The manual suggests that the screener be administered by a team of adults. This team is composed of a professional coordinator and three other adults called operators, each of whom administers the items in one of the three performance areas: motor, concepts, and language. The DIAL-4 coordinator is responsible for making sure that each operator is adequately trained to administer the six or seven items in the performance area they have been assigned to screen. Three children can be assessed at the same time by the team of three administrators, each working with individual children on a different performance area. The DIAL-4 kit contains all the necessary materials for conducting a DIAL-4 training workshop.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

### *Electronic Data Entry. Does the developmental screener come with a process for entering information from the screener electronically?*

Yes, users can enter information on Q-Global, a website available through Pearson.

### *Electronic Reports. Can programs generate electronic reports of individual children's data?*

Yes, electronic reports may be generated at the individual child level for a fee using the Q-Global website. The developers do not provide information about whether Q-Global generates reports at the classroom or institution level.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

The DIAL-4 includes a parent questionnaire that concentrates on the child's self-help and social development. It also requests information regarding general concerns about development.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

Yes, the DIAL-4 manual provides information on how to hold a conference with parents about the results of the screening. This information includes guidelines for talking to parents about concerns, suggestions about how to use score reports, and how to go about scheduling further evaluations, if necessary.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

The DIAL-4 is a screener with developmental norms. The norming of the DIAL-4 was completed with a sample of 1,400 children aged 2 years, 6 months through 5 years, 11 months. The sample consisted of both English- and Spanish-speaking children and was selected to be highly representative of the U.S. population (according to the U.S. Census data taken from the March 2008 Current Population Survey).

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

Yes, the DIAL-4 is available in Spanish.

*How were versions in languages other than English developed?*

The Spanish version was equated with the English version so that children are compared to the same set of norms, regardless of whether they are tested in English or Spanish. To equate the two versions, experts first selected common items that would require children to do the same thing, had the same meaning in both languages, and had the same difficulty level. Then the common items were calibrated on the same scale so that raw scores for each item represent the same difficulty level across both languages.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

The developers do not provide information about suggested accommodations for screening children with identified or suspected special needs.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

Items that were difficult to administer, were biased, or did not discriminate between age groups were eliminated from the trial version of the DIAL-4. In addition, the norming sample was diverse. No other information regarding the use of cognitive testing or focus groups with diverse populations is provided.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The risk levels are described in the DIAL-4 as "potential delay" and "OK."

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

The manual briefly discusses follow-up steps based on whether the child scores as “potential delay” or “OK.” If a child’s overall screening score on the DIAL-4 falls within the potential delay score range for his or her age, the child should be referred for a diagnostic case study evaluation. It should be noted that remedial or special education placement should not be made solely on the basis of the DIAL-4. In addition, scores should be interpreted in the context of the child’s socioeconomic status and cultural and language background.

If a child’s overall screening score falls within the “OK” range for his or her age, the screening administrator may still wish to give the child’s parents or teachers suggested activities that will allow the child to practice specific skills. The activities will depend on the age of the child and developmental appropriateness. Some children score “OK” on a developmental screener at one age and show evidence a year later that warrants further evaluation. For this reason, development should be assessed on a yearly basis. Since children grow and develop at different rates, it is important to offer developmental evaluation on a continuing time frame rather than just once.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The manual suggests that the administrator of the screener discuss the results with the child’s parent or caregiver privately and in person, and request permission if further evaluation is needed. There is no additional information in the manual regarding follow-up steps the family might take based on the results of the screening.

## REFERENCES

Mardell, C., & Goldenberg, D. S. (2011). *Developmental indicators for the assessment of learning* (4<sup>th</sup> ed.). Bloomington, MN: Pearson.

# Early Screening Inventory-Revised (ESI-R)

**Developers:** Samuel J. Meisels, Dorothea B. Marsden, Martha Stone <http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=PAaESI&Mode=summary>  
**Publisher:** Pearson Assessments

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Visual motor/adaptive
- Language and cognition
- Gross motor

## Intended age range:

The Early Screening Inventory-Preschool (ESI-P) is used with children ages 3 years, 0 months to 4 years, 5 months, and the Early Screening Inventory-Kindergarten (ESI-K) is used with children ages 4 years, 6 months to 5 years, 11 months.

