



OFFICE OF CHILDREN, YOUTH AND FAMILIES BULLETIN

COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE

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SUBJECT:

Developmental Evaluation and Early Intervention Referral Policy

BY:

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SCOPE:

COUNTY CHILDREN AND YOUTH SOCIAL SERVICE ADMINISTRATORS
COUNTY CHILDREN AND YOUTH ADVISORY COMMITTEES
PRIVATE CHILDREN AND YOUTH SOCIAL SERVICE AGENCIES
EARLY INTERVENTION SERVICE COORDINATORS
EARLY INTERVENTION PROGRAM DIRECTORS
BASE SERVICE UNIT DIRECTORS
COUNTY CHILDREN AND YOUTH FISCAL OFFICERS

PURPOSE:

The purpose of this bulletin is to transmit to public and private children and youth agencies the requirements of a new policy being implemented by the Department of Public Welfare (DPW) to comply with The Child Abuse Prevention and Treatment Act (CAPTA). Under CAPTA, DPW must develop a procedure to refer, for early intervention services, children under age three who live in Pennsylvania, and who have been subjects of substantiated reports of child abuse/neglect that occurred in Pennsylvania. In addition to children who meet that criteria, DPW recommends that all children under age five, who are accepted for service by the child welfare system, be evaluated for possible referral for early intervention services.

BACKGROUND:

Last year, for the first time, Pennsylvania qualified for federal monies through compliance with CAPTA. CAPTA is a federal law under which qualifying states may obtain grants for a variety of training and programs for the prevention, treatment and investigation of child abuse and neglect. As part of Pennsylvania's compliance, the Department was required to develop a Program Improvement Plan to insure rectification of existing discrepancies between Pennsylvania's law and policies, and Federal law. Together with a stakeholder work group comprised of county children and youth agencies, private providers, families, child advocates, Hospital Association Providers (HAP), the Juvenile Court Judges' Commission (JCJC), the Department of Health (DOH) and other Department of Public Welfare program offices, the Department spear-headed an initiative designed to address the

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

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affected concerns and, on November 9, 2006, Governor Edward G. Rendell signed Act 146 of 2006, incorporating the needed changes, into law. This Act amends the Adoption Act and the Child Protective Services Law by adding language to bring Pennsylvania statutes into compliance with CAPTA.

This policy bulletin is concerned only with one discrete aspect of Pennsylvania's compliance plan in regard to developmental screening.

DEFINITIONS:

The following terms used in this bulletin have these meanings:

Age of beginners – the minimum age established by the school district board of directors for admission to the district's first grade under 22 Pa Code, § 11.15 (relating to admission of beginners).

Developmental areas – communication, gross and fine motor skills, problem-solving and personal-social.

Developmental delay – an assessment that an infant, toddler or eligible young child has scored below the child's chronological age on a qualifying evaluation tool in one or more developmental areas; in Pennsylvania, this term applies only to pre-school children.

Early intervention services – services designed to meet the developmental needs of an infant, toddler or eligible young child, and the needs of the child's family related to enhancing the child's development in one or more developmental areas; also, as defined in the Early Intervention Services Act (1990-212).

Eligible young child - a child younger than the age of beginners and at least 3 years of age.

Qualifying score – any score that lands in the shaded area of the scoring grid for each of the age-specific questionnaires of the ASQ/ASQ-SE assessment tools.

Substantiated abuse/neglect – a case finding of 'indicated' or 'founded', based on investigation of a registered ChildLine report.

DISCUSSION:

Per Federal law, Section 106 (b) (2) (A) (xxi) of CAPTA requires that states have "provision and procedures for referral of a child under age 3 who is involved in a substantiated case of child abuse or neglect to early intervention services funded under part C of the Individuals with Disability Education Act". DPW, in fact, recommends expansion of the parameters of this federal statute to include all preschool children up to age 5, (60 months), who are served by the child welfare system, including General Protective Services (GPS) cases and children placed in substitute care. The vulnerability of this age group is illustrated by these statistics from the 2007 Annual Child Abuse Report: of the 6,157 substantiated abuse injuries in Pennsylvania, 1,209 involved children under age five; 35 of the 46 child deaths from substantiated abuse were children under the age of five.

