

EARLY HEAD START TIP SHEET

No. 6

What is the difference between screening and assessment?

Response:

There are simple yet significant differences between screening and assessment. Screening quickly captures a glimpse of a child's health and developmental status via the use of standardized screening instruments. Assessment is a continual process that occurs throughout a child's enrollment in EHS that tracks the child's developmental progress.

Screening consists of a brief process using standardized health screening and developmental screening instruments. Screening is used to make judgement(s) about children in order to determine if a referral for further evaluation is necessary. In Head Start, screening provides information on a child's physical and behavioral health and development.

Screening does not lead to a conclusion about whether a child has a developmental or health condition; however, the results of the assessment or evaluation done after the referral may lead to a diagnosis. The screening process begins during the enrollment period when the program builds partnerships with families and initiates Head Start services. It is the first opportunity to work together with the parents to learn more about the child and support the parent-child relationship.

Ongoing assessment continues throughout the child's enrollment and tracks how the child progresses over time. Ongoing assessment is a process that identifies the child's unique strengths and needs. It is used to determine what skills and information the child has and in what situations the child uses them. The assessment process also considers the next level of skills and information that the child should be acquiring. The assessment process utilizes multiple sources of information on all aspects of each child's development and behavior, including input from families, teachers, and other relevant staff who are familiar with the child's behavior. Ongoing assessment helps support staff in communicating and working with parents and families, planning and tailoring learning experiences (or individualizing the curriculum), and identifying other relevant services.

Considerations:

- How is the program's process of screening and referral based on sound child development and early childhood educational practice?
- How is the program's process of ongoing assessment based on sound child development and early childhood educational practice?
- How does the program respond to a child who, at the time of enrollment, has already been screened and referred or diagnosed with a disability or developmental concern?

- How are screening and ongoing assessment procedures sensitive to a child's cultural background?

Performance Standards, Title 45, Code of Federal Regulations:

- **1304.3(a)(1)(i) & (ii) & 1303.3 (a)(1)** Assessment means the ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility to identify: (i) The child's unique strengths and needs and the services appropriate to meet those needs; and (ii) The resources, priorities, and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their child.
- **1304.20(a)(1)(iii) & (iv)** Grantee and delegate agencies must obtain or arrange further diagnostic testing, examination, and treatment by an appropriate licensed or certified professional for each child with an observable, known or suspected health or developmental problem; and (iv) develop and implement a follow-up plan for any conditions identified in CFR 1304.20 (a)(1)(ii) & (iii) so that any needed treatment has begun.
- **1304.20(b)(1)** In collaboration with each child's parent, and within 45 calendar days of the child's entry into the program, grantee and delegate agencies must perform or obtain linguistically and age appropriate screening procedures to identify concerns regarding a child's developmental, sensory (visual and auditory), behavioral, motor, language, social, cognitive, perceptual, and emotional skills.
- **1304.20(b)(3)** Grantee and delegate agencies must utilize multiple sources of information of all aspects of each child's development and behavior, including input from family members, teachers, and other relevant staff who are familiar with the child's behavior.
- **1304.20(d)** Grantees and delegate agencies must implement ongoing procedures by which Early Head Start and Head Start staff can identify any new or recurring medical, dental, or developmental concerns so that they may quickly make appropriate referrals. These procedures must include: periodic observations and recording, as appropriate, of individual children's developmental progress, changes in physical appearance and emotional and behavioral patterns. In addition, these procedures must include observations from parents and staff.
- **1304.20(f)(1)** Grantee and delegate agencies must use the information from the screening for developmental, sensory, and behavioral concerns, the ongoing observations, medical and dental evaluations and treatments, and insights from the child's parents to help staff and parents determine how the program can best respond to each child's individual characteristics, strengths, and needs.

- **1304.20(f)(2)(i)** To support individualization for children with disabilities in their programs, grantee and delegate agencies must assure that services for infants and toddlers with disabilities and their families support the attainment of the expected outcomes contained in the Individualized Family Service Plan (IFSP) for children identified under the infants and toddlers with disabilities program (Part C) of the Individuals with Disabilities Education Act (IDEA), as implemented by their State or Tribal government.
- **1304.20(f)(2)(ii)** Enrolled families with infants and toddlers suspected of having a disability are promptly referred to the local early intervention agency designated by the State Part C plan to coordinate any needed evaluations, determine eligibility for Part C services, and coordinate the development of an IFSP for children determined to be eligible under the guidelines of that State's program. Grantee and delegate agencies must support parent participation in the evaluation and IFSP development process for infants and toddlers enrolled in their program.
- **1304.21(a)(1)(i)** Child development and education approach for all children...must be developmentally and linguistically appropriate, recognizing that children have individual rates of development as well as individual interests, temperaments, languages, cultural backgrounds, and learning styles.
- **1304.21 (a)(2)(ii)** Parents must be provided opportunities to increase their child observation skills and to share assessments with staff that will help plan the learning experiences.
- **1304.24(a)(1)(i)** Grantee and delegate agency must work collaboratively with parents by soliciting parental information, observations, and concerns about their child's mental health.
- **1304.3(a)(17)** Referral means directing an EHS or Head Start child or family member(s) to an appropriate source or resource for help, treatment or information.

Resources:

(February/March 2001) **Linking Assessment and Intervention.** Bulletin of ZERO TO THREE, Vol. 21, No. 4.

Screening and Assessment in Head Start. Head Start Bulletin
http://www.headstartinfo.org/publications/hsbulletin70/cont_70.htm

(2000) **Developmental Screening, Assessment, and Evaluation: Key Elements for Individualizing Curricula in Early Head Start Programs** Technical Assistance Paper No. 4 prepared by the Early Head Start National Resource Center.
<http://www.ehsnrc.org/pdf/files/FinalTAP.pdf>

Meisels, S. & Fenichel, E. Editors. (1996) **New Visions for the Developmental Assessment of Infants and Young Children.** ZERO TO THREE: Washington, DC.

(2001) *Developmental Surveillance and Screening of Infants and Young Children.* American Academy of Pediatrics, Vol. 108, No. 1, pp 192-196. Accessible via www.aap.org/policy/re0062.html

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The Tip Sheet is not a regulatory document. Its intent is to provide a basis for dialogue, clarification, and problem solving among the Head Start Bureau, Regional Offices, T & TA consultants, and grantees.