



American Academy of Pediatrics
North Dakota Chapter
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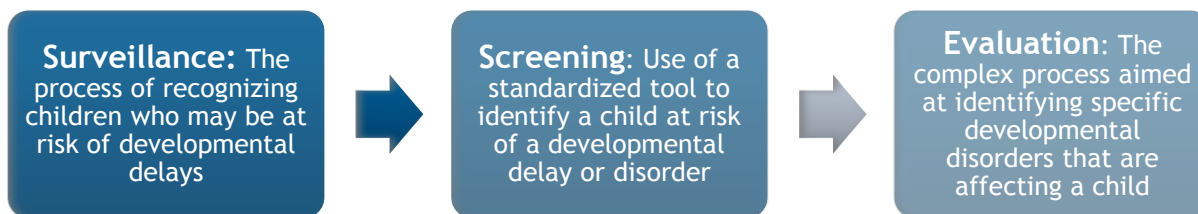
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Comprehensive Developmental and Social-Emotional Developmental Screening Recommendations for North Dakota Medical Providers

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American Academy of Pediatrics Recommendations on Developmental Monitoring

The American Academy of Pediatrics recommends regular surveillance at all Preventative Care Visits with structured screening if surveillance demonstrates risk, as well as uniform screening at the Preventative Care Visits at 9 months, 18 months, and 30 months (24 months if 30 month visit cannot be ensured). In addition, Autism Screening is recommended at the 18 and 24 month visits. Finally, post-partum depression screening is recommended at all Preventative Care Visits in the first 6 months of life. « *The AAP strongly endorses the use of properly standardized, reliable (>80%), well-validated, and accurate (sensitivity and specificity > 70%) screening instruments for the early identification of developmental and behavioral problems. However, highly accurate practitioner-administered instruments often possess undesirable feasibility characteristics for busy primary care settings. Suboptimal feasibility lowers screening tool completion rates. Lower completion rates logically hinder early detection rates because early detection is more apt to rely on more subjective, unstructured surveillance instead of psychometrically sound screens.* »



Surveillance: Identify those who should be screened or evaluated.

The 5 Components:


- 1.) Eliciting and attending to parental concerns,
- 2.) Documenting and maintaining developmental history,
- 3.) Making accurate observations of the child,
- 4.) Identifying risk and protective factors, and
- 5.) Promotion of Developmental/Behavioral Wellness.

Screening: Identify those who should receive comprehensive diagnostic evaluation. No single standardized tool is recommended by the AAP. Developmental Screening is recommended at 9 months, 18 months, and 30 month preventative care visits (24 months if no 30 month visit can be secured).

Developmental Screening should include:

- 1.) Gross Motor,
- 2.) Fine Motor,
- 3.) Speech/Language, and
- 4.) Social Emotional Components.

Screening for Postpartum Depression is recommended at 1 month, 2 month, 4 month, and 6 month Preventative Care Visits. Autism Screening is recommended at 18 month and 24 month Preventative Health Visit.



If screenings are concerning, referrals should occur in a:

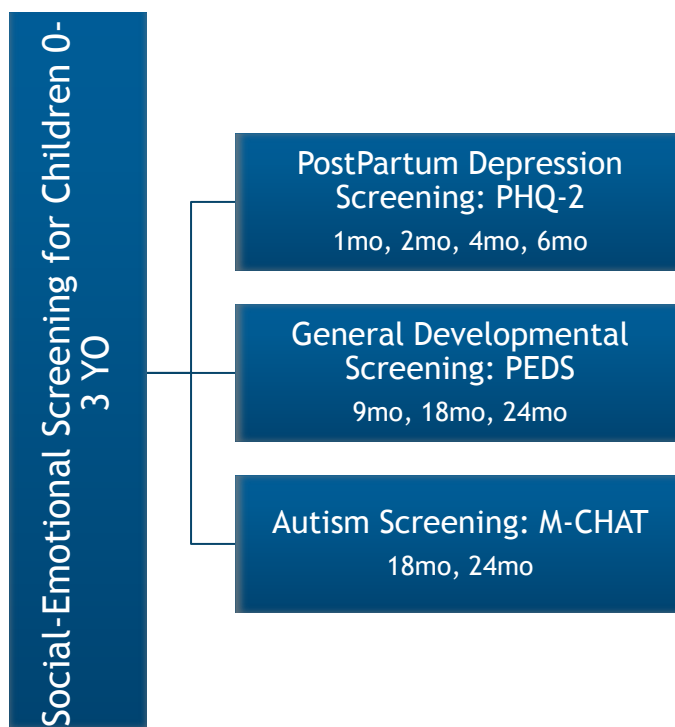
- 1.) Safe,
- 2.) Equitable,
- 3.) Effective,
- 4.) Timely,
- 5.) Parent and patient-centered, and
- 6.) Efficient manner.