While there is no specific language in Act 146 that would mandate evaluations of preschool subjects of substantiated abuse/neglect reports, one goal of DPW's Program Improvement Plan (PIP) from the previous Child and Family Service Review (CSFR) was to 'adequately assess the needs of children ... to match the services to these needs'. Moreover, expanding the age group will enhance the agency's accountability factor when the citizen review panels created by Act 146 examine, in effect, how local child protection agencies discharge their responsibilities to protect children. Part of that duty to protect entails mitigating the effects of abuse and neglect, not only by reducing recurrence through intervention, but also by ensuring that a child is not further harmed by the potential deleterious effects of abuse and neglect on normal development.

One tangible measure of service accountability for the citizen review panel to note would be how many children received evaluations for evidence of possible developmental delays resulting from their exposure to the factors that precipitated children and youth involvement, and how many referrals for early intervention services were made. Given the high correlation between a history of child abuse and neglect and the development of delays in normal childhood milestone achievement, a policy of required and recommended evaluation and referral seems to be a reasonable extension of DPW's duty to protect Pennsylvania children.

Additionally, the establishment of a policy and procedure to ensure the execution of these evaluations and subsequent referrals also maintains Pennsylvania's CAPTA compliance.

With this upper age limit in mind, DPW searched for a tool that would not only effectively screen a wider age range than that stipulated in CAPTA, but would also assure ease of use. The tools determined to best fit these needs were the Ages and Stages (ASQ) and Ages and Stages – Social and Emotional (ASQ – SE) Questionnaires. While not diagnostic tools, these sets of questionnaires are designed to monitor and to screen the development of infants and young children, aged 4 months to 60 months, when their developmental status may be in question or at risk. The tool was developed by the University of Oregon in the 1980's. It targets development in areas of communication, gross and fine motor skills, problem-solving and personal-social. Endorsed by the American Academy of Pediatrics, the tool is relatively inexpensive, culturally versatile and easy for parents or caretakers to use; it is available in English and Spanish, as well as French and Korean. Each questionnaire takes approximately 10-20 minutes for the parent or caretaker to complete, and 2-3 minutes for the professional to score. The process provides an excellent forum for family engagement and an opportunity for parent education about developmental milestones and appropriate expectations of children at various ages.

The Department has purchased the ASQ and ASQ – SE tool packages for public and private children and youth social service agencies. The package materials may be photocopied at no extra charge. Initial training on the use of the tool scoring system will be provided in each region by the Office of Children, Youth and Families (OCYF) staff in partnership with The Office of Child Development and Early Learning (OCDEL). Ongoing training will be available thereafter through the Pennsylvania Child Welfare Training Program (CWTP).

POLICY AND PROCEDURES:

Following initial training on the tool which will occur in April and May of 2008, individuals who attend the training will be expected to train staff at their respective agencies on the use of the tool. Full implementation is to begin September 1, 2008 and from that date forward, county children and

youth social service agencies must insure that all children, under age 3, who live in Pennsylvania, and who have been the subject of a substantiated report of child abuse/neglect in Pennsylvania, will receive a developmental screening through the use of the most age-appropriate ASQ and ASQ – SE questionnaires. DPW strongly recommends that this policy be applied also to any child, under age 5, who becomes an open Child Protective Services (CPS), GPS, or out-of-home placement case with the county children and youth agency. The initial screening is to take place within 30 days of the acceptance of the case for services.

The screening questionnaire will be completed by the county children and youth worker, or by a private agency worker at the request of the county children and youth agency, with the parent's or caretaker's assistance, or by the parent or caretaker with on-site guidance by the trained public or private agency worker. Counties that already use Early Intervention or another provider to conduct screening and evaluation of this population may continue to do so. If the provider conducts a screening, they must use the Ages and Stages tools. If the provider does not do a screen, but conducts a full evaluation, this would be acceptable as well. Agencies must be sure to obtain copies of the screens, evaluations and results to maintain in the record. While the questionnaire is designed with parent completion in mind, the professional working with the family will need to assess the most efficient and expeditious use of time, keeping timely referrals for possible needed services as a priority. The questionnaires will be scored by a worker who has completed the training on use of the ASQ and ASQ – SE scoring tools.

