



Ages & Stages Project

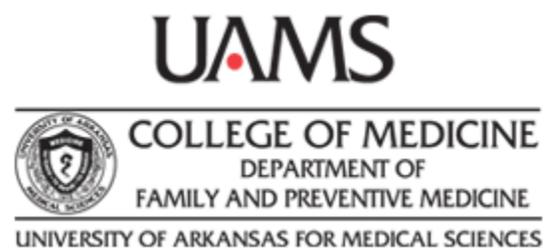
Evaluation for DHS/DCCECE

Prepared by Department of Family & Preventive Medicine, UAMS



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LITTLE ROCK, ARKANSAS



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Contents

Contents	3
Executive Summary	5
The DHS/DCCECE Ages & Stages Project	6
Project Goals	6
Background of Arkansas ASQ Project Phase I & Phase II.....	6
Overview of Evaluation Activities.....	7
GOAL ONE: Increase knowledge of childcare providers	9
Location of ASQ Facilities	11
Quality of Training: Knowledge Change.....	12
GOAL TWO: Integrate ASQ into Early Childcare Programs	16
Number of Children Screened	16
Timing of Screening	17
Results of Screening	18
Description of Provider-Parent Input.....	19
Parent Engagement	20
Provider Adoption of ASQ	22
Modifying Classroom Activities as a Result of ASQ.....	23
GOAL THREE: Identify barriers to on-going use of ASQ among parents, providers, and physicians.....	25
Barriers Identified by Providers during Training.....	25
Pre and Post Assessments by Providers during Training.....	25
Rating of Provider Support by R&R Staff.....	26
Barriers Identified by R&R Agencies at End of Phase II.....	26
Barriers Identified by Phase II Providers during Phone Surveys	27
Barriers Related to Physician Awareness of ASQ Project.....	27
Solutions Suggested by R&R Agencies.....	30
Direction for Phase III	31
Summary	32
References.....	35
Appendix 1: Phase I Director Interview Protocol.....	36
Appendix 2: Phase II Providers Phone Survey.....	42
Appendix 3: Cover Sheet for Trainers	44

Appendix 4: Pre-Assessment Questionnaire.....	45
Appendix 5: Post-Assessment Questionnaire	46
Appendix 6: Long Survey Phase II Director Interview Protocol.....	48
Appendix 7: Phase II Physicians Phone Survey	51
Appendix 8: Parent-Provider Satisfaction Survey	53
Appendix 9: Phase II Final Providers Phone Survey.....	55

Executive Summary

Developmental screening is an important step in identifying children who need early intervention services (Bear, 2004). Parents, childcare providers, and physicians should coordinate in this effort. Resource and Referral Agencies throughout Arkansas trained home- and center-based child care providers to use a screen for developmental delay with children 6 months to 5 years of age, the Ages & Stages Questionnaire (ASQ). UAMS used quantitative and qualitative methods to assess the feasibility of continued ASQ use in Arkansas.

The ASQ project addressed three goals:

- 1) Increase the knowledge of childcare providers.
- 2) Integrate the ASQ into Early Childcare programs.
- 3) Identify parent, provider and physician barriers to on-going use of the ASQ.

Increased Knowledge

Results indicate that the ASQ Project

- improved participant confidence to identify children with disabilities and to talk to parents about developmental delays.
- improved participant knowledge about working with families and children with developmental disabilities.

Integration

Childcare providers successfully integrated the ASQ into their programs.

- The number of ASQ screenings completed during Phase II increased by 160% from Phase I to Phase II.
- Among 732 children screened during Phase II, 16% were classified needing to be monitored and 12% were classified as needing further assessment for possible developmental delay.
- Most programs that implemented plan to continue using ASQ.
- More than 50% of the providers reported making changes in their curriculum and teaching methods for children who screened in the monitor or refer categories.

Barrier Identification

For parents, the biggest barriers were time to complete the screen and understanding the purpose of the screen. For providers, conducting screening at the timing recommended by ASQ was a barrier. Providers often chose to conduct screenings twice a year for all children, rather than based on child's birthdays. Raising awareness of the physicians continues to be a difficult task. Only 12 of the 40 physicians or physicians' staff who participated in a phone survey said they were familiar with the ASQ project.

Phase III Direction

Engaging home-based and center-based childcare providers is a viable method for improving the early identification process. UAMS and DHS/DCCECE will develop a Continuing Medical Education training (CME) for Arkansas physicians. Recruitment of new child care providers will be reduced from Phase II levels. However, this will enable R&Rs to provide more support to each participant. Evaluation of the training process will continue. Arkansas can serve as a model for statewide screening implementation.

The DHS/DCCECE Ages & Stages Project

Project Goals

1. Increase the knowledge of childcare providers
 - a. Educate many providers
 - b. Educate providers regarding the ASQ and early screening
2. Integrate the ASQ into Early Childcare programs
 - a. Encourage providers to adopt the ASQ to screen routinely
 - b. Engage parents to support use of ASQ
 - c. Educate providers to make program changes based on ASQ
 - d. Link parents, physicians, and providers around common understanding of ASQ results so that children get needed services
3. Identify parent, provider and physician barriers to on-going use of the ASQ

Background of Arkansas ASQ Project Phase I & Phase II

Developmental delays, behavioral and social emotional problems affect one in every six children (Dunkle, 2004). According to the Centers for Disease Control and Prevention, less than 20% of children between 10 months and 5 years of age receive a developmental screening during a health care visit (NSCH, 2007). High quality childcare programs are being encouraged or required by state standards to include routine screens. As part of the Better Beginnings program the Arkansas Department of Human Services implemented a developmental screening program to identify children at risk for developmental delay.

The Ages and Stages Questionnaire (ASQ) is a developmental screener targeting key developmental domains: communication, fine motor, gross motor problem solving, and personal-social. The Ages and Stages Questionnaire Social-Emotional (ASQ-SE) screens infants and young children for social-emotional concerns. The scores from these screeners are classified as white (no need for concern), gray (child should be monitored), and black (child needs a referral for further diagnostic testing).

The Arkansas Department of Human Services ASQ Project used a two-tiered approach to implement the screening program. The first tier included the staff in six Resource and Referral (R&R) agencies. R&R agencies are under contract with the Arkansas Department of Human Services-Division of Childcare and Early Childhood Education (DHS/DCCECE). Their role was to train childcare providers on the ASQ and ASQ-SE and support the implementation of the ASQ project.

The second tier was made up of home- and center-based childcare providers and home visitation programs such as HIPPPY. Provider agencies served many families who received or were eligible for state childcare vouchers (based on income). Providers were responsible for working with parents to complete the developmental screenings and sending results to the child's physician.

The DHS/DCCECE ASQ project completed two Phases of the ASQ project (2009-2010 and 2010-2011). Phase I was a feasibility pilot of the use of the ASQ and the ASQ-SE. Phase II built on the findings and the system of Phase I. The goals of the Phase II were to 1) Increase the

knowledge of childcare providers, 2) Integrate the ASQ into Early Childcare programs, and 3) Identify parent, provider and physician barriers to on-going use of the ASQ.

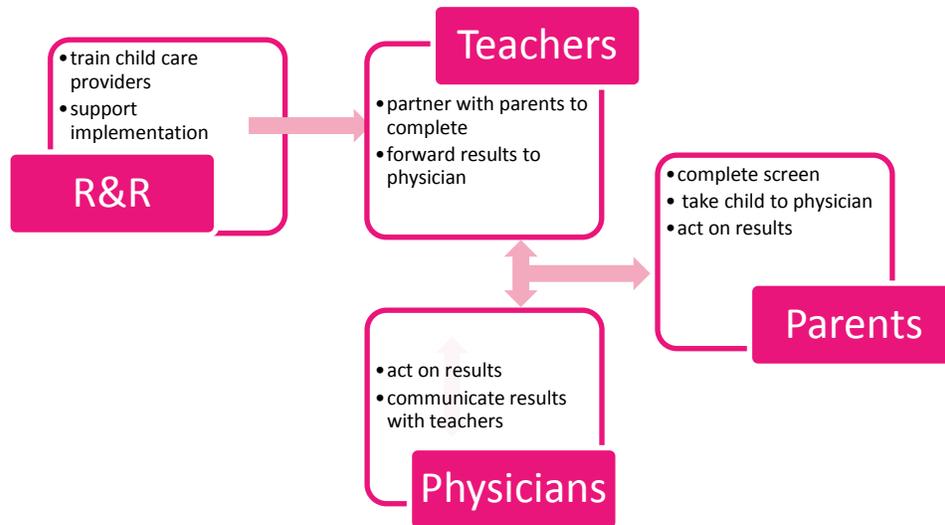


Figure: Summary of the Arkansas ASQ Project Implementation

Overview of Evaluation Activities

In Phase II each aspect of the ASQ project was evaluated. However, the evaluation was not implemented until January 2011 and more fully in February because of a variety of logistic issues including final approval of funding, weather disruptions in January and February, and R&R meeting schedules. A copy of all data collection instruments can be found in the appendix of this report. The key components were:

- R&R training evaluations: Pre/Post forms administered by R&R during provider training around the state. A total of 95 trainings were evaluated.
- Evaluator short phone calls to all Phase I and II providers: Short phone calls were used to obtain provider perceptions, program changes, and continued use of ASQ. A total of 34 and 66 were completed in Phase I and II respectively.
- Evaluator in-depth phone calls to select Phase I and II providers: A representative sample of providers was selected to receive in-depth phone calls. In the call providers were asked about topics based on the shorter call but were asked to provide more detail. A total of 12 and 22 were completed in Phase I and II respectively.
- Parent-Provider survey: Providers were asked to complete a short survey of 12 questions after each ASQ was completed. They were also asked to obtain input from parents on 7 questions related to the experience of using the ASQ. A total of 194 surveys were completed.

