

# EARLY IDENTIFICATION GUIDE



## IMPLEMENTING DEVELOPMENTAL SCREENING AND SURVEILLANCE INTO PRIMARY CARE



### DID YOU KNOW?

The **medical home** is the ideal setting for developmental screening



### California ranks

31st

in the country for screening infants and toddlers

42nd

for screening children living below the federal poverty level



Only **34.4%**

of children in California receive timely developmental screenings

1 in 6 children



ages 3-17 have a developmental delay or disability



1 in 36 children

are at risk for an autism spectrum disorder

### Too often developmental delays go undetected.

Developmental screening at AAP recommended well-child visits will catch delays earlier, making treatment more effective.



# The American Academy of Pediatrics Practice Recommends:



**DEVELOPMENTAL SURVEILLANCE** during every well-child visit



**GENERAL DEVELOPMENTAL SCREENING** at 9, 18, and 30 months



**AUTISM-SPECIFIC SCREENING** at 18 and 24 months



**REFERRAL** for evaluation and early intervention services when a risk is identified

Using a well-validated developmental screening tool during routine healthcare visits increases referral and identification rates for children with developmental delays and supports linkage to early intervention services.

## Recommended Tools for Developmental Screening:

	<b>ASQ-3<sup>®</sup></b> AGES AND STAGES QUESTIONNAIRE-3 AND AGES AND STAGES QUESTIONNAIRE: SOCIAL-EMOTIONAL-2 <a href="http://brookespublishing.com/asq">brookespublishing.com/asq</a>	<b>ASQ:SE-2<sup>®</sup></b> AGES & STAGES QUESTIONNAIRES: SOCIAL-EMOTIONAL, 2ND EDITION <a href="http://brookespublishing.com/asq">brookespublishing.com/asq</a>	<b>PEDS</b> PARENTS' EVALUATION OF DEVELOPMENTAL STATUS <a href="http://PEDStest.com">PEDStest.com</a>	<b>SWYC</b> SURVEY OF WELL-BEING OF YOUNG CHILDREN <a href="http://bit.ly/3oFsg0r">bit.ly/3oFsg0r</a>	<b>M-CHAT</b> MODIFIED CHECKLIST FOR AUTISM IN TODDLERS, REVISED (M-CHAT-R) <sup>™</sup> <a href="http://M-CHAT.org">M-CHAT.org</a>
DOMAINS MEASURED	General development including areas of communication, motor, problem solving, adaptive skills, social emotional	Social-emotional development	General development	General development, emotional-behavioral	Autism-specific
NUMBER OF QUESTIONS	30 (6 each area)	Varies by age	10	24 (plus 10 optional family context questions)	20
VARIETY OF SURVEY	21 age-based forms	9 age-based forms	Single form, all ages	12 age-based forms	Single form, all ages
AGE RANGE	2 months–5 years	1 month-6 years	0-8 years	2-60 months	16-30 months
PARENT COMPLETION	<b>10–20 minutes</b>	<b>10–20 minutes</b>	<b>5 minutes</b>	<b>5-15 minutes</b>	<b>2–5 minutes</b>
PROVIDER SCORE & INTERPRET TIME	<b>1–5 minutes</b>	<b>1–5 minutes</b>	<b>2 minutes</b>	<b>1-5 minutes</b>	<b>5–10 minutes</b>
LANGUAGES	English, Spanish, Arabic, Chinese, French, Vietnamese; ASQ PTI also available in Hmong and Somali	English, Spanish, Arabic, French; ASQ:SE PTI also available in Hmong and Somali	English, Spanish, Vietnamese; Others with license	English, Spanish, Arabic, Bengali, Burmese, Chinese, Chuuksee, French, Haitian-Creole, Khmer, Korean, Nepali, Portuguese, Russian, Samoan, Somali, Tagalog, Vietnamese	English, Spanish, Chinese, & Korean; Others with license

**PROVEN PARENT-REPORT METHODOLOGY**

Research shows that parents are reliable reporters of their child's development.

Screening results that indicate a concern will require further assessment and referral for necessary services.