## Number of items:

The ESI-R contains 25 items.

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

According to the developer, the ESI-R has been successfully used in schools, clinics, and medical facilities.

## BACKGROUND

### Purpose

The Early Screening Inventory-Revised (ESI-R) is a brief developmental screener designed to identify children who may need further evaluation in order to determine if they require special educational services. The ESI-R is divided into two separate screeners: the Early Screening Inventory-Preschool (ESI-P) and the Early Screening Inventory-Kindergarten (ESI-K). This profile includes information about both the ESI-P and the ESI-K.

### What is the appropriate time period between administering, recording, or reviewing the data?

A child's score on the ESI-R determines whether the child should be rescreened. If so, the ESI-R should be re-administered in 8 to 10 weeks.

### How long does it take to administer the developmental screener?

The ESI-R takes approximately 15-20 minutes to administer, although this may vary depending on the age of the child.

### Language(s) developed for:

The ESI-R was developed in English and Spanish.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

Yes, the ESI-R is available to programs without restrictions.

### What is the cost of the developmental screener?

As of 2015, the cost of the ESI-R screening kit is \$153.20. The screening kit contains the ESI-R examiner's manual, screening materials, ESI-P score sheets or ESI-K score sheets (in English or Spanish) for 30 children, and parent questionnaires (in English or Spanish). Each of these items can also be purchased separately. The examiner's manual cost \$65.60. The screening materials cost \$25.40. The score sheets (30 per package) cost \$36.90. The parent questionnaires (package of 30) cost \$31.05.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Yes, training videos, DVDs, and a training manual for the ESI-R are available through Pearson, the publisher of the screener. Some information about these materials is available on the Pearson website (<http://www.pearsonassessments.com/pai/ca/training/training.htm>), but readers should contact Pearson directly for more specific training information.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

The manual states that proper use of the ESI-R requires an understanding of the basic principles of standardized assessment and knowledge in early childhood behavior and development. Therefore, the person administering the developmental screener should have some formal background in early childhood assessment. The manual also says that individuals with less training and experience can administer the ESI-R under the supervision of a person with the qualifications mentioned above.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

As mentioned above, the manual states that proper use of the ESI-R requires an understanding of the basic principles of standardized assessment and knowledge of early childhood behavior and development. Therefore, the person scoring the developmental screener should have some formal background in early childhood assessment. This may include teachers, paraprofessionals, social workers, and psychologists.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

While regular supervision of a screener administrator during the process of learning to administer the ESI is suggested, the developers do not provide information about the performance of regular checks on faithful administration.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

**Electronic Data Entry.** *Does the developmental screener come with a process for entering information from the screener electronically?*

Yes, ESI-R Online is the online scoring and training system for the ESI-R. ESI-Online is licensed annually and priced according to the number of children to be entered online and screened. ESI-Online costs \$2.95 per child.

**Electronic Reports.** *Can programs generate electronic reports of individual children's data?*

ESI-Online can generate reports for individual children and can provide summarized screening results for an entire class. ESI-Online does not generate reports at the institutional level.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

The ESI-R contains a parent questionnaire that consists of five sections. The first three provide basic information about the child, the child's family, and his or her school history. The fourth section contains the child's medical history, which includes an overview of the child's illnesses, hospitalizations, and health conditions. The fifth section deals with the child's overall development and addresses issues other than medical concerns that may pose problems for the child in a school setting.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

The manual suggests that every parent should receive feedback about screening results either verbally after the administrator has had time to determine the total score or in writing after a team review. The manual also says that screening gives only tentative conclusions and this should be communicated clearly to parents. Parents should also be given the opportunity to ask questions both before and after screening, especially when screening indicates that further evaluation is necessary.



## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the ESI-R is a screener with developmental norms. The ESI-P was first normed between 1993 and 1996 with a sample of 977 children divided among three groups of 6-month age spans between 3 years, 0 months and 4 years, 5 months. Data for the ESI-K norms were collected between 1986 and 1990, and then again between 1992 and 1994, with a sample of 5,034 children ages 4 years, 6 months through 5 years, 11 months. Both the ESI-P and the ESI-K were renormed in 2007. The 2007 ESI-P and ESI-K norming samples included 1,200 children from 89 sites (including Head Start centers, public and private preschools, and elementary schools) in all four geographical regions in the United States. Additional data were collected from individual examiners (school psychologists, speech-language pathologists, and special-education teachers) to ensure that the norming sample matched the U.S. population on various demographic characteristics. Children who speak both English and Spanish were screened in the language judged by their parents and the program to be their primary language. The Spanish-language versions of the ESI-P and ESI-K were used with 13 percent of the norming sample.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

Both the ESI-P and the ESI-K are available in Spanish.

*How were versions in languages other than English developed?*

To develop the Spanish-language version of the ESI-P and ESI-K, scores on the Spanish-language version were calibrated to be comparable to scores on the English version so that equal scores on both versions represent the same level of ability.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

The developers do not provide information regarding accommodations for screening children with special needs.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

The developers do not provide information about whether the appropriateness of the ESI-R for diverse populations was examined in this way.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The risk levels on the ESI-R are labeled “OK,” “rescreen,” and “refer.”

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

Children who score in the “OK” category are considered to be developing normally and are not in need of further assessment. Children who score in the “rescreen” category have borderline ESI-R scores. The manual suggests that the ESI-R should be re-administered to these children in 8 to 10 weeks. If a child’s score is in the “refer” category, he or she should be evaluated by an assessment team and, if the problems identified in the screening are confirmed, a definitive plan of action or individualized education plan should be developed.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The developers do not provide information regarding recommendations for how families might follow-up on the results of the screening.

## REFERENCES

Meisels, S.J., Marsden, D.B., Wiske, M.S. & Henderson, L.W. (2008). *Early screening inventory-revised (ESI-R) examiner’s manual* (2008 ed.). Minneapolis, MN: NCS Pearson, Inc.

# Early Screening Profiles

**Developers:** Patti Harrison, Alan Kaufman, Nadeen Kaufman, Robert Bruininks, John Rynders, Steven Ilmer, Sara Sparrow, and Domenic Cicchetti

<http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=PAa3500&Mode=summary>

**Publisher:** Pearson

## Developmental domains addressed in the developmental screener, as stated by the publisher:

The Early Screening Profiles consists of seven parts:

- Cognitive/Language Profile
- Motor Profile
- Self Help/Social Profile
- Articulation Survey
- Home Survey
- Health History Survey
- Behavior Survey

These components can be used individually or in combination.

## Intended age range:

2 years 0 months to 6 years 11 months

## Number of items:

Cognitive/Language Profile (78); Motor Profile (8); Self-Help/Social Profile (60); Articulation Survey (20); Home Survey (12) Behavior Survey (22); Health History Survey (12)

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

The Early Screening Profiles can be administered in educational, community, medical or other settings.

## BACKGROUND

### Purpose

The Early Screening Profiles (ESP) are designed to screen children for possible developmental problems or giftedness, and to determine whether further evaluation is needed to prescribe specialized intervention services.

### What is the appropriate time period between administering, recording, or reviewing the data?

The publisher typically recommends at least 6 weeks before retesting after initial screening.

### How long does it take to administer the developmental screener?

The Early Screening Profiles take from 15 to 30 minutes to administer, depending on the age and developmental level of the child. The parent and teacher questionnaires are completed in 10 to 15 minutes.

### Language(s) developed for:

The Early Screening Profiles were developed in English.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

The Early Screening Profiles can be purchased by individuals with certification or membership in a professional organization that requires training and experience in assessment or someone who has a master's degree in a relevant field or license to practice in the healthcare field.

### What is the cost of the developmental screener?

As of 2015, The Early Screening Profiles cost \$399.75. The kit includes the manuals, test easel, materials, test records and questionnaires for 25 children.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

The publisher offers a training video available for purchase (\$143) that provides information about administering and scoring the developmental screener.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

No, examiners do not need specialized training, experience or coursework to administer the ESP. Necessary qualifications include the ability to read and follow the directions, accuracy in writing responses, and the ability to interact with young children in a kind and patient manner.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

No, scorers do not need to have a professional background or technical training other than training on the ESP's scoring procedures. However, the interpretation of the results must be completed by professionals with training in tests and measurement.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

Screening coordinators with training, skills and experience working with young children, child development theory and research, and assessment are responsible for supervising examiners. The developers do not provide information on whether or not, or how often, checks on administration are completed.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

### Electronic Data Entry. Does the developmental screener come with a process for entering information from the screener electronically?