Evaluation: Identify those who meet diagnostic criteria and should receive further treatment/services. These evaluations are typically done by pediatric subspecialists (developmental-behavioral pediatrician, child psychiatrist), other early childhood professionals (speech- language pathologist, audiologist, child psychologist, social workers, physical therapist, occupational therapist), and early intervention programs.

NDAAP Recommendations for Social-Emotional Screening in Children Aged 0-3yo within the Medical Home

After review of the general American Academy of Pediatrics recommendations, specific screening tools, and the age span of this early childhood project, the screening recommendations below were developed to help streamline the process of developmental screening within the medical home.

Recommendations on Screening Tool is based off AAP recommendations and perceived feasibility of incorporation of specific tool into ND Practices that care for children.



Post-Partum Depression Screening: When: 1 month, 2 month, 4 month, and 6 month Preventive Care Visits. What: US Preventative Services Task Force and American Academy of Pediatrics endorse using Edinburgh Postnatal Depression Screen (EPDS) or 2-question Screen for Depression (PHQ-2). Over the past 2 weeks: Have you ever felt down, depressed, or hopeless? Have you felt little interest or pleasure in doing things? One ‘yes’ answer is a positive screening result, [requiring further assessment/intervention].

General Developmental Screening: When: 9 month, 18 month, and 24 month Preventative Care Visits. What: PEDS or ASQ: The most highly utilized tools are the PEDS and ASQ for general developmental screening and both tools are standardized and normed and have similar sensitivity and specificity (slightly higher on ASQ than PEDS, but both are considered good). ASQ takes 10-20 minutes to complete and score, whereas PEDS takes 2-10 minutes to complete and score.

Autism Screening: When: 18 month and 24 month Preventative Care Visits.
What: The M-CHAT is the recommended tool for screening for autism.

NDAAP Recommendations for Roll out of Social-Emotional Screening in Children Aged 0-3yo within the Medical Home

Recommendations for Order of Roll out is based off of :

1. tools that are likely already being used
2. tools that will have the greatest effect on general developmental outcome of children, and tools that will help to improve the provider-patient-family relationship at an earlier stage

	1 month	2 month	4 month	6 month	9 month	18 month	24 month
NDAAP Recommended Screening Tools	PHQ-2	PHQ-2	PHQ-2	PHQ-2	PEDS	PEDS & MCHAT	PEDS & MCHAT
NDAAP Recommended Handouts	1. Bright Futures 1 month 2. Building Piece of Mind	1. Bright Futures 2 month 2. Building Piece of Mind: Purposeful Parenting	Bright Futures 4 month	Bright Futures 6 month	1. Bright Futures 9 month 2. Building Piece of Mind 9 month	1. Bright Futures 18 month 2. Building Piece of Mind 18 Month	1. Bright Futures 2 year 2. Building Piece of Mind: Purposeful Parenting



Social-Emotional Red Flags

6mo: Lack of smiles or joyful expressions

9mo: Lack of reciprocal (back and forth sharing of) vocalizations, smiles, or other facial expressions

12mo: Failure to respond to name when called. Absence of babbling. Lack of reciprocal gestures (showing, reaching, waving)

15mo: Lack of proto-declarative pointing or showing gestures. Lack of single words.

18mo: Lack of simple pretend play. Lack of spoken language/gesture combinations.

24mo: Lack of two-word meaningful phrases (without imitating or repeating)

Any age: Loss of previously acquired babbling, speech, or social skills.

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