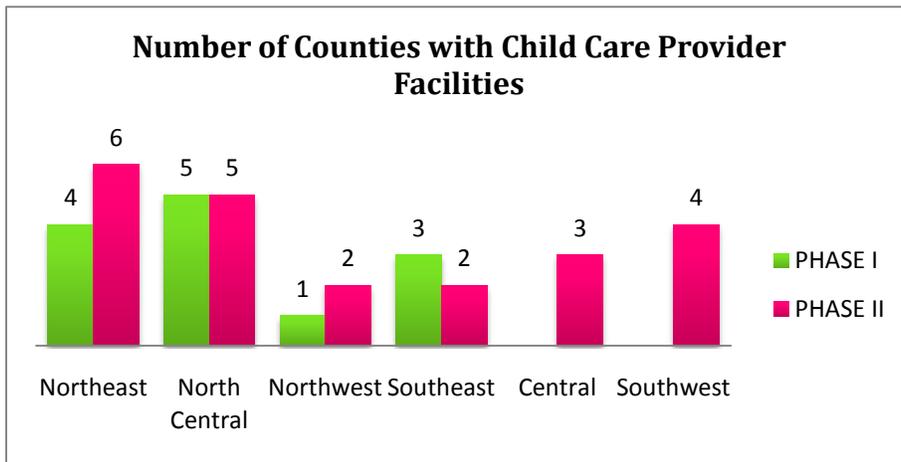
- Report of ASQ completed: Providers were asked to report monthly to R&R staff the number of ASQ screens completed for children in their program.
- Physicians phone call: In May/June, all 48 medical providers identified in R&R areas were contacted by phone. A short survey of 5 questions was administered to 40 representatives in physician's offices.

Data from these sources were used to evaluate each of the three goals. Results are described in subsequent sections.

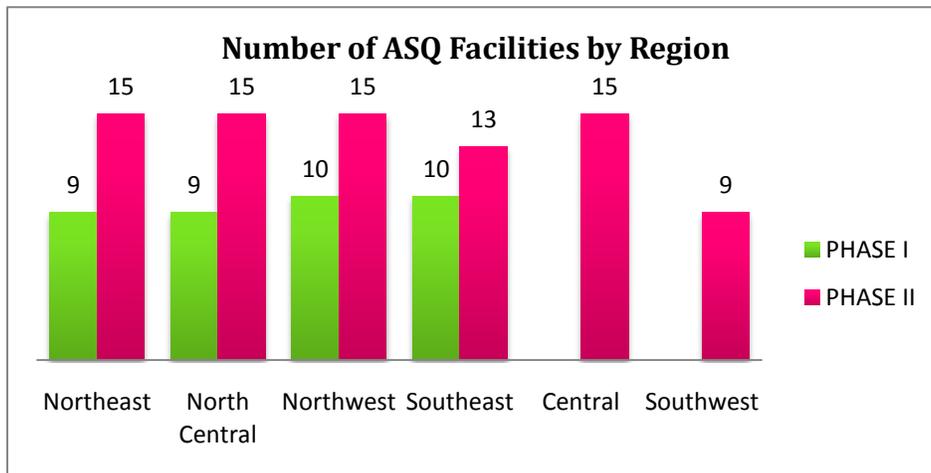
GOAL ONE: Increase knowledge of childcare providers

The project activities included the goal of increasing knowledge for a large number of providers. The number of R&R agencies participating in the ASQ project increased from four in Phase I to six in Phase II. That is, all Arkansas R&R agencies had ASQ train-the-trainer staff as a result of the project.

The number of counties represented in the project increased from 13 counties in Phase I to 22 counties in Phase II. By the end of Phase II, providers had been trained in 29 Arkansas counties.

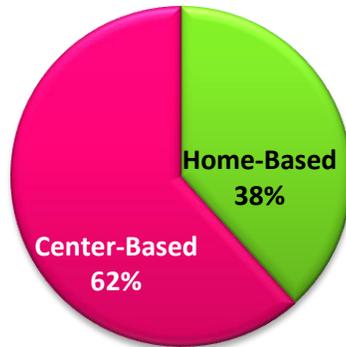


The number of childcare provider facilities participating in the ASQ Project increased from 38 in Phase I to 82 in Phase II. By the end of Phase II, 120 provider facilities had completed training.



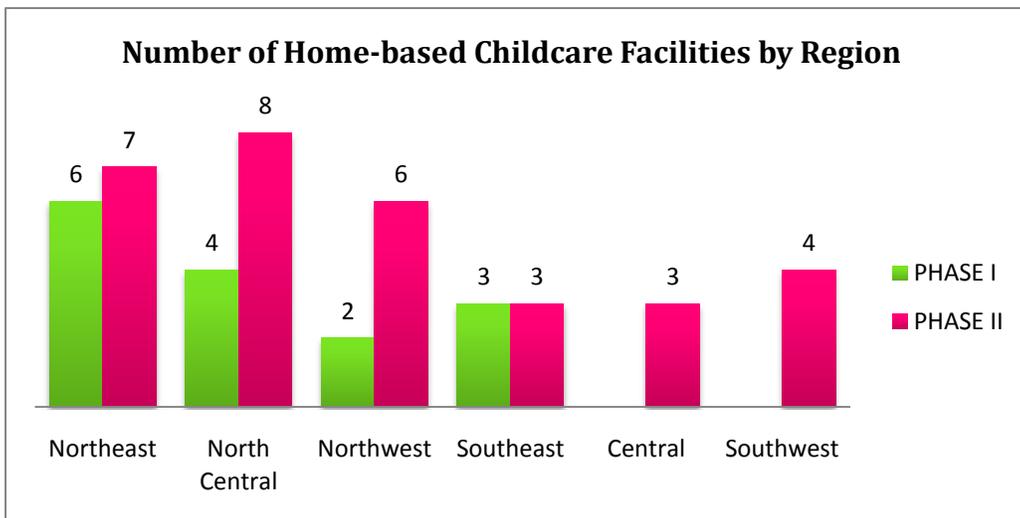
Center-based, home-based and home visitation (eg., PAT, HIPPY) childcare providers were represented in the ASQ project. Center-based programs included large and small capacities, and home-based facilities included providers offering care in their homes and home visitation programs. During Phase I and Phase II, home-based providers comprised 38% of the ASQ facilities and center-based comprised 62%.

Percentage of Home- and Center-Based Provider Facilities

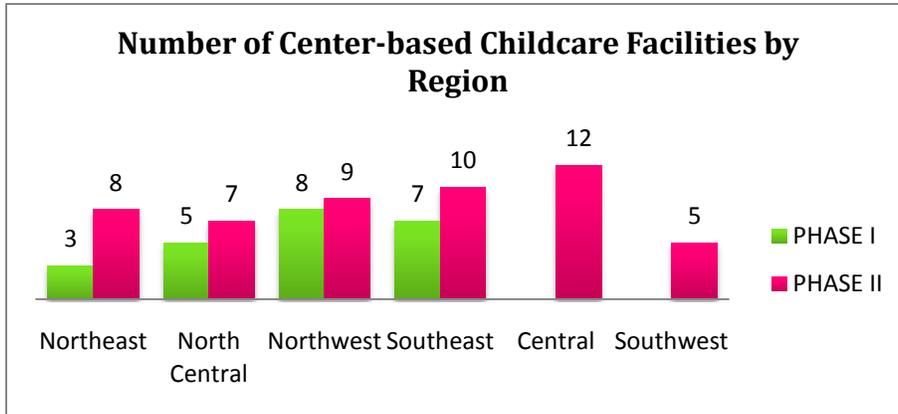


Note: Home Based in Phase II includes two home visitation programs

The number of home-based provider facilities increased from 15 in Phase I to 31 in Phase II. The northwest and northcentral regions had the greatest increase in home-based provider facilities. In Phase II, 7 home-based provider facilities were added in the new R&R agencies in the central and southwest regions.

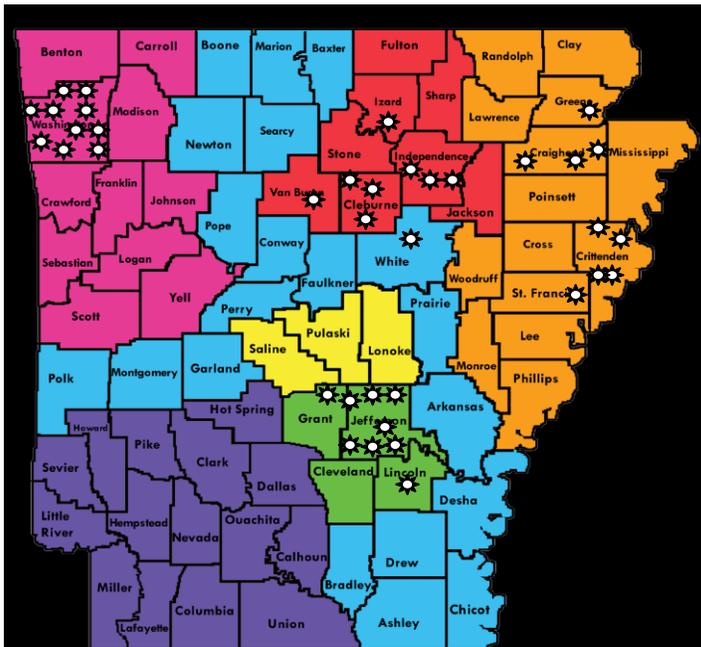


The number of center-based provider facilities increased from 23 in Phase I to 51 in Phase II. The northeast had the greatest increase in center-based provider facilities. In Phase II, 17 center-based provider facilities were added in the central and southwest regions.

