
A COMPREHENSIVE AND ALIGNED SYSTEM OF SCREENING AND ASSESSMENT

Prevention, early intervention, and treatment are important for improving optimal child outcomes and increasing the chances that all children experience healthy families and healthy development.

A child's development begins before birth, and continues throughout childhood. Significant intellectual, emotional, and physical growth occurs during the first five years of the child's life. Children begin learning long before they enter school, and development proceeds at a rapid rate during the first few years of life. Psychologists refer to these early years as a "sensitive" period for development, in recognition of the fact that some skills are most easily acquired during these critical years. Neuroscience research has documented how complex cognitive and socio-emotional capacities are built on earlier foundational skills, and strongly shaped by interactions with caregivers and environments.

When development does not proceed along a typical trajectory, identifying the concern through developmental screening and intervening early increases the likelihood that development can get back on track and that children and families experience favorable outcomes. For example, detecting hearing loss early and providing services improves a child's communication and language skills, as well as their social skills. Across many domains of development, prevention and early intervention are more effective in both the short- and long-run than later remediation efforts.

Why are screening and assessment processes important?

Screening and assessment processes should be considered the cornerstone of informed decision making in early childhood. All parents and practitioners make many decisions about how to care for children. These decisions are best made when they are informed by knowledge about the specific child as well as accumulated evidence from practice and science. Determining whether a child is on a typical developmental trajectory or whether intervention may be necessary can be difficult. How do parents know if their child has motor, communication, cognitive, or social-emotional delays? Screening and assessment processes provide a way to gather high quality, valid, and reliable information about how a child is developing and provides a foundation for informed action to support healthy development and family functioning.

Specific aspects of screening and assessment differ across types of settings and goals, but screening and assessment can be summarized by broad definitions and purposes.

Screening is an intentional *process* that provides information about how a child is developing and learning. Some types of screening also shed light on how the family is functioning. A concerning screening result suggests that more in depth information be gathered to determine whether an intervention is warranted to address it. Best practices include using multiple sources of information and a reliable, valid, and standardized tool or procedure. Screening is distinguished from informal monitoring or observation, which is often done by caregivers.

A more in-depth assessment often follows a screening, although assessment may occur in instances when screening does not. Assessment is a *process* in which more detailed or specific information is collected to answer the question “what should come next.” Assessment can serve multiple purposes depending on the context. It can determine service eligibility and also serve as a way to plan interventions and instruction, and to provide ongoing support in these processes once an intervention or program is underway. Assessment can monitor ongoing progress during and following interventions, treatments, or instruction.

Screening and assessment processes are universal when they are provided to all children and families. These processes are targeted when they are only provided to children who are deemed to be at risk based on a priori criteria. For example, Wisconsin requires early literacy universal screening for all children in public school 4K, kindergarten (5K), first, and second grades to help teachers plan for instruction. Another example is the universal newborn screening program, which uses a few drops of blood from all newborn babies to test for 44 possible disorders. Many medical providers may also conduct targeted screening for elevated blood lead levels among children who live in communities with old housing stock or who might otherwise be exposed to known sources of lead in their environment.

It is important to improve the capacity of those who work with families and care for infants and young children and to provide timely, comprehensive, and high quality screening and assessment processes across a range of settings.

Currently in Wisconsin, developmental screening is neither universal nor thoughtfully targeted. It is often left up to chance whether a child and family receives the screening and assessments that are recommended. Whether, how, and when screening and assessment processes occur differs across individual children and families, as a result of the specific settings they experience and the practitioners with whom they interact. Because of the importance of intervening early, it is imperative that a better and more comprehensive early screening and assessment system is developed that serves all the children in the state. Such a system will cross multiple agencies and sectors, and thus should be built to promote collaboration, information sharing, and communication with partners and families to ensure positive outcomes and avoid redundancy. Building such a system will provide an important step toward ensuring that children and families receive the support and help that they need for healthy development, and that public resources are used efficiently.

Some early childhood screening and assessment efforts and infrastructure are already in place. As noted above, Wisconsin already has a system in place to conduct newborn screening for 44 disorders. In addition, “Child Find” is a continuous process of public awareness activities, screening and assessment processes designed to locate, identify, and refer as early as possible all young children with disabilities. School districts and county Birth to 3 programs are federally mandated by the Individuals with Disabilities Educational Act (IDEA) to identify and evaluate young children with disabilities within their attendance area. To assist in this “child find” process, “informed referral networks” have been created consisting of physicians, Birth to 3 programs, Head Start programs, child care programs, parents, public health, schools, social services, and others in the community that touch the life of a child.

Planning for a more comprehensive and effective cross-sector system would include working with multiple agencies to ensure that all children and families experience best practices, specifically the best timing, for universal screening and assessment. These universal processes involve multiple settings; for example, health care providers, child care providers, and home visiting programs.

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