DEVELOPMENTAL SCREENING USING THE ASQ-3™ AND THE ASQ :SE-2™

Tips and Strategies for Preparation, Communication and Partnerships
HOW TO USE THIS RESOURCE

Developmental and social-emotional screenings are an important tool used to support children’s healthy development. Screenings allow parents/guardians and professionals to see where children are developing well and identify areas of development where they may need support.

This resource is to be used by professionals who conduct developmental and social-emotional screens on children. This resource is not intended to replace foundational training on how to conduct the Ages and Stages Questionnaires (ASQ)®. Please seek out formal training from experts prior to conducting any screens with families and children. See Foundational Training card for more information.

This resource was created specifically for the ASQ-3™ and ASQ:SE-2™. However, many of the tips and sentiments in this document can be applied to older versions of the ASQ if you do not have access to the most up to date version. Just be aware of differences from one version to another (e.g. scoring methods, wording of questions).

If you would like to reorder these cards please contact OCDcomm@pitt.edu.

Thank you for the important work you do supporting children and families!

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Where to get Foundational Training

If you have never been trained, please consider taking a foundational course. These courses can be found by accessing the PA Keys to Quality Professional Development Registry. Search for trainings using ASQ as the keyword. Trainings are offered on a regular basis both in person and online.

PA Keys to Quality Professional Development Registry: www.papdregistry.org
Best Practice Recommendations on Implementation

After initial training, make sure you are observed in delivering a screening to ensure you understood the training content.

It is helpful to receive feedback on your screening practices on an on-going basis to improve your method. Watch a booster session every two years or have someone watch you complete an assessment.

If a new ASQ tool is released, you should be trained and prepared to use the new tool within a year. Refer to Brookes Publishing for updated training tools and guides.

Brookes Publishing Screening and Assessments:

www.brookespublishing.com/screening-assessments/
BEFORE YOU SCREEN

Before going into your screening, review the following guidelines and recommendations.
BEFORE YOU SCREEN

Refresh your Knowledge

Revisit your knowledge on developmental milestones so you can converse with the family about milestones on which a child has or has not made progress.

CDC Developmental Milestones:
www.cdc.gov/ncbddd/actearly/milestones/index.html

Be sure to select the right tool. The ASQ-3 is focused on developmental progress. The ASQ:SE-2 is for early detection of social-emotional challenges.

Review the ASQ scoring guidelines. Remember to adjust if the baby was born three or more weeks prematurely up to the child’s second birthday.

ASQ Age Calculator:
www.agesandstages.com/free-resources/asq-calculator/
BEFORE YOU SCREEN

Talking with Families

Prepare for how you might handle a conversation with families in general or when you have to share concerns. One way to do this is by practicing aloud in advance of the screening.

Talk with the family prior to the date of the screen to explain the process for screening. The ASQ is used to identify strengths and concerns in social-emotional and developmental domains.

Talk about what the different domains of child development mean using simple terms if you will be doing the ASQ-3.

Key Messages:

• Explain that screening helps ensure a child’s development is on schedule.
• Explain how the screen is conducted and scored (not a pass/fail test).
• Explain that other family members are welcome to participate.

CDC Tips for Talking with Parents:
Before you screen

Gather Information from the Family

Identify if additional children, like siblings, will accompany the family when you are screening. Plan accordingly to keep the children occupied with toys, books or other activities. This will allow the family to participate fully in the screening.

Identify if any family members require special support to participate fully in the screening. This might include:

- Sign language interpreter
- Verbal/written materials in braille or other languages

Take time to learn about any cultural expectations or norms before you visit the family’s home. Make sure to respect these norms.

Make sure you have an accurate date of birth and, if not a full term birth, number of weeks premature.
BEFORE YOU SCREEN

Gather Information from the Family cont.

Identify if the family needs interpretation. Even if the family understands and speaks English, they may need help with concepts as they participate in the screen. If the questionnaire is translated this is not a substitute for an interpreter.

1. Explain to the family that interpretation services are free of charge.

2. Find out the language(s) spoken at home. Sometimes families speak multiple languages. Identify their preferred language and dialect.

