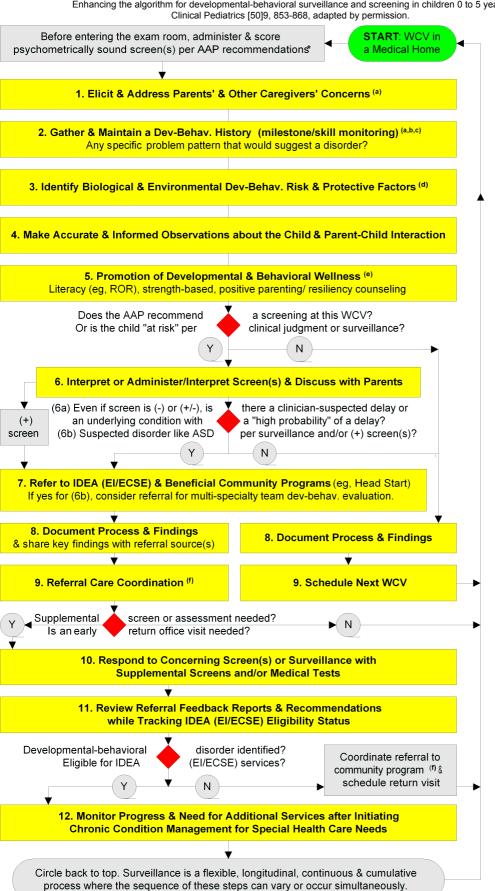# Flowchart for Developmental-Behavioral Surveillance & Screening (0 to 6 years) in Medical Home Settings

From Marks, K.P., Glascoe, F.P., and Macias M.M. [2011]
Enhancing the algorithm for developmental-behavioral surveillance and screening in children 0 to 5 years.
Clinical Pediatrics [50]9, 853-868, adapted by permission.

START: WCV in a Medical Home

Before entering the exam room, administer & score psychometrically sound screen(s) per AAP recommendations*

1. Elicit & Address Parents' & Other Caregivers' Concerns [a]

2. Gather & Maintain a Dev-Behav. History (milestone/skill monitoring) [a,b,c]
Any specific problem pattern that would suggest a disorder?

3. Identify Biological & Environmental Dev-Behav. Risk & Protective Factors [d]

4. Make Accurate & Informed Observations about the Child & Parent-Child Interaction

5. Promotion of Developmental & Behavioral Wellness [e]
Literacy (eg, ROR), strength-based, positive parenting/ resiliency counseling

Does the AAP recommend a screening at this WCV?
Or is the child "at risk" per clinical judgment or surveillance?
Y / N

6. Interpret or Administer/Interpret Screen(s) & Discuss with Parents

(6a) Even if screen is (-) or (+/-), is there a clinician-suspected delay or an underlying condition with a "high probability" of a delay?
(6b) Suspected disorder like ASD per surveillance and/or (+) screen(s)?
Y / N

(+) screen

7. Refer to IDEA (EI/ECSE) & Beneficial Community Programs (eg, Head Start)
If yes for (6b), consider referral for multi-specialty team dev-behav. evaluation.

8. Document Process & Findings
& share key findings with referral source(s)

8. Document Process & Findings

9. Referral Care Coordination [f]

9. Schedule Next WCV

Supplemental screen or assessment needed?
Is an early return office visit needed?
Y / N

10. Respond to Concerning Screen(s) or Surveillance with Supplemental Screens and/or Medical Tests

11. Review Referral Feedback Reports & Recommendations while Tracking IDEA (EI/ECSE) Eligibility Status

Developmental-behavioral disorder identified?
Eligible for IDEA (EI/ECSE) services?
Y / N

Coordinate referral to community program [f] & schedule return visit

12. Monitor Progress & Need for Additional Services after Initiating Chronic Condition Management for Special Health Care Needs

Circle back to top. Surveillance is a flexible, longitudinal, continuous & cumulative process where the sequence of these steps can vary or occur simultaneously.

AAP Screening Recommendations *

(a) General (broad-band) developmental screen routinely at 9, 18 & 24 or 30 mo, plus at 4 years to measure "kindergarten readiness", plus as needed if at risk for a developmental delay

(b) SE screen routinely at 5 years, plus as needed if at risk for SE problem

(c) Autism-specific screen routinely at 18 & 24 mo, plus as needed if at risk for ASD

(d) Consider family psychosocial screen (e.g., 0 to 1 mo or at the initial visit), plus routinely employ a maternal mood disorder screen in the first year (eg, 2, 4 and/or 6 mo)

Other Key Recommendations

(e) Evidence-based interventions are recommended for component 5, which is flexible & can occur before & after component 6.

(f) A system-wide program with centralized care coordination or a practice-based integrative model of care (eg, colocation with developmental or mental health specialists) is recommended.

Legend

Box = process or action step
Diamond = decision
Y = yes
N = no
(+) = concerning
(+/-) = borderline
(-) = typical
AAP = American Academy of Pediatrics
ASD = Austim Spectrum Disorder
ECSE = early childhood special education
EI = early intervention
IDEA = Individuals with Disabilities Education Act
SE = social-emotional
ROR = Reach Out & Read
WCV = well-child visit