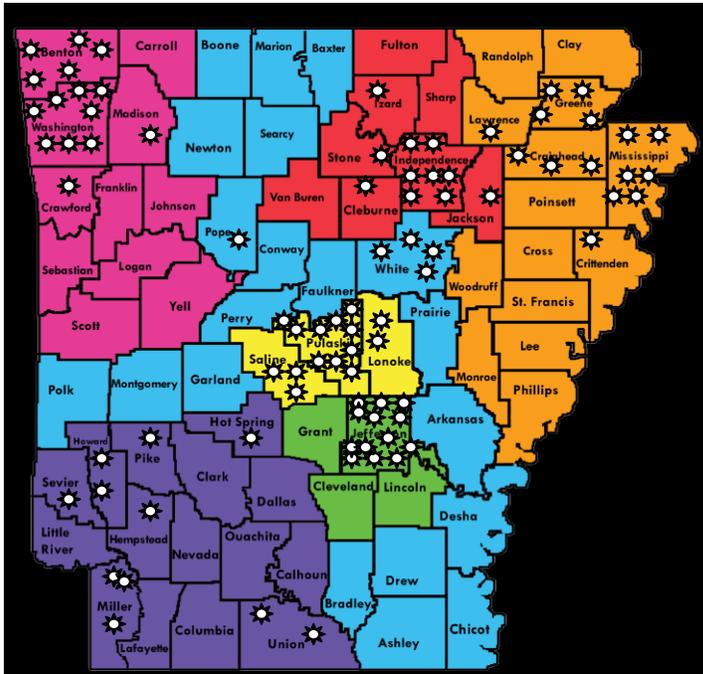


Location of ASQ Facilities

The maps below show the location by county of Phase I and Phase II projects. The final map shows the location of programs that are expected to continue use the ASQ to screen after the project ends.



Phase I ASQ Sites
 4 R&R Areas
 13 Counties
 38 Sites



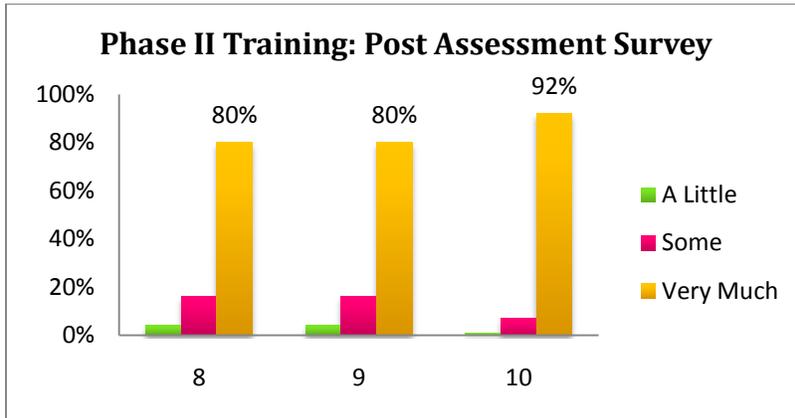
Phase II ASQ sites
 6 R&R Areas
 22 Counties
 82 Sites

Quality of Training: Knowledge Change

The R&Rs were responsible for conducting two-day training sessions for providers in their area. The goal was to increase the knowledge of the ASQ screening protocol for the childcare providers participating in the ASQ project. During Phase II a total of 95 providers were trained. Of those, 5 did not participate in the ASQ project after the training, another 6 withdrew from the project, and 4 providers from Phase I were retrained during Phase II. Two Phase II providers received training during the end of Phase I. Considering dropout facilities; the project had an 88% facility-level implementation rate. In all, the R&Rs trained 218 staff members from the 95 provider facilities during Phase II. There were 82 providers who participated throughout Phase II of the ASQ project.

Providers Trained for ASQ Implementation Phase II							
	NE	NC	NW	SE	Cent	SW	TOTAL
Providers trained	21	17	19	14	15	9	95
Phase II facilities	15	15	15	13	15	9	82
Did not become ASQ facilities	2	0	3	0	0	0	5
Withdrew from Phase II	4	1	0	1	0	0	6
Phase I retraining	0	2	2	0	0	0	4
Phase II facilities trained last year	0	1	1	0	0		2
# STAFF trained	42	39	50	17	47	23	218

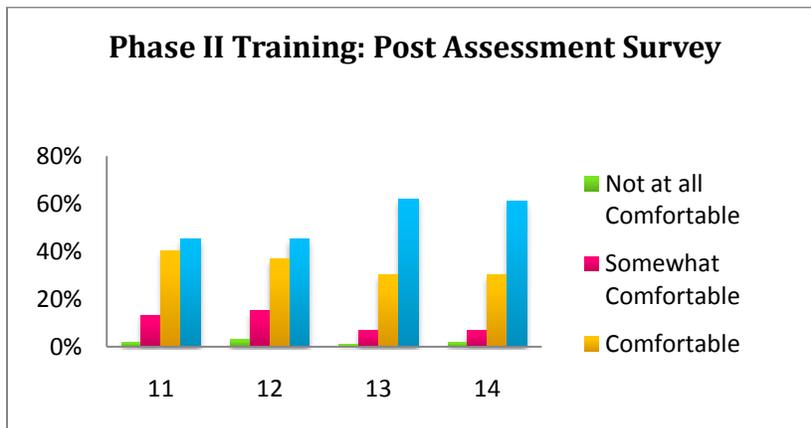
Providers who attended the training were asked to fill out pre- and post-training assessment surveys. In the post assessment survey 80% of the participants said they learned a lot at the training, and the information they had learned would help them serve children with developmental needs. Ninety-two percent thought screening with the ASQ was a good idea.



Questions

- 8. I learned a lot in the training session
- 9. The information I learned will help me work with families & children with developmental needs
- 10. Overall, I think screening with the ASQ is a good idea

In the post assessment survey 85% of providers rated that they were **comfortable to very comfortable** administering the ASQ, and 82% were **comfortable to very comfortable** administering the ASQ-SE after completing the training. More than 90% of the providers said they were **comfortable to very comfortable** understanding the goal of the ASQ and ASQ-SE.



Questions

- 11. I am comfortable I can administer the ASQ
- 12. I am comfortable I can administer the ASQ-SE
- 13. I understand the goal of the ASQ
- 14. I understand the goal of the ASQ-SE

In-depth phone interviews were conducted with 12 providers from Phase I and 22 providers from Phase II. In Phase I providers were asked the question, “**Was the ASQ training helpful?**” The 12 childcare providers interviewed in Phase I all agreed that the training was helpful. Overall the providers liked that training was hands-on and that trainers were knowledgeable and willing to answer questions.

The training was very thorough and informative. We were free to ask questions and have them go over something a second time if we didn't fully understand it.

-Provider in the north-central region

[The R&Rs] were very knowledgeable about what they were doing. [She] even came in and installed it on my computer for me.

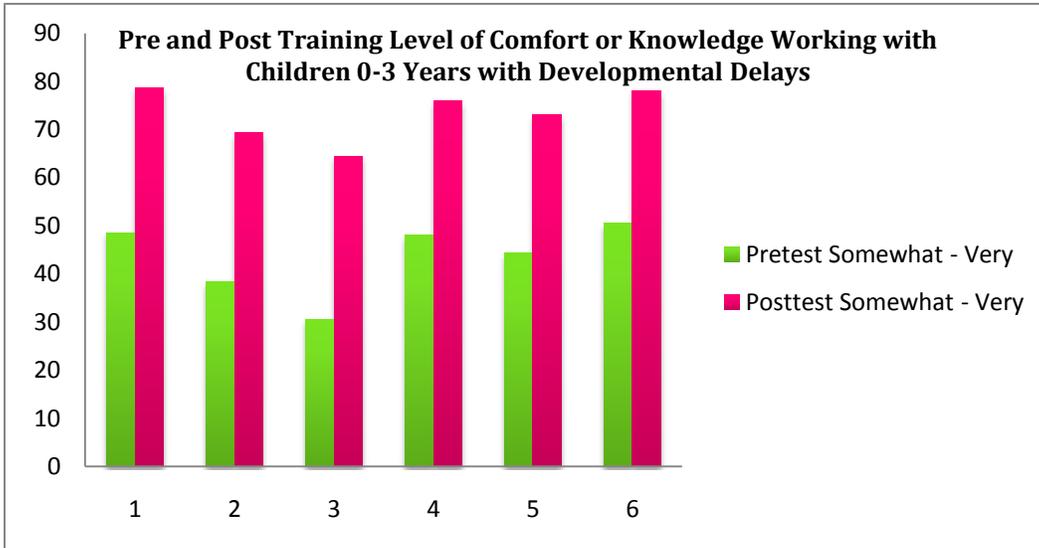
-Provider in the north-east region

One childcare provider reported difficulty understanding the scoring rules, but, because the manual came with the kit, she was able to figure it out. One childcare provider suggested holding the training at a location other than the childcare facility so she could give her full attention to the training.