No, there is no software for entering information from the screener electronically.

### Electronic Reports. Can programs generate electronic reports of individual children's data?

No, electronic reports cannot be generated.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

The Self-Help/Social Profile is a questionnaire completed by the child's parent (or teacher, daycare provider, or a combination of them) that assesses the child's typical performance in the areas of communication, daily living skills, socialization, and motor skills. Parent input is additionally gathered through the parent-reported Home and Health History surveys. The Home survey asks questions about the child's environment and the Health History survey identifies child health problems.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

No information is provided about sharing the results with a child's family.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the Early Screening Profiles has developmental norms. The norms are based on a nationally representative sample (based on 1990 U.S. Census data) of 1,149 children from ages 2 years 0 months to 6 years 11 months of age. Half of the sample (50.4 percent) was female. Since many of the children did not attend school or school programs, data for the Self-Help/Social Profile completed by teachers were obtained for only 366 children.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

No, the Early Screening Profiles is not available in languages other than English.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

The developers do not provide information regarding accommodations for screening children with special needs.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

The developers do not provide information about whether the appropriateness of the Early Screening Profiles for diverse populations was examined in this way.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The developers define children identified for further assessment on the profiles as at-risk. The Articulation, Home, Health History, and Behavior Surveys use the following descriptive risk categories: below average, average, and above average.

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

The manual suggests that results from the Profiles can be used to refer children for follow-up comprehensive assessment and to plan the procedures and instruments used in that follow-up assessment. The developers suggest that the referral and selection of instruments should be based on the particular needs of the child and family and the focus of the screening agency. The manual cites numerous compatible instruments that can be used for more detailed follow-up assessment: the Kaufman Assessment Battery for Children [K-ABC], Vineland Adaptive Behavior Scales, and Bruininks-Oseretsky Test of Motor Proficiency, the Scales of Independence Behavior battery, The Social Skills Rating System, and The Battelle Developmental Inventory (although this is not an all-inclusive list).

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The manual includes a template report for parents that includes a short description of the different components of the test, the child's scores, and a recommendation section for the screening agency to fill out unique to each child.

## REFERENCES

Harrison, P.L. (1990). *Early screening profiles manual*. Minneapolis, MN: NCS Pearson, Inc.

LaQua, D. (1989). *Assessing the predictive validity and factor structure of the AGS Early Screening Profiles* (Unpublished doctoral dissertation). University of Minnesota, Minneapolis.



# FirstSTEp Screening Test for Evaluating Preschoolers

**Developers:** Lucy J. Miller  
**Publisher:** Developmental Technologies, Inc.

<http://www.pearsonassessments.com/HAIWEB/Cultures/en-us/Productdetail.htm?Pid=015-8182-707&Mode=summary>

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Cognitive
- Communication (language)
- Motor
- Social-emotional
- Adaptive functioning

## Intended age range:

2 months, 9 months to 6 years, 2 years

## Number of items:

FirstSTEp includes 143 items.

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

FirstSTEp is designed to be administered in large-scale screening in such settings as public school systems, public health settings, and pediatricians' offices. Specifically, FirstSTEp can be given in a school, an office, a clinic, or any quiet area.

## BACKGROUND

### Purpose

FirstSTEp is an individually-administered developmental screener designed to identify young children who may have developmental delays. The screener will result in a determination as to whether a child is functioning within normal limits or is in need of a complete diagnostic evaluation.

### What is the appropriate time period between administering, recording, or reviewing the data?

The developer does not provide information regarding the appropriate time period between initial screening and rescreening.

### How long does it take to administer the developmental screener?

FirstSTEp is designed to be administered in approximately 15 minutes.