3. Find out if the family has specific requirements regarding interpretation. Some questions you might ask are:
   • Do they prefer the interpreter to be a certain gender?
   • Are there any interpreters or agencies family does not feel comfortable with?
   • Is there someone they have used in the past?
BEFORE YOU SCREEN

Family Language Interpretation

*If an interpreter is needed,* find out the rules and process your organization has to hire interpreters:

- Find out if your organization has a process in place for families who refused interpretation and identify alternative strategies to allow families to participate in the screening. *Children or teenagers should not be used as interpreters for screening.*
- If you have never worked with an interpreter, seek the advice of an experienced team member in order to ensure you understand what kind of cultural/linguistic accommodations you may need to make during the ASQ.
- Schedule extra time for the screen. Working with an interpreter will likely double the time the screen would take otherwise.
- Remember to note on the ASQ the names of people assisting in questionnaire completion.

*Keep in Mind…*

All agencies are required by law to provide interpretation for Limited English Proficient Individuals (Title VI of the Civil Rights Act of 1964)
Prepare with an Interpreter

Before you meet with the interpreter, identify any terms or concepts that may be difficult to interpret. If your interpreter is new to the ASQ and/or early childhood development, make sure they have access to the assessment in advance and provide ample background regarding the objectives of the ASQ.

Review the ASQ tool with the interpreter. Inform the interpreter about the objectives of the screen and concepts that may be difficult to interpret. If there is not an exact translation for a word or concept, work with the interpreter to come up with an appropriate explanation of the word or concept.

Discuss and agree upon specific guidelines about the interpreter’s role during the screening.

Learn about common perceptions in the families’ culture about health, child development, and roles of parents, family members and service providers.

Keep in Mind...
Interpreters and Translators are not the same. Translators work with written words and interpreters use speech or sign language.
BEFORE YOU SCREEN

Prepare with an Interpreter cont.

Ensure you have the interpreter’s telephone number in order to coordinate any last minute arrangements.

Consider having the interpreter call the family a few hours prior to the appointment to remind them you will be coming.

Prepare to take frequent breaks during the screen so the interpreter can explain what you are saying.

Review recommendations and guidelines on how to screen children from diverse backgrounds.

ASQ Tips for Screening Children from Diverse Cultures:  
www.agesandstages.com/free-resources/articles/tips-screening-children-diverse-cultures/

Review recommendations for using an interpreter during an ASQ Screening.

ASQ Using an Interpreter:  
www.agesandstages.com/free-resources/articles/best-practices-for-using-an-interpreter-for-asq-completion/
BEFORE YOU SCREEN

What to Bring

Take two copies of the appropriate screening tool so the family can follow along.

If you have a translated copy of the screening tool, make sure to bring it with you.

Take the appropriate kit for the screen(s) you are doing. It is also helpful to think ahead of time about materials that may already be available in the home and will be familiar to the child.

Have a method available to record the family’s concerns or questions. You may also want to offer paper to the interpreter to take notes in the family’s first language.

It is recommend to have the child’s most recent health assessment on hand if it is available.
DURING THE SCREEN

Keep in mind the following tips and recommendations during the screening process.
DURING THE SCREEN

Setting the Stage with the Family

Begin by reviewing the tools you will be using. Give the family their own copy and encourage them to take notes if they would like.

Use positive language when describing the tool and the intent of the screen.

Make sure the family understands that the information is confidential and they are not forced to answer a question if it makes them uncomfortable.

Be mindful of the families' literacy level. Ask families how they would like the information to be presented. For example, you might say, "I have copies of the questionnaires so you can review them as we go along. Some people prefer me to read the questions out loud. What would work best for you?"
Setting the Stage with the Family cont.

Explain that the questions in each section of the ASQ-3 are to build on skills in each of the developmental areas.

If you are doing the ASQ:SE-2, explain to the family that social competence skills enable a child to have positive experiences with others while emotional competence questions ask about the ability of a child to regulate emotions effectively in order to accomplish goals.

