

# Social and Emotional Screening for Infants, Toddlers, and Preschoolers in Colorado

Summary of Recommendations from Colorado Workgroups • October 13, 2004

## Kelly Stainback-Tracy, Editor A collaborative effort including:

• Project BLOOM, Colorado Department of Human Services and JFK Partners, University of Colorado Sciences Center

Claudia Zundel, Principal Investigator Corry Robinson, Co-Principal Investigator Sarah Davidon, Project Director Kelly Stainback-Tracy, Training and Technical Assistance Coordinator

- Harambe, University of Colorado at Denver Laurie Beckel, Project Director
- Kid Connects, Colorado Department of Human Services, Division of Mental Health

Tracy Kraft-Tharp, Project Specialist

### EXECUTIVE SUMMARY

#### **Purpose**

Social and emotional screening is an important component of a comprehensive early childhood mental health system of care. In September 2003, Project BLOOM, Harambe and Kid Connects convened a group of stakeholders to discuss and make recommendations about screening tools, practices, and resources needed to support social and emotional screening in Colorado. This report summarizes the findings and recommendations of the project and suggests policy strategies to support the implementation of social and emotional screening in three settings: early care and education, Child Find, and primary care.

# Recommendations Early Care and Education

The early care and education workgroup recommended the Devereux Early Childhood Assessment (DECA) and the Ages and Stages Questionnaire – Social-Emotional (for children under two years old) for providing social and emotional screening in early care and education settings. The workgroup emphasized the need for tools used in this setting to include intervention strategies to support teachers in caring for children with social and emotional challenges in the classroom. Because of varying degrees of educational background and experience among early care and education providers, the workgroup also emphasized the need for appropriate training and supports to assist early care and education professionals in implementing a social and emotional screening program. Recommended supports include training on using the screening tools and implementing classroom strategies. Equally important is the availability of ongoing consultation from a mental health clinician or an early childhood educator with expertise in social, emotional, and behavioral development to assist with implementation of screening and intervention strategies.

#### Child Find

In Colorado, Child Find is responsible for the screening, evaluation, and assessment services required by the Individuals with Disabilities Education Act (IDEA). The Child Find workgroup recommended Temperament and Atypical Behavior Rating Scale (TABS) Screener, Brief Infant Toddler Social-emotional Assessment (BITSEA), and the Ages and Stages Questionnaire – Social-Emotional for use by Child Find teams. The workgroup considered these parent report tools appropriate for Child Find teams because they allow the team to gather information from parents about the child's typical behavior, which may be different than the "snapshot" observed by the provider during the screening process. Recommended training and supports include training in the use of the screening tools, including interpreting and integrating the results with other information gathered during the screening process, and the creation of learning opportunities among self-selected Child Find teams implementing the use of social-emotional screening tools.

#### **Primary Care**

The primary care workgroup recommended the Parents' Evaluation of Developmental Status (PEDS), Ages and Stages Questionnaires; Social-Emotional (ASQ:SE) and the Family Psychosocial Screener for use in primary care settings. The workgroup determined that successful implementation of social-emotional screening in primary care required tools that could be completed by the parent while in the waiting room, are relatively quick to administer and interpret, and provide an indication of what is needed next, such as anticipatory guidance, a more in-depth screen, or referral for evaluation. Training and support recommendations emphasized the need to include the entire practice in training on implementing and interpreting screening tools, since all staff members may be involved in some component of implementation. In addition, the workgroup recommended that social-emotional screening through primary care be developed in context with other screening resources in the community and that training include information on community resources available for children identified as needing further evaluation.

#### **Policy Implications**

Social and emotional screening can be a first step in ensuring that young children with social-emotional concerns receive the early interventions that may improve their later success in school and in life. However, barriers to implementing social-emotional screening exist across settings, including lack of expertise or training in social-emotional development or identification of social and emotional concerns, lack of time or reimbursement for implementing social and emotional screening, and lack of resources to provide evaluation or ongoing intervention services to children identified through screening. As a result, policy changes across early childhood programs, Child Find, primary care, mental health, and community-level early childhood systems are needed to assure that social-emotional screening leads to appropriate intervention and improved outcomes for children and families.

#### Policy Strategies to Support Social Emotional Screening in Colorado

#### **Early Care and Education**

Adopt the Head Start and Early Head Start Performance Standards related to developmental and social-emotional screening for child care program receiving dollars through publicly funded child care or preschool programs.

#### **Child Find:**

Include social-emotional screening as a component of a comprehensive screening process in Child Find Screening Guidelines.

#### Primary Care (Including Public Health, Health Care Policy and Finance, and Professional Organizations)

Advocate for adequate third-party payer reimbursement for the implementation of a developmental and social-emotional screening.

Incorporate social-emotional screening as a part of the medical home concept and include availability of care coordination to provide follow-up when referrals are needed.

#### Mental Health:

Assure that the delivery of services to very young children with social-emotional problems and their families is a high priority of Colorado's mental health system.

Deliver early childhood mental health consultation in early childhood settings including early childhood programs, Child Find teams, and primary care through the mental health centers and community providers.

Provide community education/social marketing related to the social-emotional development of young children, the importance of early intervention, and where to access resources.

#### **Community-Level Early Childhood Systems:**

Coordinate and integrate local social and emotional screening efforts across early childhood programs, Child Find, primary care, and other relevant early childhood settings in the community.