

ISSUE DATE June 22, 2021	EFFECTIVE DATE Immediately	NUMBER 3490-21-01
SUBJECT Developmental Evaluation and Early Intervention Referral Policy		BY  Jonathan Rubin, Deputy Secretary Office of Children, Youth & Families

SCOPE:

County Children and Youth Social Services Agencies
Private Children and Youth Social Service Agencies
Child Welfare Resource Center
Early Intervention Program Directors
Early Intervention Service Coordinators

PURPOSE:

The purpose of this bulletin is to provide guidance to public and private children and youth social service agencies about the updated Developmental Evaluation and Early Intervention Referral Policy through the use of the new Ages & Stages Questionnaires® (ASQ®) and Ages & Stages Questionnaires®: Social-Emotional (ASQ®:SE) screening tools. This policy is being expanded to eliminate gaps in the screening and referral of children and youth to the Early Intervention (EI) Program and County Mental Health/Intellectual Disability (MH/ID) Program while clarifying the responsibilities of public and private agencies relative to these populations.

This bulletin rescinds and replaced the Office of Children, Youth and Families (OCYF) Bulletin 3490-10-01, entitled, “Developmental Evaluation and Early Intervention Referral Policy”.

BACKGROUND:

On November 9, 2006, Governor Edward G. Rendell signed Act 146 of 2006, amending the Adoption Act and the Child Protective Services Law by adding language to bring Pennsylvania statutes into compliance under the Child Abuse Prevention and Treatment Act (CAPTA). These amendments included provisions that enhanced linkages between child protective service agencies and public health, mental health, and developmental disabilities agencies. As per CAPTA, the Department of

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ORIGIN OF BULLETIN:

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Human Services (DHS) developed a procedure to refer children in Pennsylvania, who are under the age of three and a subject of a substantiated report of child abuse or neglect, to EI. See 42 U.S.C. § 5106a(b)(2)(B)(xxi). In addition, the Individuals with Disabilities Education Act (IDEA) (20 U.S.C. § 1435(a)(5)) and accompanying regulations require each state to have a “child find” system in place to identify and refer potentially eligible infants and toddlers to the EI program.

Under federal regulations, referrals to the EI program must be made timely by the county children and youth agency (CCYA) when the child is identified as having a possible developmental delay (34 C.F.R. §303.321(a)(1)). In addition to children covered under CAPTA, the two additional populations covered by IDEA, “Children Living in Residential Facilities” and “Children Who Are Homeless,” who are under three years of age, are required to be referred or screened for possible referral for EI services.

The Office of Child Development and Early Learning (OCDEL) issued Announcement EI-13 #08 to emphasize the need for CCYAs and local EI programs to coordinate their efforts to serve children identified as having a possible developmental disability as determined through the use of the ASQ® and ASQ®:SE screening tools.

More recently, the Family First Prevention Services Act (Family First) was signed into law as part of the Bipartisan Budget Act on February 9, 2018. This act reforms the federal child welfare funding streams, Title IV-E and Title IV-B of the Social Security Act, to provide services to families who are at risk of entering the child welfare system. The Family First provisions require states, as part of their Title IV-B State Plan, to include a description of the activities that the state or tribe has undertaken to reduce the length of time children in foster care, under age five, are without a permanent family, and the activities the state or tribe undertakes to address the developmental needs of all vulnerable children under five years of age.

Further, the recently passed Act 16 of 2019 (24 P.S. §13-1326), implemented during the 2020-2021 school year, reduces the compulsory school age to six. By reducing the compulsory school age, the gap between developmental screenings and enrollment into school will be significantly condensed.

KEY TERMS AND PRACTICE CONSIDERATIONS:

Age of Beginners: The minimum age established by the school district board of directors for admission to the district’s first grade under § 11.15 (relating to admission of beginners).

County Agency: The county children and youth social service agency established in accordance with section 405 of the act of June 24, 1937 (P.L. 2017. No. 396), known as the County Institution District Law, or its successor, and supervised by the department under Article IX of the act of June 13, 1967 (P.L. 31, No. 21), known as the Human Services Code.

Child residential facility (as defined in 55 Pa. Code § 3800.5): A premise, or part thereof, operated in a 24-hour living setting in which care is provided for one or more children who are not relatives of the facility operator, except as provided in § 3800.3 (relating to exceptions).