Inform the family that the tool is made to assess children from one month to 5 ½ years old. Because of this, a child that is at the starting age range for a questionnaire may not have as many “yes” responses as those toward the end of the age range, given the rapid changes that can happen in child development in the early years of life. Remind the family it is okay if a child can do some, but not all of the skills.
Setting the Stage with an Interpreter

If an interpreter is present, allow the interpreter to introduce themselves to the family. Dedicate the first 10 to 15 minutes to building rapport with the family.

Make sure you are looking at the family member to whom you are speaking, not at the interpreter, when you are addressing the family and/or child. It is recommended that you sit in a triangle formation with the interpreter seated to the side.

Remember that the interpreter does more than just translate words from one language to another. Interpreters can provide valuable support when it comes to conveying key concepts and making the family feel comfortable.
Working with the Family

Remember that families know their child best and are their best advocate. Encourage and support this idea.

If a family member isn’t sure how to answer a question on the ASQ-3, encourage them to have the child try and demonstrate the skill while you are sitting together.

Help families determine the most appropriate answer by trying to distinguish whether a child cannot or will not do certain activities. Encourage families to answer based on the child’s usual behavior, not how the child acts when they are tired or sick.

Explain the meanings of different responses from which families have to choose.

Be available for help, but do not answer questions for the family.

Sometimes, a family member who appears to be overstating concerns may really be in need of support themselves. Always be prepared to offer resources that can support families, as well as those that support children. Remember that, at this young age, healthy relationships are key.
DURING THE SCREEN

Working with the Family cont.

Ask families about behavioral and social expectations for their child that may be culturally based.

*Keep in mind...*

Culture influences development. An apparent delay based on different cultural norms may not be a delay at all, but a reflection of expectations. For example, in some cultures, it is not typical for children to make eye contact with adults. If a child does not make eye contact with you, it may be a sign of a developmental delay, but it may also be the result of a cultural norm.

Be careful of your own cultural biases when assessing.
Building Information

Keep building on information you gather as you work through the activities.

In communicating with the family, always:
• Recognize and reinforce their knowledge
• Explain why the skill is important
• Emphasize the child’s strengths
• If you are using an interpreter, ALWAYS address questions and conversation to the family member, NOT to the interpreter
DURING THE SCREEN

Scoring for the ASQ-3

Remember:

- **Yes = 10 points** — child is performing the skill
- **Sometimes = 5 points** — child is just beginning to perform the skill
- **Not Yet = 0 points** — child is not yet performing the skill

Occasionally, items may not be appropriate in a cultural context. In these instances, you may skip scoring this item. Instructions on how to score when an item has been skipped can be found in the ASQ-3 Quick Start Guide.


Statistically derived cut-off scores (two standard deviations below the average score) represent the beginning of the black shaded area on the Information Summary sheet. If a score in any area is in the black shaded area, the child should be referred for further assessment.

Although the questions answered in the Overall Section are not scored, concerns mentioned in this section should be discussed with the family and included with consideration of the total score and referral options. Overall items provide important information concerning speech/articulation and other health-based concerns.
DURING THE SCREEN

Scoring for the ASQ:SE-2

Remember:

• **Z=0 points** – child does the behavior often or always
• **V=5 points** – child does the behavior sometimes, but not consistently
• **X=10 points** – child does the behavior rarely, or has never done it
• **Concern=5 points** added to the item

As with the ASQ-3, items may not be appropriate in a cultural context. In these instances, you may skip scoring this item. Instructions on how to score when an item has been skipped can be found in the ASQ:SE-2 Quick Start Guide.


As you transfer scores to the Information Summary sheet, a score on or higher than the cutoff point indicates that a referral for further evaluation may be necessary.

The open-ended Overall questions are not scored, but can serve as a springboard for discussion with families.
Once the screen itself is over, there are a number of recommendations that you should consider to ensure the family has the best possible experience.
AFTER THE SCREEN

Preparing to Share Results and Recommendations

Always double check your results to be sure everything is filled out and transfer answers to the Information Summary sheet.

Develop an outline of the key points that you want to review with the family using language they will understand.

