



## **KYP, DCC, and KY SEED Assessment and Screening Executive Summary 2013**

### **Pilot Project History**

As a result of collaboration between the KY Partnership for Early Childhood Services (KYP), the Division of Child Care (DCC), and the Department for Public Health (PDH) KY System to Enhance Early Development (KY SEED), a series of innovative projects have increased services for providers and children birth to five and their families in KY. The collaboration has resulted in four pilot programs to date.

#### **1. Child Assessment Project, 2007-2008**

Through collaboration between DCC and KYP KY Early Childhood Data Systems (KEDS), a pilot program was implemented to extend best practice for assessment to early care centers in KY. The pilot extended assessment and curricular practice, as specified in the *KY Early Childhood Standards* (KDE, 2002) and the *Continuous Assessment Guide* (KDE, 2004), to selected early care centers.

- Thirty-one centers with STARS ratings of 3 or 4 were invited to participate, based on their capacity to implement an assessment program.
- Four centers were selected to participate based on expressed intent to implement the pilot with fidelity. The centers were located in northern, southern, central, and western regions of KY.
- Center staff were trained in implementation of one of two approved assessments, including the *Assessment, Evaluation and Programming System for Infants and Children Second Edition* (AEPS; Bricker, Capt, & Pretti-Frontczak, 2002) and the *Creative Curriculum Developmental Continuum Assessment System* (CC; Dodge, Colker, & Heroman, 2001). Training included administration of the AEPS or CC, and curricular development in classrooms.
- Follow-up contact was provided to assist with fidelity of implementation. Centers submitted assessment data in the fall and spring of one year; several centers continued on-going assessments after the end of the pilot year.

#### **2. Ages and Stages Questionnaires®-Third Edition (ASQ-3) and ASQ®: Social Emotional (ASQ: SE) Screening Pilot, 2011-2012**

In collaboration with KEDS, DCC, and KY SEED, services to young children across KY improved through the implementation of a screening and referral program to selected early care centers. The purpose of the pilot was to identify procedures for screening early care children who were experiencing developmental and mental health difficulties. As established screening instruments with validity and reliability, the *Ages and Stages Questionnaires®-Third Edition* (ASQ-3; Squires & Bricker, 2009) and the *Ages & Stages Questionnaires®: Social-Emotional* (ASQ:SE; Squires, Bricker, & Twombly, 2002) were selected for use. Training and

implementation of the ASQ-3 and ASQ: SE promoted best practice for screening as advocated in *Kentucky's Early Childhood Continuous Assessment Guide* (2004).

- The pilot extended current screening procedures implemented in other early childhood programs in KY including HANDS, First Steps, Metro United Way, United Way of the Bluegrass, Child Care Health Consultants, and the Help Me Grow Initiative. The screening process integrally involved families, as families were key informants for the questionnaires.
- The screening program was implemented in Level 1 and 2 STARS centers to support a vehicle for identification of concerns among young children in the community. Nineteen STARS centers from the seven KY SEED Regional Inter-Agency Council regions were selected and trained in the administration of ASQ-3, ASQ: SE, and referral procedures.
- Screening practices supported increased awareness of developmental milestones, potential areas of concern, improved services to children, and improved program effectiveness. The participation of 19 centers through this pilot served as an incentive for continued screening practice by these and neighboring centers.
- Analyses were conducted to determine child status on ASQ-3 and ASQ: SE in the 19 centers. Results indicated that for the 221 children screened with the ASQ-3, 79% were typically developing, 5% were monitored for possible further assessment, and 16% were referred for additional assessment. For the 66 children screened with the ASQ: SE, 86% were typically developing, and 7% were referred for additional assessment. Additional assessments included medical, mental health, and First Steps evaluations. A technical report with expanded results is pending completion.
- Norming data for the ASQ-3 indicate that 15.55% of children were referred for further assessment in the norming sample.