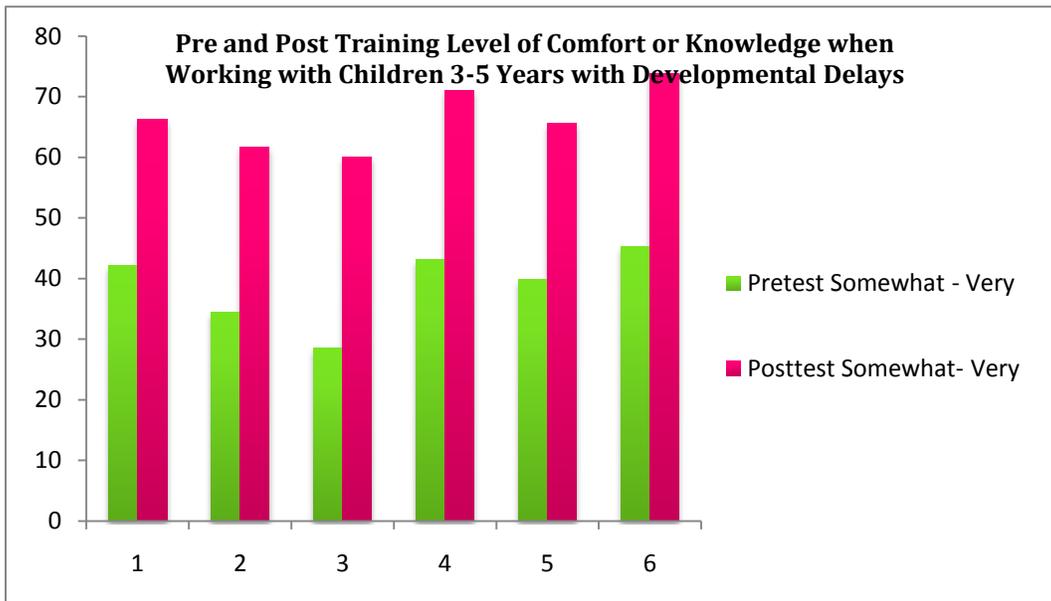
On the pre and post training surveys, participants were asked about their comfort and knowledge working with children with developmental delays. Over 70% were **somewhat** to **very comfortable** they could identify children 0-3 years with developmental delays, talk with parents, make referrals, and intervene during their work with children who screened with developmental delays. Responses showed an increase of 30% or more on all questions related to children 0–3 years.

The survey included the following questions:

1. I have had enough training to identify children with developmental needs
2. I am knowledgeable about social and emotional development in children
3. I am knowledgeable about how to help children with developmental needs
4. When a child has a developmental concern: I am comfortable talking to the parent about the delay
5. When a child has a developmental concern: I am comfortable I can make a good referral for children
6. When a child has a developmental concern: I am comfortable I can intervene with a child during my work with them



Those working with children 3-5 years old showed an increase of over 25% in their responses of being (somewhat to very) comfortable or knowledgeable in working with children with developmental delays.

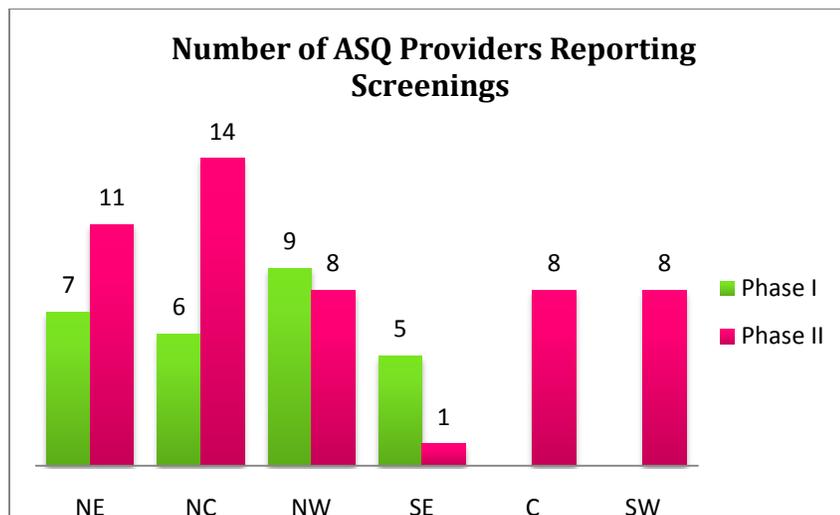


When asked to describe how their R&R assisted in the implementation of the ASQ program all 12 individuals interviewed for Phase I described the R&R as a critical part of the program. The childcare providers described the R&Rs as supportive, knowledgeable, and accessible. Reportedly the R&Rs conducted trainings, followed up regularly with the childcare providers via phone, email and in person. At least one R&R installed the computer software and set up the system for one childcare provider.

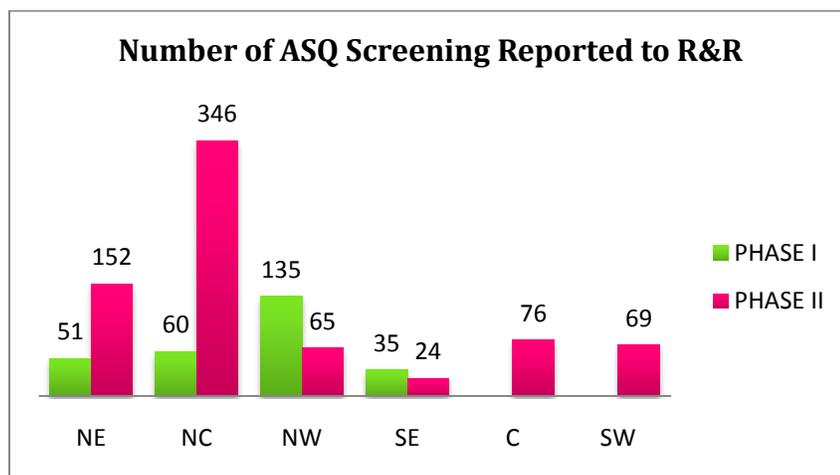
GOAL TWO: Integrate ASQ into Early Childcare Programs

Number of Children Screened

Although there were 38 providers that participated in Phase I, only 27 (71%) reported screening results to their R&R agency. In Phase II 50 (61%) of the 82 providers reported screening results to their R&R agency.



The number of children screened with the ASQ reported by providers increased from 281 in Phase I to 732 in Phase II. That is, over the two years, 1,013 children were screened.



Timing of Screening

Most respondents stated they were not following the screening scheduled recommended by the state. Screening intervals ranged from 4 weeks, 3 months, 6 months or every year on the child's birthday. The reasons for a different timing for screenings included: it was easier to track when the screenings should be completed and to see if the children had made progress or if they needed a referral. In fact, in some programs this resulted in more frequent screenings; but no program reported less frequent than every 6 months.

When we enroll a child we wait four weeks and then use the closest form. If they're 22 months after 4 weeks of being enrolled we'll use the 22 months. If they do well on it, then we put them in to be screened at the next one. The next one would be 36. If they don't do well then it goes in a different file and we screen them again at 6 months.

Provider in the northwest region

I [screen] every three months until I see some improvement and after that I don't screen them.

Provider in the northeast region

It depends on the child. If a child scores low then we screen him every three months.

Provider in the northcentral region

At least one childcare provider expressed concern over the time and cost of copying forms to conduct screenings and to give to parents. However this might be avoided if childcare providers followed the state recommended screening schedule.

We have not had time to get the questionnaires ready and to pass them out to the parents. We have to make copies for all of our parents and we will need the paper and the ink and that will be an extra expense for the daycare so we just waited on doing it.

Provider in the southeast region

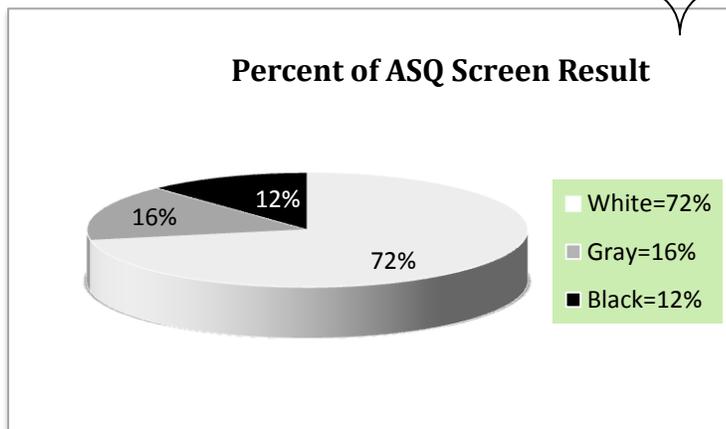
Results of Screening

In Phase I, 221 (78%) of the ASQ screenings reported were classified white (no need for concern), 44 or 17% were classified gray (monitor range), and 16 or 5% were classified black (referral range).

ASQ Screenings Reported by Phase I Providers				
Region	Number Of ASQ Reported	Number In White Area	Number in Gray Area	Number in Black Area
North East	51	41	9	1
North Central	60	33	15	12
North West	135	124	9	2
South East	35	23	11	1
TOTAL	281	221 (78%)	44 (17%)	16 (5%)

In Phase II, 530 or 72% of the ASQ screenings reported were classified white (no need for concern), 116 or 16% were classified gray (monitor range), and 86 or 12% were classified black (referral range). For 299 screens providers used the recommended screening months of 6, 18, 30, 42, and 54. Seventy three percent (73%) of those were in the normal developmental range, 17% were in the monitor range, and 10% in the referral range.

ASQ Screenings Reported by Phase II Providers				
Region	Number of ASQ Reported	Number in White Area	Number in Gray Area	Number in Black Area
North East	152	94	27	31
North Central	346	254	59	33
North West	65	40	17	8
South East	24	17	2	5
Central	76	58	10	8
South West	69	67	1	1
TOTAL	732	530 (72%)	116 (16%)	86 (12%)



Description of Provider-Parent Input

Childcare providers were asked to complete a provider-parent survey when they met with parents to share the results of the ASQ screening. The form is designed so that childcare providers complete one side of the form and parents complete the other. Due to several logistical problems (e.g., implemented after provider training began), the survey was not implemented in several areas. Provider-parent survey forms from three R&R areas were completed and returned. Those regions were the northcentral, northeast and northwest.

The providers in those regions completed a total of 563 screenings, but only 196 provider-parent Surveys were completed. In other words, provider-parent surveys for approximately 35% of the screenings completed in those three R&R areas were completed and turned in. In these three regional areas the ASQ screenings reported included 388 in the white range, 103 in the gray range and 72 in the black range. Of the provider-parent satisfaction surveys that were completed, 105 (27%) were in the white range, 46 (44%) were in the gray range and 45 (62%) were in the black range. These numbers may indicate childcare providers were more concerned about conducting parent conferences when a child was in the gray (monitor) or black (needs referral) range.