### Language(s) developed for:

FirstSTEp was developed in English.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

FirstSTEp can be purchased by individuals with certification or membership in a professional organization that requires training and experience in assessment or someone who has a master's degree in a relevant field or a license to practice in the healthcare field.

### What is the cost of the developmental screener?

As of 2015, the cost of the complete FirstSTEp screening kit is \$305.30. This kit includes: the manual, the Stimulus Booklet, 5 Record Forms each for Levels 1, 2, and 3, 25 Social-Emotional/Adaptive Behavior Booklets, 25 Parent Booklets; manipulatives, and a carrying case.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

There is no training DVD or materials; however, per customer request, a webinar or on-site training can be made available.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

FirstSTEp has been designed for a variety of user groups including educators; special educators; nurses; physicians; occupational, physical, speech, and language therapists; psychologists; day care teachers, Head Start teachers; aides in these professions, and others with an interest in early childhood screening. The developers recommend that users should be familiar with child development. The developers also state that users should follow closely all directions for administration. They are encouraged to utilize the Procedural Reliability Checklist to become competent in the administration of FirstSTEp.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

FirstSTEp can be scored by users who follow the standardized administration instructions in the manual.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

The developer does not provide information about regular checks on faithful administration.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

### Electronic Data Entry. Does the developmental screener come with a process for entering information from the screener electronically?

No, FirstSTEp provides a Record Form with space to score the child's responses by hand.

### Electronic Reports. Can programs generate electronic reports of individual children's data?

No, electronic reports cannot be generated.

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

Yes, FirstSTEp includes an optional Parent/Teacher scale that was developed to add information about the child's performance at home or at school that may not be observable at the time of the screening. The wording and scoring of this scale is simplified so that parents and teachers can fill out the rating scale independently.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

No, the manual does not include recommendations on how to share the screening results with the child's family.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, FirstSTEp is a screener with developmental norms. The sample on which the norms are based included 1,433 children aged 2 years, 9 months through 6 years, 2 months who were selected to be representative of the population of children at these ages in the United States (based on 1988 U.S. Census data). Norms for the FirstSTEp were developed from June 1990 to January 1991. Approximately 54 administrators including occupational, speech, and physical therapists, psychologists, special educators, early childhood teachers, nurses, social workers, and pediatricians conducted screenings with children from 40 states and the District of Columbia.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

FirstSTEp is not available in languages other than English.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

The developers do not provide information about suggested accommodations for screening children with unidentified or suspected special needs. However, the manual does provide guidance on establishing rapport with the child before screening begins and suggests administration of the developmental screener should be sensitive to the specific needs of the child.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

The developers do not provide information about whether the appropriateness of the FirstSTEp for diverse populations was addressed through cognitive testing or focus groups.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

Children's scores on the FirstSTEp classify them as either "normal" or "at risk."

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

The developers do not provide specific recommendations for follow-up steps. However, they do recommend that children whose scores suggest possible developmental delays should receive a comprehensive evaluation (in deficit areas) prior to beginning any special programming.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The developers do not provide information regarding recommendations for how families might follow up on the results of the screening.

## REFERENCES

Miller, L.J. (1993). *FirstSTEp screening test for evaluating preschoolers manual*. San Antonio, TX: Pearson.

# Learning Accomplishment Profile-Diagnostic Screens (LAP-D Screens)

**Developers:** The Chapel Hill Training-Outreach Project

**Publisher:** Kaplan Early Learning Company

<http://chtop.org/Products/The-LAP-D-Screens.html>

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Gross motor
- Fine motor
- Cognitive
- Language

## Intended age range:

There are three versions of the LAP-D Screens: one each for 3-, 4-, and 5-year-olds. The 5-year-old version is meant for children in kindergarten.

## Number of items:

The number of items depends on the version. The 3-year-old version has 18 items. The 4-year-old version has 55 items. The 5-year-old version has 25 items. However, not all items are administered to all children.

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

The LAP-D Screens can be used in early childhood programs, universities, research laboratories, hospitals, rehabilitation centers, and other medical practices.