### **3. Ages and Stages Questionnaires®-Third Edition (ASQ-3) Division of Community-Based Services (DCBS) Screening Pilot, 2012-2013**

In collaboration with DCC and KY SEED, a pilot program was implemented to pilot screening procedures with families at their entrance to child care assistance services, through the Department of Community-Based Services (DCBS) offices in Eastern and Central KY. To continue valid and reliable screening in KY, the ASQ-3 was selected for use. Training and implementation of the ASQ-3 promoted best practice for screening as advocated in *Kentucky's Early Childhood Continuous Assessment Guide* (2004). DCBS offices were selected in Eastern and Central KY at the suggestion of DCC and KY SEED, as areas willing to implement pilot procedures for screening.

- Staff at DCBS offices in Eastern KY and in Central KY were trained in administration of ASQ-3 forms to families, and for data entry of child demographic data. Eastern KY staff included 2 DCBS staff and one supervisor; Central KY staff included 9 DCBS staff and one supervisor.
- Training included one half day session at each office, as well as follow-up phone, face-to-face, and email contacts for 9 months.
- ASQ-3 kits, both English and Spanish, were distributed to both Eastern and Central KY offices in fall 2011. Forms were distributed at both centers to families as they applied for child care subsidy. Return postage-paid envelopes were provided for providers and for families to return completed ASQ-3 forms.

- Staff turnover and subsidy regulations changes occurred during implementation of the pilot. Fifty percent of the DCBS staff who were trained in ASQ-3 and data entry procedures changed jobs within 4 months of the training.
- Due to family and staff reluctance to complete ASQ-3 forms, no completed forms have been received to date. DCBS staff reported reluctance to deliver ASQ-3 forms in addition to the numerous required subsidy forms. Staff also reported that families were hesitant to complete screening forms. DCBS staff indicated that optional forms were not likely to be completed by families at their offices.

#### **4. Ages and Stages Questionnaires®-Third Edition (ASQ-3) and ASQ®: Social Emotional (ASQ: SE) KY SEED Screening and Parent Nurturing Program Screening Pilot, 2013-2014**

In the fourth pilot, DCC, KYP, and KY SEED collaborated in a Central KY screening and parent support program. Fifty Central KY level 1 and 2 STARS centers were invited to participate; six centers were selected for participation, based on their agreement to implement the pilot with fidelity. For consistency of implementation, the ASQ-3 and the ASQ:SE were selected to promote best practice for screening as indicated in *Kentucky's Early Childhood Continuous Assessment Guide* (2004). Centers also agreed to implement the Bavelok Parent Nurturing Program, a 16-week series of parent training and support meetings that were provided by KY SEED staff.

- Thirteen staff from the 6 centers received a full-day training on ASQ-3, ASQ:SE, and referral procedures. Follow-up contact included regular email and phone contact and technical assistance.
- Centers received ASQ-3 and ASQ:SE kits and incentive funds after fall and spring data entry. Four of the six centers completed data entry for fall 2013.
- Screening practices supported increased awareness of developmental milestones, potential areas of concern, improved services to children, and improved program effectiveness.
- Preliminary analyses were conducted to determine child status on ASQ-3 and ASQ: SE in the 4 reporting centers. Results indicated that for the 87 children screened with the ASQ-3, 79% were typically developing, 6% were monitored for possible further assessment, and 15% were referred for additional assessment. For the 91 children screened with the ASQ:SE, 79% were typically developing, and 2% were referred for additional assessment.
- Technical assistance and data collection will continue in spring 2014.

#### **Discussion and Recommendations**

Based on the results of the four pilot programs above, several recommendations are suggested for future screening programs.

1. Promote the use of ASQ-3 and ASQ:SE throughout KY early care centers.
2. Provide incentives for successful screening and referral programs.
3. Provide continued face-to-face technical assistance to centers, to train additional staff and to encourage implementation of screening and referral procedures with fidelity.
4. Follow-up on action taken for children who are referred for further assessment.

## References

- Bricker, D., Capt, B., & Pretti-Frontczak, K. (2002). *Assessment, Evaluation, and Programming System for Infants and Children Second Edition*. Baltimore: Brookes Publishing Co.
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- Squires, J. , & Bricker, D. (2009). *Ages & Stages Questionnaires-Third Edition (ASQ-3)<sup>TM</sup>* . Baltimore: Brookes Publishing.
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