ASQ Results by Region Provider-Parent Survey					
		White	Gray	Black	
Region	NC	76	36	33	145
	NE	22	6	8	36
	NW	7	4	4	15
Total		105	46	45	196

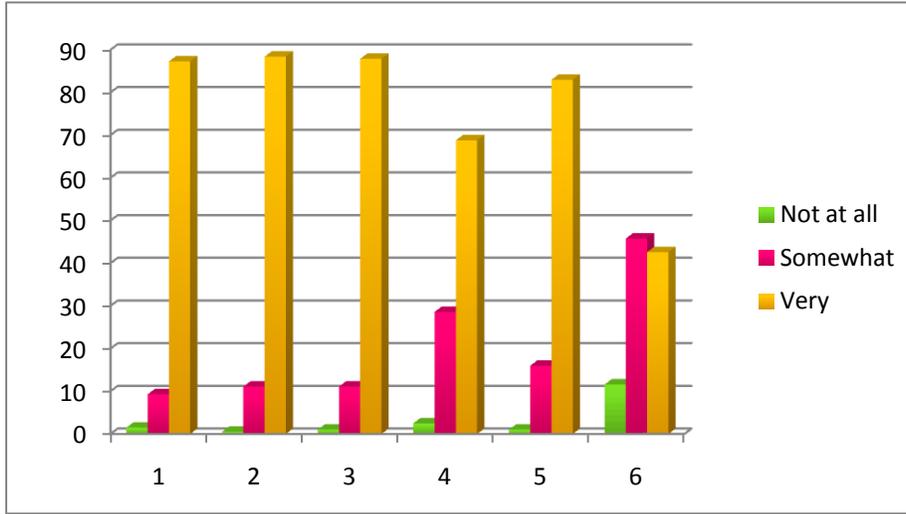
Seventy-two percent of the provider-parent surveys were completed by home and home visitation providers.

ASQ Results by Childcare Provider Type Provider-Parent Survey					
		White	Gray	Black	TOTAL
Provider Type	center	30	9	14	53
	home	40	8	6	54
	home visitation	35	29	25	89
Total		105	46	45	196

In addition to the provider-parent survey, directors of Phase I and Phase II facilities were contacted in the spring of 2011 to determine their response to ASQ use in their childcare programs. In February/March of 2011 a short phone interview was conducted with 34 of 37 directors of Phase I facilities. Twelve of the Phase I facilities and 22 of the current Phase II facilities were contacted for a longer phone survey.

Parent Engagement

The parent-provider survey assessed parents’ perceptions and attitudes to the use of the ASQ screening tool. Overall, parents were supportive of the ASQ. For example, over 85% of parents found the ASQ questions clear, were comfortable with the questions, and understood the purpose. A majority (nearly 70%) indicated they learned something about the child’s development, and over 80% found the information helpful.



Questions

1. Were the questions on the Ages and Stages Questionnaire clear?
2. How comfortable were you answering the questions on the Ages and Stages Questionnaire?
3. Do you understand the purpose of the Ages and Stages Questionnaire?
4. How much did you learn about your child's development after taking the Ages and Stages Questionnaire?
5. Was the information you were given about your child's development helpful?
6. How likely are you to discuss the results with your child's doctor?

Parent responses were listed as:

Not at all, Somewhat or Very (Clear, Comfortable, Helpful, Likely)

Just over 40% indicated they were ‘very’ likely to discuss the results with their child’s doctor.

ASQ Result By Plans to Visit Physician					
<i>Q6. How likely are you to discuss the results with your child's doctor?</i>					
		Not at all likely	Somewhat likely	Very likely	Total
ASQ Result	White	16	51	35	102
	Gray	4	19	21	44
	Black	2	16	25	43
Total		22	86	81	189

- 40 of 44 (91%) that received gray score were somewhat to very likely to discuss results with child's doctor.
- 41 of 43 (95%) that received black score were somewhat to very likely to discuss results with child's doctor.
- 81 of 87 (93%) that received gray/black score were somewhat to very likely to discuss results with child's doctor.

From the in-depth interviews, childcare providers stated the majority of parents were fine with completing the ASQ.

*They like the fact that they are a part of their child's development.
Provider in the northwest region*

*I present it to them as a positive thing. If there's an area they're lacking in,
let's get a hold of it now before they get too far behind.
Provider in the northcentral region*

*[Parents] found it useful. [My R&R taught me how to approach parents to
ask them to complete the screener] Parents do not like for [their] kids to be
screened and [without] knowing that they being screened
Provider in the southeast region*

Childcare providers reported common reasons the parents did not participate. These included: 1) they were too busy; 2) they had a recent doctor's visit and knew children were on task, 3) the screening would take too much time, or 4) that it was something new and different for daycare. Most respondents thought parents seemed more aware of their children's development after using the ASQ.

*Several [parents] said there were things in there that I didn't even know [my
child] could do, like buttons.
Provider in the north central region*

*A few parents said it would help them the next time they were going to go to
their doctors for their yearly checkup. [Parents said they] were going to talk
to their doctors about this questionnaire and the findings.
Provider in the southeast region*

*Some parents [said] I didn't know this but I'm glad that we found out.
Provider in the northeast region*

Provider Adoption of ASQ

Of Phase I providers interviewed by phone, 77% (26 of 34) were still using the ASQ as a screening tool. Thirty of the 34 reported that they used the ASQ-SE in the previous year, and of these, 71% were still using the ASQ. In April 66 of the Phase II childcare providers were interviewed about their use of the ASQ. Fifty of the 66 (75%) stated that they were currently using the ASQ, and 12 additional providers (18%) stated they plan to use it. This is consistent with the 50 that had reported their ASQ results to the R&R agency by the end of May. Only one of the Phase II facilities said they were not interested in using the ASQ.

When asked if they planned to continue using the ASQ screening tool after participating in the Phase II project, the majority said that they would.

Phase II Providers Phone Survey		
<i>Do you plan to continue using the ASQ/ASQSE after June?</i>		
	Frequency	Percent
ASQ & ASQ-SE	47	59.5
ASQ ONLY	6	7.6
NEITHER	2	2.5
NOT SURE	2	2.5
NO RESPONSE	22	27.8
TOTAL	79	100.0

Parents are asked to fill out the ASQ and return the form to the childcare provider who will score the form and schedule a conference with the parent to discuss the results. When childcare providers were asked how many parents actually filled out the forms, only 25% said less than half, 12% said about half, and 63% said that most or all of the parents filled out the form. During phone interviews with the Phase I childcare providers, only 10% of those that responded said that less than half of the parents filled out the form, 37% said that about half of the parents filled out the form, and 53% said most or all of the parents filled out the forms.

Most (85%) of directors supported the ASQ as a good idea. In phone interviews, directors noted that they believe the ASQ helped children get therapy with a co-op, it helped families open their eyes to a child's needs, and children got services sooner.

Modifying Classroom Activities as a Result of ASQ

Childcare providers were asked on the provider-parent Survey if they would modify their classroom planning and activities as a result of the ASQ screenings. Most childcare providers indicated they would not make changes for children who screened in the white or gray areas. More than 60% said they modified activities for those children who screened in the black area.

Examples of changes they made included

- incorporating more fine motor skills.
- adding more social skills exercises.
- using music to calm babies that has trouble sleeping.
- changing discipline techniques with children who screened for behavior.
- more one-on-one activities.
- incorporating ASQ and benchmark results into curriculum/lesson plans.

Childcare providers participated in a short phone survey in May 2011. Fifty percent of the Phase II childcare providers said they had changed day-to-day activities with children who screened gray or black. Those changes included

- working on activities for delayed areas.
- creating activity sheets for parents.
- using more one-on-one teaching.

All of the childcare providers who participated in the in-depth phone interviews reported that implementing the ASQ had a positive impact on their interaction with the children.

I think it has really helped the teachers form their curriculum. Because they know a little more about where each child is and where they need to be. So it's easier for them to come up with activities, and because of the activity book that we got, to come up with activities to do with them to help them learn and grow.

Provider in the northwest region

I think that it has made my teachers more aware of their interaction with the children and the goals they have for their children. I'm not just playing with them. I'm playing with them with this specific purpose in mind.

Provider in the northwest region

I know more of what [the children] are capable of doing, what they can't do.

Provider in the southeast region

When you have it down on paper, it helps you to understand things better and to know what areas to focus on with that child, and [it helps you to better] understanding some behaviors.

Provider in the north central region

It has helped us to implement the different areas that we have in the classroom. We make sure we have enough [variety in our centers] where children [need to work on specific skills], so they can practice more.

Provider in the southeast region

The format of the ASQ [is] a lot better than [our previous assessment] and [having] the parents' [input is] a lot better.

Provider in the southeast region

My [employees have] their CDAs but they are not qualified teachers. They're not Masters teachers. It's daycare. No Master teacher is going to work for \$7.25 an hour. It's not going to happen. So with the Ages and Stages, it has given [my CDAs] a stepping point so that they understand what the milestones are, and they can better help the children. Ages and Stages [is good] because it breaks down those milestones.