## BACKGROUND

### Purpose

The Learning Accomplishment Profile-Diagnostic Screeners (LAP-D Screens) is a brief developmental screener that provides an initial snapshot of whether a child might be at risk for a developmental delay. The LAP-D Screens is a shorter version of the Learning Accomplishment Profile-Diagnostic Edition (LAP-D), which is a norm-referenced assessment, meaning that a child's scores on the assessment are compared to the scores of a group of children with which the assessment was developed and on which it was tested.

### What is the appropriate time period between administering, recording, or reviewing the data?

The developer does not provide information about the appropriate time period between initial screening and rescreening.

### How long does it take to administer the developmental screener?

The LAP-D Screens takes about 10-15 minutes to administer; however, administration time depends on the child's age and ability.

### Language(s) developed for:

The LAP-D Screens was developed in English. The materials are also available in Spanish.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

**Is the developmental screener available to programs without restrictions?**

Yes, the developmental screener is available to programs without restrictions.

**What is the cost of the developmental screener?**

As of 2015, the cost for each version of the LAP-D Screens is \$124.95. Additional records sheets can be purchased for an additional \$30.00. A complete kit that includes all three screening levels (ages 3 to 5 years) costs \$349.95.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

**Is training available on how to administer and score the developmental screener? Who offers the training?**

Yes, Kaplan Early Learning Company offers training on the LAP System. Information is available on the Kaplan website ([http://www.kaplanco.com/services/profDev\\_onSiteTraining.asp](http://www.kaplanco.com/services/profDev_onSiteTraining.asp)), however the website does not detail which LAP tools are covered in the training.

**Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?**

Yes, it is necessary to have a professional background to administer and complete the LAP-D Screens. Teachers can administer the LAP-D Screens, but they must have at least a Child Development Associate (CDA) credential. Additionally, the LAP-D Screens can be administered by clinical psychologists, school psychologists, occupational and physical therapists, physicians, nurses, and social workers.

**Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?**

Anyone who can administer the LAP-D Screens can score it.

**Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?**

Regular checks on administration are recommended but not required. The developers do not provide additional information about when to perform regular checks on administration or who should perform these checks.

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

**Electronic Data Entry.** *Does the developmental screener come with a process for entering information from the screener electronically?*

Yes, the LAP-D Screens information can be entered electronically, but the software must be purchased in addition to the materials needed to administer the measure. The information can be entered on a computer or on a hand-held electronic scoring pad.

**Electronic Reports.** *Can programs generate electronic reports of individual children's data?*

Yes, programs can generate electronic reports of the LAP-Screens information at the child level. There is also an electronic parent report.



## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

No, there is no specific information about gathering information from parents or family members about the child.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

No, there are no recommendations on how to share the results with a child's family.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

The LAP-D Screens is a screener with developmental norms. The LAP-D Screens norms were developed with a group of 907 children ages 3 to 5. The children were from the Northeast (29%), North Central (13%), West (13%), and South (45%) regions of the United States. The sample was 47% male, 52% White, 28% African American, 14% Hispanic, and 5% other.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

Yes, the LAP-D Screens have been translated into Spanish.

*How were versions in languages other than English developed?*

The developer does not provide information about how the Spanish-language version was developed.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

No, there are no suggested accommodations for screening children with identified or suspected special needs.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

The developer does not provide information about whether the appropriateness of the LAP-D Screens for diverse populations has been examined in this way.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The only terminology used by the LAP-D Screens is "pass" and "refer." If a child passes the screener, it indicates that at the time, he or she is not at risk for developmental delay. If a child is given a "refer" on a certain number of items, which depends on age and the cutoff score being used, then the child should be evaluated further.

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

No, the developmental screener does not come with guidance about follow-up steps based on the results.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

No, the developmental screener does not include recommendations on how families might follow up on the results of the screening.

## REFERENCES

Lockhart, C.S. (1997). *Technical and examiner's manual for LAP-D screens: 5 year old (kindergarten), 3 year old and 4 year old children*. Chapel Hill, NC: Chapel Hill Training Outreach Project, Inc. Kaplan Early Learning Company.