If the results of the screening indicate that the child has a qualifying score, meaning a score that falls within the shaded area on the scoring grid, the county children and youth agency worker will, for in-home cases, cause a referral to be made for early intervention services for the child. For those in-home cases involving children under age 3, who are victims of a substantiated abuse report, the county worker will ensure that any recommended services are made available and accessible to the child and the child's family. For children in the care and custody of the county children and youth agency, the county worker will ensure that a referral is made and, for those children under age three who are victims of substantiated abuse reports, the worker will ensure that the recommended services are delivered and received. Documentation of the provision of recommended services should appear in the child's record, as well as a copy of the Individualized Family Service Plan (IFSP).

For children not in the care and custody of the county children and youth agency, the worker must document that the child's parent or caretaker was provided with both verbal and written recommendations for an early intervention referral and its potential benefits to the child, with both verbal and written statements of the agency's availability to refer to and facilitate services and, also, with a list of accessible agencies and phone numbers if the parent or caretaker prefers self-referral. If self-referral is chosen, the parent or caretaker will be instructed to notify the caseworker of the referral appointment made to their chosen service provider within a specified period of time, not to exceed two weeks of the documentation date. If there is no notification and/or no confirmed appointment, and the child is under age three and a victim of substantiated abuse, the caseworker will make the referral and facilitate the evaluation process.

When the initial ASQ or ASQ-SE screening by a worker, or by a parent/caretaker, does not result in a score that would mandate an early intervention referral, it is required that follow-up periodic screenings, at the frequencies prescribed below, be done on children, age 0-3, who have been the

subjects of a substantiated report of child abuse/neglect, until they turn age 5, provided they remain an open case with the agency until that time. DPW strongly recommends that such follow-up periodic screenings also be done on all other children who become open cases with children and youth, until they turn age 5. If any required or recommended follow-up screening shows a qualifying score, a referral must be made for early intervention services.

Both ASQ and ASQ-SE have a series of questionnaires to be administered at set intervals to target developmental milestones. The periodicity increases the likelihood that a possible delay will be 'caught', allowing a child the opportunity for early intervention to mitigate the effects of the particular delay. Evidence of some types of delay is subtle, and may be missed by pediatricians and other child health professionals. As it is estimated that 1 in 6 children has a developmental delay, learning disability, behavioral or social or emotional problem, and that only 20-30% of these are identified prior to the start of schooling, screening becomes critical. Use of a reliable and extensively researched tool, such as ASQ, can identify up to 70-80% of possible developmental concerns.

The screening questionnaire intervals available for ASQ are as follows:

- Ages 4 – 24 months, every two months, (4, 6, 8, 10, 12, 14, 16, 18, 20, 22, 24)
- Ages 24 – 36 months, every three months, (24, 27, 30, 33, 36)
- Ages 36 – 60 months, every six months (36, 42, 48, 60)

The intervals for ASQ-SE:

- Ages 6 – 60 months, every six months (6, 12, 18, 24, 30, 36, 42, 48, 54, 60)

For those children under age 3, who were victims of substantiated abuse and whose initial screening score did not mandate a referral for early intervention services, DPW is requiring follow-up screening at the frequencies described below, using the most age-appropriate ASQ and ASQ-SE questionnaires from the interval schedule listed immediately above:

- Ages 4-24 months: ASQ 3 times a year/ASQ-SE 1 time a year, required
- Ages 24-36 months: ASQ 2 times a year/ASQ-SE 1 time a year, required
- Ages 36-60 months: ASQ and ASQ-SE both, 1 time each year, recommended

It is ultimately the agency's responsibility to insure that all children under the age of 3, who have been the victim of a substantiated case of abuse/neglect are screened and, then, referred for early intervention services, if needed, based on any qualifying score, and regardless of whether they are in placement or still at home. Further, DPW is strongly suggesting that this requirement be extended to include all children, under age 5, who are accepted for services. While DPW is not requiring that this screening and referral policy be applied retroactively to children currently open with the agency, it is suggested that screening and appropriate referrals of children under age 5, be completed at the time of the child's or family's service plan review.