Provider in the northeast region

GOAL THREE:

Identify barriers to on-going use of ASQ among parents, providers, and physicians

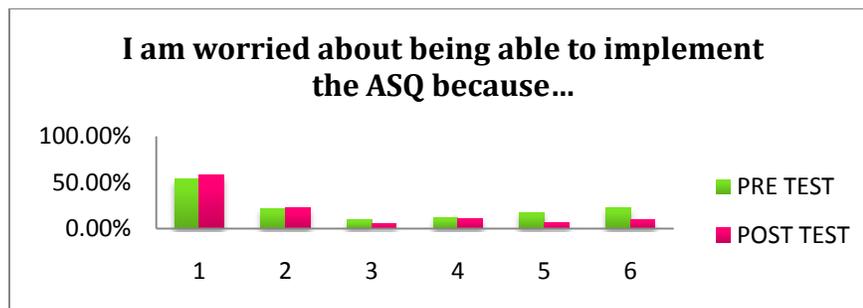
Barriers Identified by Providers during Training

After training the R&Rs were asked to note any comments regarding barriers that the providers voiced during the training. Those barriers and concerns included

- organizing the materials.
- conducting the screenings.
- scoring and reporting screenings.
- getting parents to complete the screening.
- increasing parent participation.
- reviewing findings with parents.
- getting parents to return paperwork.
- wanting additional resources to train staff.
- tracking the children who need screening.
- calculating the ages.

Pre and Post Assessments by Providers during Training

Pre and Post training assessments asked providers to identify their concerns about implementing the ASQ. While their concerns about having resources or training to implement the screening decreased because of the training, their concerns about getting parents to cooperate and finding time to incorporate the project into their program remained the same.



Questions

1. Getting parents to cooperate
2. Finding time to do it
3. Remembering to do it
4. Getting the child to cooperate
5. Lack of resources
6. Lack of formal training

Rating of Provider Support by R&R Staff

After training, R&Rs were asked to rate each of the childcare providers in three areas: Likely to implement the ASQ, Supportive of the ASQ, and Overall reaction to the ASQ. In all areas, providers rated each area high. As seen below, all but one area the average rating by providers was above 4 on a scale of 1 to 5.

That is, at the end of training R&Rs felt most providers were likely to implement the ASQ project; however, multiple facilities withdrew from the project during the year. New facilities were recruited and trained. Unfortunately, this delayed their implementation of ASQ screenings.

R&R Staff Ratings for Providers Attending Training			
REGION	Likely to Implement the ASQ	Supportive of the ASQ	Overall reaction to the ASQ
NW	5	5	5
NE	4.7	4.9	5
NC	4.6	4.6	4.8
CENTRAL	4.4	5	4.9
SW	3.7	4.4	4.4
SE	4.5	4.8	4.8

Note: ratings on 1 to 5 with 5 the most positive

Barriers Identified by R&R Agencies at End of Phase II

At the end of May interviews with R&Rs identified barriers experienced during Phase II of the ASQ Project.

Barriers experienced by childcare providers

- Needed better organization and time management
- Needed step by step directions on how to implement
- Needed more time to complete the paper work
- Needed more time to work with parents
- Needed to balance the ASQ project with other duties
- Needed a plan of action for implementing the ASQ project
- Needed more cooperation from parents, difficulty getting consent forms back
- Felt overcommitted, many were also working on Better Beginnings
- Needed additional training or retraining

Barriers experienced by R&R agency staff

- Overextended—too many facilities to work with, unable to give needed one-on-one time
- Training providers who then drop out of the project
- Not enough time
 - Having time to call providers to get the monthly report, then creating the report

- Insuring all activities were completed: questionnaires, parent surveys, and physician follow-up
- Getting providers to complete and send the provider-parent surveys
- Understanding the importance of timely reporting

Barriers Identified by Phase II Providers during Phone Surveys

A phone survey in May 2011 of Phase II childcare providers listed the following barriers they experienced during the year.

- Getting parents involved
- Getting parents to return forms
- Having parents understand the purpose of the screening
- Scheduling parent conferences to discuss screening results
- Having parents understand the importance of early intervention
- Having time to complete the screenings
- Getting it completed and sent to doctors
- Not knowing whom to send project forms and reports
- Getting everything to the R&R
- Making sure staff knows how to implement results into curriculum

Childcare providers identified parent involvement (e.g., increasing participation and returning forms) as a universal challenge. However, the provider-parent survey indicated that once parents completed the ASQ their response was very positive. Parents who filled out the survey responded that they were very comfortable with the questions and found the ASQ screening tool helpful.

When asked “How comfortable were you answering the questions on the Ages and Stages Questionnaire?” **86%** of parents responded they were very comfortable.

When asked “How much did you learn about your child's development after taking the Ages and Stages Questionnaire?” **69%** of parents responded they had learned a lot about their child's development.

When asked “Was the information you were given about your child's development helpful?” **83%** of parents responded the information was helpful.

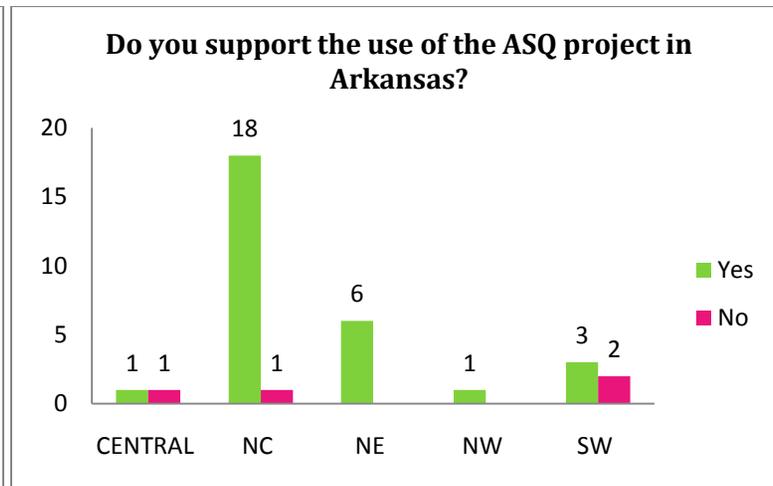
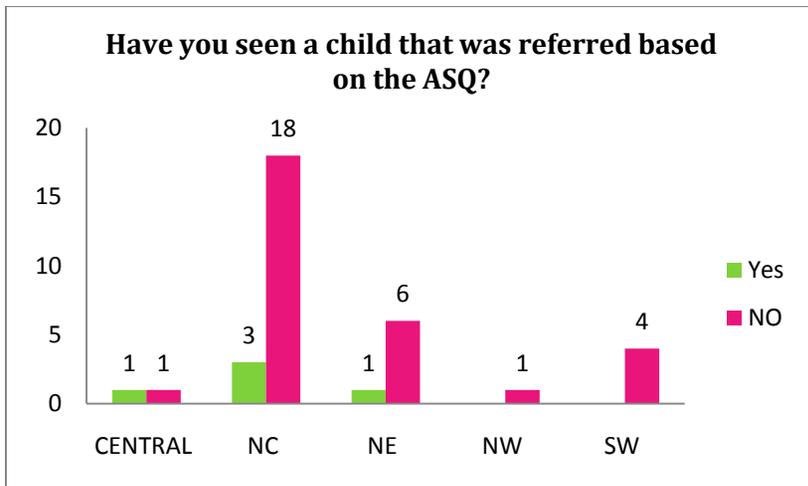
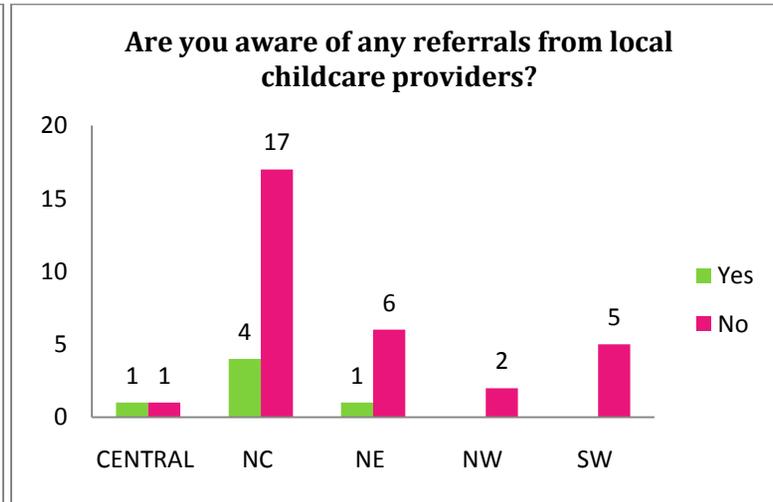
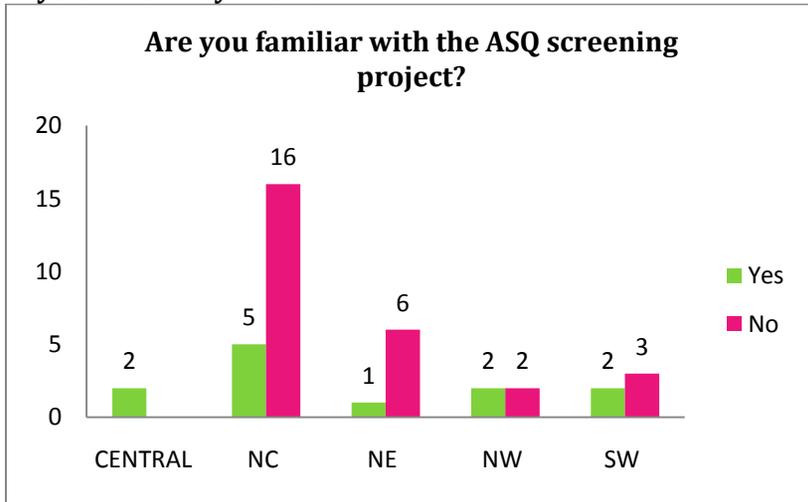
Barriers Related to Physician Awareness of ASQ Project

One of the aims of Phase II of the ASQ Project was to create greater communication between childcare providers, parents, and physicians concerning the results of ASQ screenings. The provider-parent survey asked for the name of the physician who would receive the results. Most physicians received information on only one or two children who screened in the gray or black area. Several physicians in the northcentral area would have received multiple screening results from the ASQ project.