Children Who Are Homeless (as defined by the McKinney-Vento Act, amended by the Every Student Succeeds Act in 2015): Individuals who lack a fixed, regular, and adequate nighttime residence. This includes children and youth who:

- Are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason;
- Are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations;
- Are living in emergency or transitional shelters;
- Are abandoned in hospitals;
- Have a primary nighttime residence that is a public or private place not designated for or ordinarily used as a regular sleeping accommodation for human beings;
- Are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus, or train stations, or similar settings; or
- Are migratory and qualify as homeless because they are living in circumstances described above.

Developmental area: Cognitive, communication, physical, social/emotional and self-help.

Developmental delay: A child who is less than the age of beginners and at least 3 years of age is considered to have a development delay when one of the following exists:

- (i) The child's score, on a developmental assessment device, on an assessment instrument which yields a score in months, indicates that the child is delayed by 25% of the child's chronological age in one or more developmental areas.
- (ii) The child is delayed in one or more of the developmental areas, as documented by test performance of 1.5 standard deviations below the mean on standardized tests.

Early intervention services (as defined in 11 P.S § 875-103 (relating to definitions): Developmental services which meet all the following:

- (1) Are provided under public supervision.
- (2) Are designed to meet the developmental needs of a handicapped infant, toddler or eligible young child in any of the following areas:
 - (i) Physical development.
 - (ii) Cognitive development.
 - (iii) Sensory development.
 - (iv) Language and speech development or alternative communication development.
 - (v) Psycho-social development.
 - (vi) Self-help skills.
- (3) Are developed to meet the requirements of this act, including, but not limited to, the following:
 - (i) Family training.
 - (ii) Social work services, including counseling and home visits.
 - (iii) Special instruction.
 - (iv) Speech pathology and audiology.
 - (v) Occupational therapy.
 - (vi) Physical therapy.
 - (vii) Psychological services.
 - (viii) Medical services only for diagnostic or evaluation purposes.
 - (ix) Early identification, screening and assessment services.
 - (x) Health services necessary to enable the infant or toddler to benefit from the other early intervention services.
 - (xi) Assistive technology devices and services.

(xii) For handicapped infants and toddlers, other services required by Part H.

(4) Are provided by qualified personnel, including, but not limited to, special educators, speech and language pathologists and audiologists, occupational therapists, physical therapists, psychologists, social workers, nurses and nutritionists.

(5) Are provided in conformity with an individualized family service plan for eligible infants, toddlers and their families.

(6) Are provided to eligible young children in compliance with the provisions of this act and Part B. Compliance includes procedural safeguards and free appropriate public education, including related services and individualized education programs.

(7) Are provided in the least restrictive environment appropriate to the child's needs. Infants, toddlers and eligible young children who will be served in a non-home-based setting must, to the maximum extent consistent with the child's abilities, receive early intervention services in a setting with nonhandicapped children. Each infant's or toddler's IFSP and each eligible young child's IEP must contain the recommended service option placement and the rationale for why it represents the least restrictive environment.

Eligible young child: A child who is less than the age of beginners and at least 3 years of age and who meets the criteria in 34 CFR 300.8 (relating to a child with a disability).

Qualifying Score: Any score that lands in the shaded area of scoring grid for each of the age-specific questionnaires of the ASQ® and ASQ®:SE assessment tools.

Substantiated child abuse/neglect: Child abuse as to which there is an indicated report or founded report.

DISCUSSION:

CAPTA requires that states have provision and procedures for referral of a child under three years of age, who is involved in a substantiated case of child abuse or neglect. Previously DHS recommended expansion of the requirements to include all children up to age five who were served by the child welfare system. Statistics from the 2019 Annual Child Abuse Report, showing that of the 51 substantiated child fatalities, 33 of these children were under the age of five; and of the 93 substantiated child-near-fatalities, 81 of these were involving children under the age of five, displays the vulnerability of children from birth to five years of age.

Due to 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 is a reasonable extension of DHS' duty to protect children in Pennsylvania. Additionally, the establishment of a policy and procedure to ensure the execution of these evaluations and subsequent referrals also maintains Pennsylvania's compliance with CAPTA, IDEA and new Family First provisions.