# PEDS Tools: Parents' Evaluation of Developmental Status (PEDS) and PEDS Developmental Milestones (PEDS: DM)

**Developers:** Frances Page Glascoe, Ph.D.

[www.pedstest.com](http://www.pedstest.com)

**Publisher:** PEDStest.com,LLC and PEDSTestOnline, LLC

## Developmental domains addressed in the developmental screener, as stated by the publisher:

- Expressive language
- Receptive language
- Fine motor
- Gross motor
- Social-emotional
- Behavior
- Self-help
- Pre-academic/academics
- Health
- Psychosocial risk

## Intended age range:

Birth to 8 years

## Number of items:

16-18 (depending on age).

## In what settings can this developmental screener be used (e.g., centers, homes, medical facilities, other)?

Settings in which the PEDS Tools can be used include screening clinics, education and child care facilities, home settings, and doctors' offices or clinics.

## BACKGROUND

### Purpose

Parents' Evaluation of Developmental Status (PEDS) and PEDS Developmental Milestones (PEDS: DM), collectively called the PEDS Tools, are developmental screeners used to help detect early developmental and behavioral problems. The PEDS Tools rely on parent-completed questionnaires to gather information about how a child is developing. They are used to gather information about specific areas of child development and to see if further evaluation may be needed.

### What is the appropriate time period between administering, recording, or reviewing the data?

PEDS follows the guidelines of the American Academy of Pediatrics, which recommends setting up a regular screening schedule with a child's pediatrician.

### How long does it take to administer the developmental screener?

The PEDS Tools can be completed in 5 minutes.

### Language(s) developed for:

PEDS was developed in English. Translations are available in Spanish, Vietnamese, Albanian, Amharic, Arabic, Armenian, Burmese, Cambodian, Chinese, Danish, Dutch, Farsi, Filipino Tagalog, French, Galician, German, Greek, Haitian-Creole, Hebrew, Hindi, Hmong, Icelandic, Indonesian, Karen, Laotian, Malay, Nepali, Polish, Portuguese, and Cape Verdean, Russian, Serbian, Somali, Swahili, Taiwanese, Thai, Turkish, and Visayan.

PEDS: DM was developed in English. Translations are available in Spanish, Arabic, Chinese, French-Canadian, Portuguese, Serbian, and Swahili, with other translations in progress.

## AVAILABILITY AND COST OF THE DEVELOPMENTAL SCREENER

### Is the developmental screener available to programs without restrictions?

Yes, the PEDS Tools are available to programs without restrictions.

### What is the cost of the developmental screener?

As of 2015, for PEDS Tools in print, the cost for the initial screening kit is \$346.00. The kit includes laminated PEDS: DM questions, the PEDS:DM scoring template, a dry erase marker, manuals/scoring directions for both PEDS: DM and PEDS, 100 PEDS response forms, 100 Growth Charts for scoring/interpretation and progress tracking with PEDS Tools.

## TRAINING AND OTHER REQUIREMENTS FOR ASSESSORS

### Is training available on how to administer and score the developmental screener? Who offers the training?

Yes, training is available at no cost via [www.pedstest.com](http://www.pedstest.com) including videos, case examples, training guidance, (e.g. training-the-trainer), pre/post-tests, certification, etc.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to administer or complete the developmental screener?

No, it is not necessary to have a professional background or technical training to complete the PEDS Tools.

### Is it necessary to have a professional background or technical training (over and above training on the developmental screener) to score the developmental screener?

No, it is not necessary to have a professional background or technical training (over and above training on the developmental screener) to score the PEDS Tools.

### Are regular checks on administration required or recommended to ensure appropriate administration? If so, when and by whom?

No, regular checks on administration are not required. However, teachers and examiners must faithfully use the PEDS brief guide to scoring and administration if they are scoring the screener by hand. *PEDS Online* corrects for common errors that may arise during administration (e.g., it prompts users if nothing is written on the PEDS response form for an item suggesting parents may not have understood the questions, skipped items, etc.).

## INFORMATION REPORTING SYSTEM FOR THE DEVELOPMENTAL SCREENER

### Electronic Data Entry. Does the developmental screener come with a process for entering information from the screener electronically?

Yes, the PEDS Tools include a process for entering information electronically, called *PEDS Online*. The cost for *PEDS Online* is \$3.00 per encounter.