Raising physicians' awareness of the ASQ project remains a difficult task. In fall of 2010, childcare providers gave the R&R staff a list of doctors and clinics that parents identified as their children's physicians. The R&Rs contacted these physicians' offices and provided a packet of information about the ASQ project. Once an ASQ was completed, the childcare providers sent the results of ASQ screenings to the child's physicians.

A phone survey conducted in May 2011 with the physician's offices showed very little awareness of the ASQ Project. Of the 40 offices that were interviewed, 12 said they were familiar with the ASQ screening project, 6 were aware of referrals from local childcare providers, 5 had seen a child because of an ASQ screening, and 4 thought the information from the screening was helpful. However, 29 of the 33 physician offices that were contacted said they supported the use of the ASQ project. Physician responses are displayed on the following page.

Physician Survey Results



Solutions Suggested by R&R Agencies

R&R staff members have recommended a number of solutions to remove or lower some of the barriers to future ASQ participation:

- Do not send permission slips home with parents. Provider has the parent complete and sign while at the childcare center.
- All partners in the project put together a standard Plan of Action that can be used by childcare providers.
- Introduce peer-to-peer contact from recognized medical entities to physicians to help open the door for the R&R staff to meet with their offices.
- Add a list of the childcare providers in the project to the packet the R&R leaves with the physicians.
- Provide examples of how to organize a childcare facility to implement the ASQ.
- Review and revise reporting forms for providers and R&R agencies.
- R&R agencies should make sure the childcare facilities understand the reporting procedure completely.

These solutions have been used to create a plan of action for a third phase of the ASQ project.

Direction for Phase III

Strategies are planned to address concerns identified during Phase II:

Physician Gaps

New: With DHS/DCCECE, UAMS will facilitate the development of a Continuing Medical Education training (CME) for Arkansas physicians to make them aware of the use of the ASQ screening project with early childcare providers. Addition of the CME training will expand efforts to make physicians more aware of the ASQ project and engage them as partners in the early intervention process. CME training will be available to all professional staff in target clinics. Pre/Post tests will be included in the CME training to assess knowledge gained.

Continued: R&R staff will contact local physicians to make them aware that local child care providers are conducting the ASQ screenings. After screening, childcare providers will send the screening results to the physician identified by the parent as the child's medical home. Clinic offices will be contacted by evaluation staff to assess awareness and support by physicians.

R&R Support

New: An Action Plan that thoroughly explains the implementation process has been developed by the R&R staff and will be provided to participants at the ASQ training workshops.

Continued: R&R staff will continue to offer retraining for Phase I and II providers. The on-going support that R&R staff provides the childcare facilities during implementation of the ASQ project is essential for their success and will continue during Phase III. The number of childcare providers that will be added during Phase III has been reduced from Phase II levels due to funding but will enable the R&Rs to provide each participant more support.

Teacher Link

New: A new process for reporting ASQ screening information will be developed by UAMS. An on-line form will be created to allow participants to record each screening. Alternatives to this reporting system will be provided through fax, email, and phone contacts.

New: In-depth parent interviews are planned for a limited number of parents whose children score in the gray and black areas. Interviews may be conducted by the childcare provider or R&R staff, so participants can remain anonymous. Incentives will be provided to those willing to participate.

Continued: Evaluation of the R&R training of providers at target facilities and use of the provider-parent survey will continue. A phone survey of Phase I and II child care providers will be conducted during the fall to determine who will continue to use the ASQ screening process.

New: Methods to assess the use of ASQ screening tool by Arkansas childcare providers other than the participants of the DHS/DCCECE funded Phase I, II, and III projects will be identified during Phase III.

Summary

Developmental screening is an important step in identifying children who need early intervention services (Bear, 2004). In 2010, the American Academy of Pediatrics reaffirmed the policy that screening tests should be administered at the 9, 18, and 30 month well child visit (AAP, 2006). According to the CDC, less than 20% of children between 10 months and 5 years of age receive a developmental screening during a health care visit (NSCH, 2007). Traditionally, the responsibility of developmental screening has fallen on the physician. However, there are three key groups who play a role in the early identification process: parents, childcare providers, and physicians. High quality childcare programs are being encouraged or required by state standards to include routine screenings.

This project assessed the feasibility of the Ages & Stages Questionnaire (ASQ) to identify children 6 months to 5 years at risk for developmental delay in home- and center-based childcare facilities throughout Arkansas. The ASQ project had three goals:

- 1) Increase the knowledge of childcare providers
- 2) Integrate the ASQ into early childcare programs
- 3) Identify parent, provider and physician barriers to on-going use of the ASQ.

The UAMS evaluation of the ASQ project addressed each of these three goals using both quantitative and qualitative methods.

Provider Knowledge Increased

The project increased the number of childcare providers trained, and pre/post tests confirmed knowledge gained in training. Four R&R agencies participated in Phase I. In Phase II the Arkansas Department of Human Services successfully equipped all six R&R agencies in the state to participate. The six agencies trained 120 provider facilities in 29 Arkansas counties. From Phase I to Phase II, there was a 115% increase in the number of participating facilities across the state (from 38 to 82). Taking into account facilities that dropped out after training, the project had an 88% facility-level implementation rate.

More than 80% of the individuals participating in the ASQ training said they learned a lot and were better prepared to work with families and children with developmental disabilities. They also thought ASQ screening was a good idea. After the training, more than 85% reported they understood the goal of the ASQ/ASQ-SE and were comfortable administering the screen. Post training assessment revealed participants were more confident in their ability to identify children with disabilities, to help identified children, and to talk to parents about developmental delays. Participants showed a 25% to 30% improvement in feeling comfortable or knowledgeable in working with children with developmental delays.

ASQ Was Successfully Integrated

Childcare providers successfully integrated the ASQ into their programs. The number of ASQ screenings completed during Phase II increased by 160% from Phase I to Phase II. In Phase I, 71% of the facilities reported screening results to their R&R agency. In Phase II, 61% of the facilities reported results. Over the two years, 1,013 children were screened.

Among the 221 screenings conducted in Phase I, 17% were classified in the monitor range (gray), and 5% were classified in the referral range (black).

Of those 732 children screened during Phase II, 116 (16%) were classified as should be monitored (gray) and 86 (12%) were classified as needing further assessment for possible developmental delay (black).

Providers reported they changed their day-to-day activities as a result of conducting the ASQ screenings. More than 60% of the providers reported making changes in their curriculum for children who screened in the referral category.

Ninety-three percent of Phase II providers are continuing or planning to use the ASQ in their program.

Barriers Were Identified

Parent, provider, and physician barriers to on-going use of the ASQ were measured through phone surveys with childcare providers and physicians and through in-depth interviews with childcare providers.

Parent Views

Overall, parents were supportive of the ASQ. The two biggest barriers associated with parents were time to complete the screener and understanding the purpose of the screener.

Provider Views

Providers reported “parents are busy” and found it difficult to get parents to return the forms and to schedule a conference to discuss the results and understand why it is important to screen children early. However, providers reported the parents who completed the screener seemed to have a better awareness of their child’s development. Many providers implemented an alternative screening schedule rather than the one recommended by the state. Providers choose to conduct screenings twice a year for all children because it was easier for them to track when children needed to be screened rather than keeping up with individual birthdays.

Physician Views

Raising awareness of the physicians continues to be a difficult task. The R&Rs took information packets about the ASQ Project to local physicians and clinics in the fall of 2010. When contacted by UAMS in May of 2011, only 12 of the 40 physicians who participated in a short phone survey said they were familiar with the ASQ project. Although 29 said they supported the use of the ASQ project in Arkansas.

Phase III Direction

To raise awareness of the ASQ project and engage physicians as partners in the early intervention process, UAMS and DHS/DCCECE will develop a Continuing Medical Education training (CME) for Arkansas physicians.

Recruitment of new child care providers will be reduced from Phase II levels. However, this will enable R&Rs to provide more support to each participant.

Evaluation of the training process will continue. UAMS will develop an online form for reporting ASQ screening information. In-depth interviews looking at parent response to the screening process are planned for a limited number of parents whose children score in the gray/black area. Methods to assess the use of ASQ screening tool by Arkansas child care providers other than the participants of the DHS/DCCECE funded Phase I, II, and III projects will be identified during Phase III.

Engaging home-based and center-based childcare providers is a viable method for improving the early identification process. R&R agencies are critical to the success of implementing statewide screenings and to closing the loop between childcare providers and physicians. State and licensing agencies can play a key role, and Arkansas can serve as a model in this effort.

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Appendix 1: Phase I Director Interview Protocol

Time of Interview:

Date:

Place:

Interviewer:

Interviewee:

Introduction:

I want to thank you for taking time to talk with me today. I am working with the University of Arkansas and Medical Sciences at the request of the State of Arkansas Division of Early Childcare to evaluate the use of the use of the Ages and Stages Screening in early childcare programs in Arkansas. So that I can listen to you and not have to take time to write detailed notes, I will be recording and transcribing what we say during our time together. If you would like we could send you the completed transcription your review and approval.

What we are interested in understanding is how childcare providers have implemented the Ages and Stages Screening tool. Please feel free to be as in-depth with your responses as you wish.