Remember the importance of guiding the family on how to comprehend the information shared on the Information Summary sheet.

Have potential resources prepared to share, such as referrals, further evaluation, and support by way of Early Intervention provider.
AFTER THE SCREEN

Scoring and Referral Considerations

While reviewing ASQ scores and considering referral options keep in mind:

• A child’s health and health history,
• Cultural factors and language(s) spoken in home
• Concerns from the family
• Environmental factors such as opportunities to practice skills

A child may be referred for a re-screen or an in-depth assessment for scores in the monitoring area, or if the family has indicated any overall concerns.
Reviewing the Results of the ASQ with Families

Consider the setting and time of the behaviors that may have caused a child’s score to be high.

If a child goes to child care, it may be useful to have child care staff who know the child well and work with them often complete an ASQ:SE-2, as well to see if the child’s behavior is the same at child care and home.

Prepare for emotional responses from the family and acknowledge their responses and concerns.

As previously mentioned, staff should consider factors that can impact a child’s behavior when considering whether a referral for diagnostic evaluation should be made. For example, children who act out only at certain times of day might suffer from low blood sugar. Knowing a child and family’s health history can help guide prudent next steps.
AFTER THE SCREEN

What to do When the Child’s Results Show Development is on Schedule

Some scores, even if not at risk, can identify areas of the child’s development that can be targeted in everyday ways.

• Remind families that monitoring a child’s development should be ongoing in the home, in child care settings, and elsewhere.
• Give families materials that describe their child’s next developmental level.
• Use the screening results to talk about the child’s strengths and challenges.
• If you are still concerned about a child’s development after a low risk or no risk screen, speak with the family and ask them to share your concerns with their child’s primary health care provider, who may administer another test or refer the child to a specialist who can do a more thorough evaluation.

Resources:
• CSEFEL Practical Strategies (csefel.vanderbilt.edu/resources/strategies.html)
• CSEFEL Family Tools (csefel.vanderbilt.edu/resources/family.html)
Sharing Results and Recommendations

Review all answers with the family, paying particular attention to items that they indicated were an issue of concern for them.

Always lead with strengths:
• In the family-child relationship
• Of the family’s knowledge and/or interactions
• The child’s abilities

Then, if possible, help family members come to conclusions on their own. Ask them what they wonder or want to know more about their child. You can review the areas where you’ve observed a child may need more practice or support.

If the score suggests a referral for evaluation is appropriate, remind the family they are in control and that by taking a next step of evaluation, they might find relief about questions they’ve been worried about.
AFTER THE SCREEN

Discussing Next Steps

Results and next steps should be talked about in person or over the phone, not by email. This helps to maintain privacy and confidentiality.

Talk about resources and follow up options – rescreening is common.

Remind families that the Information Summary sheet can be shared with healthcare professionals.


ADDitional resources

- Administration for Children and Families Birth to 5: Watch Me Thrive (www.acf.hhs.gov/ecd/child-health-development/watch-me-thrive)
- Ages and Stages Questionnaires® by Brookes Publishing Company (www.agesandstages.com/free-resources/)
- Allegheny Intermediate Unit 3 DART Program Early Intervention Services for children 3 to 5 years old (www.aiu3.net/site/Default.aspx?PageID=1216) (412-394-5904)
- The Alliance for Infants and Toddlers (www.afit.org) (412-885-6000)
- ASQ Trainings (www.agesandstages.com/products-services/training)
- The Autism Center of Pittsburgh (www.autismcenterofpittsburgh.com)
- Center for Disease Control developmental resources (www.cdc.gov/ncbddd/actearly/)
- CONNECT Helpline (www.papromiseforchildren.org) (1-877-692-7288)
- PA Early Intervention Technical Assistance Online Learning Portal (www.eita-pa.org)
- Pittsburgh Public Schools has its own intermediate unit that provides early intervention for children ages 3 to 5 with educational needs within the district (412-529-4000) (https://www.pghschools.org/domain/1333)
- Zero to Three (www.zerotothree.org/early-development/ages-and-stages)

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REFERENCES


