EARLY HEAD START TIP SHEET

No. 30

Screenings for Infant & Toddlers, July 2008

Do infant and toddler screenings need to be standardized?

Response:

The purpose of screening is to identify infants and toddlers who should be referred for evaluation for possible developmental, health, or sensory concerns. The Performance Standards do not require that a specific screening instrument or strategy be used. Rather, they require grantees to perform or obtain linguistically, culturally, and age-appropriate screening procedures.

Guidance (see box below) encourages the development of an overall systematic screening *approach* that is valid, reliable, and conforms to sound early childhood practice. Portions of the procedures may or may not involve a formal screening instrument. However, a standardized instrument, as one piece of the screening process, is a valuable device to organize and record observations and information related to the screening procedures.

Guidance from *Head Start Program Performance Standard* 1304.20(b)(1):

Standards do not require any particular strategy, instrument, or technique be used. Appropriate procedures, however, should conform to **sound early childhood practice** and be **valid**, measuring what they are suppose to measure, and **reliable**, yielding consistent results over time and across users.

Best practice

Standard 1304.20(b)(1) directs readers to 1308.6(b)(3) which defines developmental screening and further states that "when appropriate standardized developmental screening instruments exist, they must be used." Although the 1308 Standards are the requirements for providing special services for 3- through 5-year old children with disabilities enrolled in Head Start programs, it is beneficial to use this definition of screening when screening infants and toddlers.

Questions to Consider for Planning and Programming:

- How does the program determine appropriate and relevant screening procedures? What is the role of the Health Services Advisory Committee?
- How does the program identify appropriate standardized screening tools? How do they ensure that the tools are linguistically, culturally, and age-appropriate?
- How are staff trained to use the screening tools?
- How are staff trained/supported in the referral process? How do staff know when it is appropriate to refer a child for further evaluation?

Performance Standards, Title 45, Code of Federal Regulations:

• 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 (see 1308.6(b)(3) for additional information). To the greatest extent possible, these screening procedures must be sensitive to the child's cultural background.
- 1308.6(b)(3) Developmental screening is a brief check to identify children who need further evaluation to determine whether they may have disabilities. It provides information in three major developmental areas: visual/motor, language, and gross motor/body awareness for use along with observation data, parent reports and home visit information. When appropriate standardized developmental screening instruments exist, they must be used. The disabilities coordinator must coordinate with the health coordinator and staff who have the responsibility for implementing health screening and with the education staff who have the responsibility for implementing developmental screening.

Resources:

Early Head Start National Resource Center (EHS NRC). **Early Head Start Tip Sheets.** *The Early Childhood Learning and Knowledge Center.* DHHS/ACF/ACYF/HSB.

- 27: What Are 'Behavioral Skills' in Infants and Toddlers? How Do We Screen Them? October 2007.
- 6: What is the Difference Between Screening and Assessment? March 2003.

EHS NRC. Technical Assistance Paper, 4: Developmental Screening, Assessment, and Evaluation: Key elements for individualizing curricula in Early Head Start Programs. DHHS/ACF/ACYF/HSB. 2000.

Policy Clarifications: B – Health, Nutrition and Mental Health. *The Early Childhood Learning and Knowledge Center.* DHHS/ACF/OHS.

07/08

This Tip Sheet is not a regulatory document. Its intent is to provide a basis for dialogue, clarification, and problem solving among Office of Head Start, Regional Offices, TA consultants, and grantees. If you need further clarification on Head Start Policies and regulations, please contact your Regional Program Specialist.