## Risk factors which may contribute to a delay



Prematurity of less than 32 weeks or low birth weight



Environmental factors such as neglect and abuse



Prenatal or other exposure to drugs, alcohol, or tobacco



Children with an orthopedic, vision, or hearing impairment



Poor nutrition or difficulties eating



Exposure to lead-based paint

# Why is Developmental Screening in **YOUR** Practice Important?

**Screening early leads to more successful long-term outcomes**



Children who receive early treatment for developmental delays are more likely to be ready for kindergarten, successful in school, and live independently

**YOU are often the first line of defense**



Approximately 25–30% of problems noted by parents during well-child visits are developmental and behavioral in nature

**Families feel supported**



Families report higher levels of satisfaction and support for physicians who offer developmental screening

# 1-2-3 of Early ID

## 1. SURVEILLANCE



Monitoring and discussion of any potential delay or concern with development

## 2. SCREENING



Use of a standardized tool to identify children at risk

## 3. EVALUATION & REFERRAL



In-depth identification process and linkage to appropriate supports or services

## BY AGE 3, CHILDREN SHOULD HAVE HAD 3 DEVELOPMENTAL SCREENINGS



9 MONTHS



18 MONTHS



30 MONTHS

## Feedback from an Expert

Ventura pediatrician, Dr. Sun Lee, began using the ASQ-3 in 2011. He has extensive experience with this tool and has found:



**Easy for parents**



Parents typically only need minor clarifications about how to complete the ASQ-3

**Quick to complete**



Completion of the tool has never taken him longer than 2–3 minutes

**Essential for identification**



All evidence indicates that, without a screening tool, physicians often miss many signs of developmental delays



## Screening is **COVERED**

Developmental Screening can be billed using CPT billing code 96110 or ICD-10 Z13.4. This covers the time a physician scores, reviews results, and interprets findings. Federal health reform law requires insurance plans to cover developmental and behavioral screenings at no cost to children. Medicaid (Medi-Cal) also covers screenings as part of children's preventive services.



# WHEN, WHERE, AND HOW TO REFER

## WHEN to REFER



WHEN A DEVELOPMENTAL DELAY IS SUSPECTED

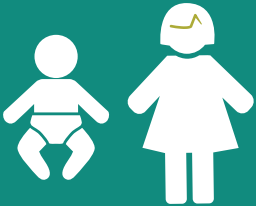


WHEN A CHILD SCREENS POSITIVE ON A VALIDATED SCREENING TOOL



WHEN A CHILD'S PARENT HAS A DEVELOPMENTAL DISABILITY

## WHERE to REFER DEPENDS ON THE AGE OF THE CHILD



BIRTH to 3 YEARS

### CALIFORNIA EARLY START PROGRAM

Coordinated through Regional Centers



3 YEARS to 5 YEARS

### LOCAL SCHOOL DISTRICT

Children with an eligible disability may qualify for special education services

### REGIONAL CENTER

Children with autism, cerebral palsy, epilepsy or intellectual disability may receive additional services through their Regional Center



BIRTH to 5 YEARS

### HELP ME GROW



Providing child development information, follow-up support, resource connections, outreach and care coordination

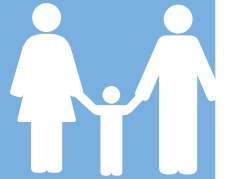
## HOW to REFER

**ANYONE** can refer to Early Start with parental consent for further evaluation



800-515-BABY [earlystart@dds.ca.gov](mailto:earlystart@dds.ca.gov)  
[www.dds.ca.gov/earlystart](http://www.dds.ca.gov/earlystart)

**PARENTS** must request an evaluation to determine eligibility



Contact the child's local school district office or SELPA

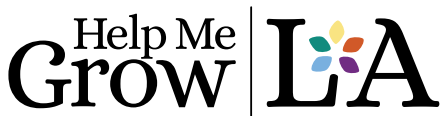
Visit [www.dds.ca.gov/RC](http://www.dds.ca.gov/RC) for Regional Center office locations

HMG LA locator: [bit.ly/3C9oe3c](https://bit.ly/3C9oe3c)

**ANYONE** may refer a family to Help Me Grow



Contact HMG LA:  
Call 833-903-3972  
or visit [HelpMeGrowLA.org](http://HelpMeGrowLA.org)



**Get connected:** Call 833.903.3972, visit [HelpMeGrowLA.org](http://HelpMeGrowLA.org), or ask your doctor for more information.