### Electronic Reports. Can programs generate electronic reports of individual children's data?

Yes, PEDS Tools are available online together with the Modified Checklist of Autism in Toddlers-Revised (MCHAT-R). The web-based screening services automate scoring, generate referral letters, take-home summary reports for parents, billing and procedure codes, and create a database for each user so that results can be summarized for program evaluation. A free trial of *PEDS Online* for 10 children is available at [www.pedstest.com](http://www.pedstest.com).

## APPROACHES TO FAMILY/PARENT INPUT

**Tools for Family Input.** *Does the developmental screener include specific tools or guidance for gathering and incorporating parental/family input on an individual child's skills and development?*

Yes, the PEDS Tools were designed to be completed by parents.

**Sharing Results.** *Does the developmental screener include recommendations on how to share developmental screener results with the child's family?*

Yes, the PEDS Tools manuals and the website have specific guidance on explaining screening results to families.

## OPTIONS FOR USE WITH SPECIAL AND DIVERSE POPULATIONS

**Developmental Norms.** *Is this a developmental screener with developmental norms? Which populations are included in the norming sample?*

Yes, the PEDS Tools have developmental norms. The norming sample included a nationally representative population of approximately 40,000 families across 19 U.S. States (plus Canada and Mexico). The characteristics of this sample were comparable to the U.S. population based on U.S. Census data from 1996.

**Availability of Versions in Languages Other than English.** *Is the developmental screener available in languages other than English? Which languages?*

The PEDS Tools are available in many languages (please see page 1 of this profile for a complete list). According to the developer, translations of the PEDS Tools adhere to guidelines set forth by the International Test Commission ([www.intestcom.org](http://www.intestcom.org)).

*How were versions in languages other than English developed?*

The PEDS Tools developers established user groups for each language to ensure that translations are effective.

**Accommodations for Children with Special Needs.** *Are there suggested accommodations for assessing children with special needs?*

Yes, guidelines are provided for working with children who may have autism, behavior/mental health issues, language impairment, learning or intellectual disabilities, hearing or vision impairment, or motor disabilities.

**Consultation with Diverse Populations.** *Have cognitive testing or focus groups been conducted with diverse populations to determine the appropriateness of this developmental screener for these populations?*

PEDS Tools researchers developed user groups to ensure that translations of the tools were appropriate for native speakers of those languages.

**Risk Levels.** *What terminology is used to describe risk levels (e.g., delay, no delay, at risk, caution, rescreen, okay, etc.)?*

The risk levels on the PEDS Tools are described as "high risk," "moderate risk," or "low risk."

## FOLLOW-UP GUIDANCE

**Program Follow-Up Steps.** *Does the developmental screener come with guidance about follow-up steps based on the results?*

Yes, PEDS Tools in print and online provide decision support for how best to respond to families' needs, referral letters and take-home parent summary reports.

**Family Follow-Up Steps.** *Does the developmental screener include recommendations on how families might follow-up on the results of the screening?*

The take-home parent summary reports include recommendations on how families might follow up on the results of the screening. PEDS Tools also explain to providers how best to assist families, follow-up on advice and referral recommendations, how to coordinate care, etc.

## REFERENCES

Glascoc, F.P. (2013). *Collaborating with parents: Using parents' evaluation of developmental status (PEDS) to detect and address developmental and behavioral problems* (2<sup>nd</sup> ed.). Nolensville, TN: PEDSTest.com.

Glascoc, F.P Robertshaw, N.S. (2007). Parents' evaluation of developmental status: Developmental milestones (PEDS-DM). Nolensville, TN: PEDSTest.com.

[www.pedstest.com](http://www.pedstest.com) houses research papers and abstracts to be included in subsequent editions of the PEDS Tools manuals.



## About the Author

Shannon Moodie is a Senior Research Analyst with Child Trends. Shannon Moodie works in both the Early Childhood Development research area and the Communications and Public Policy area. A former pre-k and kindergarten teacher, Shannon completed a Master's degree in Education Policy at George Washington University with a focus on qualitative research methods. Her specific research and policy interests include family engagement in early childhood programs, issues of equity and access to quality early care and education, the development and implementation of Quality Rating and Improvement Systems (QRIS), and training early childhood professionals.