Alabama Early Screening Improvement Training

Saturday, October 29, 2011 Tuscaloosa, Alabama

American Academy of Pediatrics

Alabama Chapter

Produced by the Alabama Department of Public Health Video Communications and Distance Learning Division

The Science of Developmental Screening

Faculty

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Commercial Interests Disclosure

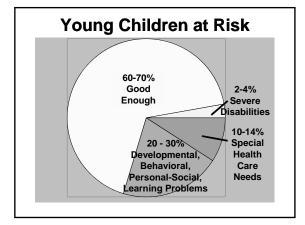
- Ashley Evans, MD, FAAP
- Does not intend to discuss any commercial products or services
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- No significant financial relationship

Did You Know?

- 20% of all visits to the pediatric PCP's office are developmental or behavioral in nature
- 80% of parental concerns are correct and accurate

Did You Know?

- By the time children enter kindergarten you can predict school drop-out rates with about 70% accuracy
 - By age five their developmental trajectory is more or less set
 - Olsen Olson AC. How to establish family professional partnerships. Presented at: International Family Centered Care Conference, Sept. 5, 2003; Boston, MA

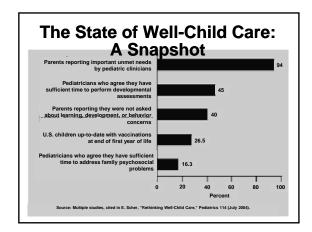


Autism Spectrum Disorders

- 1 in 110 children
- · Age of diagnosis falling
 - Median 4.5- 5.5 years
- 1/3 of parents of children with an ASD noticed a problem before their child's first birthday
 - -80% saw problems by 24 months

Autism Spectrum Disorders

- · Early detection crucial
- AAP Autism Toolkit and CDC ALARM Initiative
- Centers for Disease Control and Prevention 2010.
 Last retrieved September 15, 2010 at http://www.cdc.gov/ncbddd/autism/d ata.html

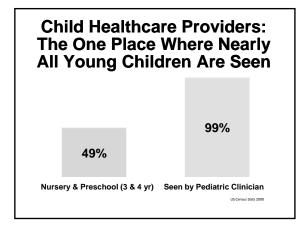


Facts About Pediatric Screening

- Only 15-20% of pediatricians use standardized screening tools routinely (AAP Survey 2002)
- 23% of pediatricians used screening tools only when parents expressed concern or child was known to be at risk (AAP Survey 2002)

Facts About Pediatric Screening

 Only 12.1% of Alabama children received standardized developmental screening (National Survey of Children's Health 2007)



Detection Rates Using Standardized Screening Tools

	WITHOUT Screening Tools	WITH Standardized Screening Tools
Developmental Delays	30% identified Palfrey et al, 1994	70-80% identified Squires et al, 1996
Mental Health Problems	20% identified Lavigne et al, 1993	80-90% identified Sturner, 1991

Implementing ASQ in Practice: Referral Rates Increased At 12 months referrals 3x higher At 24 months, referrals 2.5x higher 70 60 50 10 12-months 24-months

Hix-Small, et al, Peds Aug 2007

Are We Meeting the Needs of Our Families?

We're in the "developmental assurance" business

To Ensure No Child Reaches Kindergarten with an Undetected Developmental Delay...

Surveillance vs. Screening vs. Diagnosis

What Is Surveillance?

- A flexible, continuous process, in which knowledgeable professionals perform skilled observations of children during child health care
 - In consultation with families, specialists, child care providers, etc.
 - SM Dworkin, A Shannon, and P Dworkin. ChildServ Curriculum. Center for Children's Health and Development, St. Francis Hospital and Medical Center; 1999: Hartford. CT

Surveillance: 5 Components

- 1. Eliciting and attending to the parent's concerns
- 2. Maintaining a developmental history
- 3. Identifying the presence of risk and protective factors

Surveillance: 5 Components

- 4. Making accurate and informed observations of the child and the parent/child relationship
- 5. Documenting the process and findings

- AAP Policy - Pediatrics 2006; 118; 405-420

Developmental Surveillance Is More Than Screening for Developmental Delay

- · Partnership building with parents
- · Addressing parental concerns
- Assessment of developmental risk

What Is Screening?

- Brief, objective, and validated test
- Goal is to differentiate children that are "probably ok" vs. "needing additional investigation"
- Performed at set points in time and when a specific concern arises

- AAP Policy - Pediatrics 2006; 118; 405-420

Importance of Being Objective

• Touch or take temperature?

What Is Diagnosis/Evaluation?

- Accurate diagnosis is the next step done when screening identifies child as "at risk"
- Diagnosis may be done by Pediatrician, Early Intervention or Developmental Specialist

What Is Diagnosis/Evaluation?

- Aimed at identifying specific developmental disorders affecting the child
- Done in conjunction with a medical diagnostic evaluation

AAP Algorithm for Developmental Surveillance and Screening

- Developmental surveillance every well child visit
- Standardized general developmental screening tool at 9, 18, and 24-30 months

AAP Algorithm for Developmental Surveillance and Screening

- Standardized Autism Spectrum
 Disorder screening tool at 18 and 24 months
- Did not make specific tool suggestions

- Pediatrics Vol. 118 (1) 2006

Developmental Surveillance and Developmental Screening 18 months 9 months Courtesy of Paul Lipkin MD FAAP: D-PIP Training Workshop

Benefits of Screening

- Better patient care
- · Improves patient/family satisfaction
- Earlier identification improves child/family outcomes
- · Results in access to services
- · Cost effective
- Early intervention IS prevention!

Barriers to Screening

- Time
- Knowledge of tools, methods, and billing
- The "wait and see" approach
- Failure to trust screening tests or results
- Continued reliance on observations

Barriers to Screening

- Continued reliance on poor quality or homemade tools
- Knowledge of referral resources
 - Journal of Developmental/ Behavioral Pediatrics 24:409-417, 2003

Get the Right START!

 Universal, standardized developmental screening is standard of quality care in the medical home