In 2010, DHS implemented the use of the screening tool, ASQ® and ASQ®:SE. The tool was developed by the University of Oregon in the 1980's and was updated in the years 2009 and 2015 introducing the ASQ®-3 and ASQ®:SE-2. The newest screening tools include a questionnaire for 2-month old children, a monitoring zone, and parent engagement materials, along with additional changes such as a new standardization sample, revised cut-off scores, and an improved Spanish translation. For more information about the tool please visit <https://agesandstages.com/about-asq/>.

DHS purchased the updated ASQ®-3 and ASQ®:SE-2 screening tools that were previously distributed to the CCYAs. On-going training specific to the ASQ®-3 and ASQ®:SE-2 tools will be made available through the Child Welfare Resource Center Training Program (CWRC).

CCYAs are currently responsible for ensuring that children under the age of three, who have been a subject of a substantiated report of child abuse or neglect, be screened for developmental delays. If the screening results in a qualifying score or the CCYA identifies needs that may potentially be addressed through EI services, the CCYA shall refer the child to the local EI program. EI will determine from their independent evaluation, whether on-going services and/or an additional referral to the County MH/ID program is needed at that time, as per OCDEL's Announcement, EI-10 #06.

Further, children who are newly referred to EI and have turned five years of age during the school year and do not meet the minimum age requirement for entrance into kindergarten should be referred to the local preschool EI program. Local preschool EI programs should continue to provide screening, evaluation and preschool EI services for a child until the child enters a kindergarten program, as per OCDEL's guidance (EI-10 #06). Referrals to the local EI programs can be made through CONNECT at 1-800-692-7288, or directly to the local EI program.

POLICY AND PROCEDURE:

CCYAs will ensure that all children, under three years of age, who live in Pennsylvania, and who have been a subject of a substantiated report of child abuse or neglect, receive a developmental screening through the use of the most age appropriate ASQ® and ASQ®:SE tool. DHS strongly recommends CCYAs utilize the ASQ®-3 tool to screen children up to 66 months of age and the ASQ®:SE-2 tool for children up to 72 months of age. Further, DHS strongly recommends these screening tools be applied to all children within the delineated age ranges served by the child welfare system to include those involved in an open, in-home child protective service or general protective service case, or an out-of-home placement case with a public or private children and youth social service agency.

If a child is accepted for services, the use of the ASQ®-3 and ASQ®:SE-2 screening tools may encompass all children up to age six, of that family. The initial screening is to be administered within 30 days of accepting the case for services when the child is under three years of age, lives in Pennsylvania, and has been a subject of a substantiated report of child abuse or neglect. This timeframe is also recommended for all other children receiving the initial screening.

The ASQ®-3 and ASQ®:SE-2 screening tools should be completed by a CCYA worker with the parent's or caretaker's assistance; or by the parent or caretaker with on-site guidance from the trained CCYA worker. CCYAs may continue to elect to use EI or another provider to conduct screenings and evaluations of children under the supervision of the CCYA, using the ASQ®-3 and ASQ®:SE-2 screening tools. The provider may also complete a full evaluation. CCYAs should maintain copies of screenings, evaluations, and results, as well as referrals in the child's record.

When 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 CCYA worker will, for in-home cases, involving a child under three years of age who is a subject of a substantiated report of child abuse or neglect, ensure that any recommended services are made available and accessible to the child and the child's family. These services may also be recommended for all children under six years of age, served by

the child welfare system. For children who are not in the care and custody of the CCYA, the worker must document that the child's parent or caretaker was provided with both verbal and written recommendations for an EI referral and its potential benefits to the child. This documentation should include both verbal and written statements of the agency's availability to refer to and facilitate services. The CCYA may offer 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 may be instructed to notify the CCYA worker of the referral appointment within a specified period, not to exceed two weeks of the documentation date. If there is not notification and/or no confirmed appointment, and the child is under the age of three and a victim of substantiated child abuse or neglect, the CCYA worker will make the referral and facilitate the evaluation process. For children in the care and custody of the CCYA, the worker will ensure that a referral is made to EI, if necessary. Documentation of the recommended services and referrals should be maintained in the child's record.

When the initial ASQ[®]-3 and ASQ[®]:SE-2 screening does not result in a score that would necessitate a referral for EI services, it is recommended that periodic, follow-up screenings be performed at the frequencies prescribed below for children birth to three years of age, who have been the subject of a substantiated report of child abuse or neglect, until they turn age five and one-half, provided the children remain involved in an open case with the agency until that time. DHS strongly recommends that all children who become involved in an open, in-home and out-of-home placement case with the CCYA, receive such follow-up periodic screenings until five and one-half years of age. If, during the periodic screenings a qualifying score is received, a referral shall be made for EI services as explained above.

The screening intervals available for ASQ[®]-3 are as follows:

- Ages 2-24 months, every two months (2,4,6,8,10,12,14,16,18,20,22,24)
- Ages 24-36 months, every three months (24,27,30,33,36)
- Ages 36-60 months, every six months (36,42,48,60)

The screening intervals available for ASQ[®]:SE-2 are as follows:

- Ages 2-6 months, every four months (2,6)
- Ages 6-60 months, every six months (6,12,18,24,30,36,48,60)

For those children under age three, who were victims of substantiated abuse or neglect and whose initial screening score did not mandate a referral for EI services, DHS recommends follow-up screenings at the frequencies described below, using the most age-appropriate ASQ[®]-3 and ASQ[®]:SE-2 tools from the interval schedule listed immediately above:

- Ages 2-24 months: ASQ[®]-3 three times per year/ ASQ[®]:SE-2 one time per year, required
- Ages 24-36 months: ASQ[®]-3 two times a year/ ASQ[®]:SE-2 one time per year, required
- Ages 36-66 months: ASQ[®]-3 and ASQ[®]:SE-2 both one time each year recommended

It is the responsibility of the CCYA to ensure that all children under three years of age, who have been a subject of a substantiated report of child abuse or neglect, are screened for developmental delays and referred for EI services, if needed based on any qualifying score, regardless of whether the child remains in their home of origin or is in out-of-home placement. DHS strongly recommends

that this requirement be extended up to and including age five and one-half for all children who are served by the child welfare system.

The Family First provisions, in addition to, the extended time frames for the ASQ[®]-3 and ASQ[®]:SE-2 will aide in eliminating gaps in the identification of a child's possible developmental delay up to compulsory school age of six, as set by Act 16 of 2019.

Furthermore, DHS recommends that a referral be made to the child's local county MH/ID program when it is evident, or suspected by the agency, that the child may have a developmental disability, intellectual disability or autism, including for children identified outside of the recommended ASQ[®]-3 and ASQ[®]:SE-2 screenings. More information about this process can be found in a collaborative bulletin entitled "Referring Children with a Developmental Disability with the County Mental Health/Intellectual Disability Programs".

ADDITIONAL POPULATION POLICY REQUIREMENTS:

When a child, under the age of three, is placed in a residential facility due to developmental delays, disabilities, or other serious health condition, the CCYA must refer the child to the EI program, in the county where the facility is located. When this occurs as an emergency placement, the referral to the local EI program must occur within one business day or two calendar days from the date of placement within the facility, whichever is later. For children who are living in other residential facilities, the CCYA must complete a developmental screening with the use of the most age appropriate ASQ[®]-3 and ASQ[®]:SE-2 tools. For any screen that results in a qualifying score, the CCYA must make a referral to the EI program, within the county the facility is located. In all cases, the CCYA must document that the referral to the EI program was made.

For children, under three years of age, who are homeless and whose family has been accepted for child welfare services, the CCYA must do a developmental screening using the most age appropriate ASQ[®]-3 and ASQ[®]:SE-2 tools. For any screen that shows a qualifying score, CCYA must make a referral to the local EI program, and maintain documentation that the referral was made, and further, with the parent's consent, notify the shelter or service provider of the referral in order to ensure delivery of EI services.

DHS recommends that these populations of children receive screening, using the most age-appropriate ASQ[®]-3 and ASQ[®]:SE-2 tools, through to the age of five and one-half, and are referred for EI services as necessary when a qualifying score is noted. While this is not the requirement, DHS recognizes that children with developmental delays benefit from early detection and support, therefore recommends that the screenings be completed as a part of their regular Family Service Plan review.