Demographic Information	Observations/Comments
<p>My records show that the childcare program you are working with is named _____. What is the name of the daycare you work for?</p> <p>What is your position with that daycare?</p> <p>How long have you been in that position?</p>	

Interview Questions

1. Did you receive training for the Ages & Stages – it is often called the ASQ? When? Was the training helpful?	Observations/Comments

<p>2. Can you describe how the Resource and Referral – often called R&R - in your area helped your program implement the use of the ASQ. (Probe: Were they helpful? What did you like best? Need most?)</p>	
<p>3. Are you still using the Ages & Stages Screening and the Ages Social-Emotional – often called the ASQ-SE? (Probe: If not, why not?)</p>	<p>Observations/Comments</p>
<p>4. The State is recommending that programs screen all children in their program at 6, 18, 30, 42, and 54 months of age. Are you able to do this with most children? Do you screen more or less often? If not now, were they able last spring and why did they stop.</p>	

<p>5. How have parents responded to completing the Ages and Stages Questionnaire? (Probe: Do you think they find it useful? Do you think they are more aware of their child’s development? Have any parents declined the opportunity to have the child screened? Is so, why?)</p>	<p>Observations/Comments</p>
<p>6. Please describe any other challenges you have experienced implementing the ASQ or ASQ-SE? (Probe: What barriers kept you from screening all children at each recommended age? How were these concerns addressed/resolved? Who do you turn to when there is a problem?)</p>	<p>Observations/Comments</p>

<p>7. How has completing the Ages and Stages Screening Program impacted your interaction with the children & the parents in the daycare? (Probe: How has it changed what you do day to day?)</p>	<p>Observations/Comments</p>
<p>8. Thinking of a child that had a ‘gray’ or ‘black’ score based on the Ages and Stages, can you give some examples of what changed in the classroom or other services the child received after you reviewed the results?</p>	<p>Observations/Comments</p>
<p>9. How did you encourage parents to follow up with their doctor to discuss the results? (Probe: Did parents tell you if/when they followed</p>	<p>Observations/Comments</p>

<p>up with a physician? Or what type of referrals did you make?) What do you think got parents to follow up? Why didn't some parents not follow up?</p>	
<p>10. Are you supportive of the Ages & Stages Screening Program? (Probe: why or why not?)</p>	<p>Observations/Comments</p>
<p>11. What recommendations do you have for early childcare providers who plan to implement the Ages & Stages Screening Program? (Probe: For teachers? For directors? For parents?)</p>	<p>Observations/Comments</p>

<p>12. Is there anything else you want to tell me about the Ages & Stages Screening Program? To thank you for your time and valuable information, we will be sending you a check for \$50. Unless you tell me otherwise, it will be in the name of {say their name and verify spelling}. What address can I send your thank you check to make sure you get it? Thank you for your time.</p>	<p>Observations/Comments</p>
	<p>Name:</p> <p>Address:</p> <p>City:</p> <p>Zip:</p>

Appendix 2: Phase II Providers Phone Survey

Date: _____ **Name of Provider Facility:** _____

R & R Area: _____ **Director's name:** _____

Results of call:

Conducted interview with Director or _____ why: _____

Phone number disconnected

Person did not know about ASQ and director not available (this might happen if the center has new ownership or all staff from last year gone).

No answer (mark this only after you have tried 5 times at 5 different times a day)

Call Log

Date /Time Called	Results/Notes

I am _____ with University of Arkansas for Medical Sciences. I am trying to reach **Director's name.**

The Division of Child Care for the State of Arkansas has asked us to conduct a survey of the childcare facilities that participated in the Ages and Stages Questionnaire project last year. Our records show that your center was part of that project last spring. That is, you or some of your staff were trained to use the ASQ (*repeat Ages and Stages if they ask*). Is that correct?

Yes No

If you have time now I would like to ask a few brief questions about your experience with the use of the Ages and Stages Questionnaire in your facility, or I can call you back at a time later today when you could be available to answer my questions.

1. Are you still using the Ages and Stages Questionnaire to screen for developmental delays this year?

Yes No

2. Did you usually use the Ages and Stages SE (Socio-Emotional) form also?

Yes No Just when ... _____

3. If yes, are you still using the ASQ-SE?

Yes No

4. Can you estimate about how many parents were willing to fill out the ASQ last year? Most, about half, or not many?

Not many About half Most

5. Did you receive any information from physicians based on the ASQ screens you sent to them?

Yes No

Comments: _____

6. Overall do you think screening with the ASQ is a good idea?

Yes No

Comments: _____

7. Our information shows that _____ (number) ASQ forms were completed last year. Does that number seem about right to you?

Yes No

8. Would you estimate the number of children that were in your facility last spring to be _____ (number).

9. Do you have new staff that you would like to receive the ASQ training?

Yes No (If yes, 'Great, I'll pass that information on to the trainer!')

10. Would you be willing to participate in a longer survey about the ASQ? If so, it would last about an hour and you would receive \$50 to thank you for your time.

Yes No

11. Best time to contact for longer survey? _____

12. Phone number to use at that contact time? _____

13. Name of Participant. _____

14. Name of provider facility. _____

Appendix 3: Cover Sheet for Trainers

Date of Training: _____

R&R Trainer: _____

Instructions:

Instruct each participant to complete a Pretest ASQ form. Ask each participant to count off around the room and note the number on their Pretest form and on a separate page. After the training, ask participants to write the same number on the Post test form. Our goal is to be able to match each person's pre and post test forms without having them identify themselves.

Agency Name	Number of staff trained today	Approximate number of children served 0 to 5 at agency	Rate agency		
			Likely to Implement 1= No 5 = Yes	Supportive 1= No 5 = Yes	Overall reaction to ASQ 1= Poor 5 = Good

The *number of staff trained* will let the evaluation team know how many pre and post tests we should have in the pile. This will help us double check ourselves.

The *Approximate number of children served 0 to 5 at agency* will let the evaluation team know about how many children should be assessed with an ASQ over the course of the year.

Rate Agency – This is very subjective, but we will use to give us an initial rating on the three areas.

Rate 1 = 'Not Very Positive' to 5 = 'Very Positive'

1. *Likely to Implement* – Reaction suggests that the agency staff will conduct ASQ and ASQ-SE on schedule.
2. *Supportive to ASQ Use* – Even if they have concerns at their own site, they think it is valuable or a waste of time.
3. *Overall Reaction* – For example, many participants said positive or negative things during training.

1. Was the training completed? Please comment on any event that caused the training to be altered (i.e., shortened, some areas skipped, etc.).

2. Please note any comments regarding barriers, quotes of positive or negative nature, or other events from the training related to implementation and reaction.

Please keep this and the pre/post survey tools together in an envelope and mail to the evaluation team at:

Melanie Chapin-Critz
Partners For Inclusive Communities
2001 Pershing Circle, Suite 300
North Little Rock, AR 72114

Direct questions to Mrs. Chapin-Critz at 501-682-9933 or by email to mjchapincritz@uams.edu

Appendix 4: Pre-Assessment Questionnaire

Date of Training: _____

Name of Provider Agency: _____

Trainer: _____

Unique Number to Match Pre and Post: _____

	Yes	No	Don't know		
1. I have attended ASQ training within the last two years.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
2. My program/agency already uses the ASQ regularly to screen children for developmental needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		
	Not at all	A little	Some	Very much	
3. I have had enough training to identify children with developmental needs.					
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
	Not at all knowledgeable	Somewhat knowledgeable	Knowledgeable	Very knowledgeable	
4. I am knowledgeable about social and emotional development in children.					
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
5. I am knowledgeable about how to help children with developmental needs.					
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
	Not at all comfortable	Somewhat comfortable	Comfortable	Very comfortable	
When a child has a developmental concern:					
6. I am comfortable talking to the parent about the delay.					
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
When a child has a developmental concern:					
7. I am comfortable I can make a good referral.					
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
When a child has a developmental concern:					
8. I am comfortable I can intervene with a child during my work with them.					
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
9. I am worried about being able to implement the ASQ because <i>(Mark any that apply.)</i>					
Getting parents to cooperate	<input type="radio"/>	Finding time to do it	<input type="radio"/>	Remembering to do it	<input type="radio"/>
Getting the child to cooperate	<input type="radio"/>	Lack of resources	<input type="radio"/>	Lack of formal training for staff	<input type="radio"/>

Please share your questions or comments about the Ages and Stages Questionnaire pilot.

Appendix 5: Post-Assessment Questionnaire

Date of Training: _____ Name of Provider Agency: _____

R&R Trainer: _____ Unique Number to Match Pre and Post: _____

1. I have had enough training to identify children with developmental needs.

	Not at all	A little	Some	Very much
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. I am knowledgeable about social and emotional development in children.

	Not at all knowledgeable	Somewhat knowledgeable	Knowledgeable	Very knowledgeable
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. I am knowledgeable about how to help children with developmental needs.

Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

When a child has a developmental concern,

4. I am comfortable talking to the parent about the delay.

	Not at all comfortable	Somewhat comfortable	Comfortable	Very comfortable
Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. I am comfortable I can make a good referral.

Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. I am comfortable I can intervene with a child during my work with them.

Children Birth to 3 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children 3 to 5 years	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. I am worried about being able to implement the ASQ because (*Mark any that apply.*)

Getting parents to cooperate	Finding time to do it	Remembering to do it	Getting the child to cooperate	Lack of resources	Lack of formal training for staff
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. I learned a lot in this training session.

	Not at all	A little	Some	Very much
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. The information I learned in this session will help me work with families and children with developmental needs.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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10. Overall, I think screening with the ASQ is a good idea.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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	Not at all comfortable	Somewhat comfortable	Comfortable	Very comfortable
11. I am comfortable I can administer the ASQ.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. I am comfortable I can administer the ASQ-SE.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. I understand the goal of the ASQ.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. I understand the goal of the ASQ-SE.

Please share your questions or comments about the Ages and Stages Questionnaire pilot.

Appendix 6: Long Survey Phase II Director Interview Protocol

Time of Interview:

Date:

Place:

Interviewer:

Interviewee:

Introduction:

I want to thank you for taking time to talk with me today. I am working with the University of Arkansas for Medical Sciences at the request of the State of Arkansas Division of Early Childcare to evaluate the use of the use of the Ages and Stages Screening in early childcare programs in Arkansas. So that I can listen to you and not have to take time to write detailed notes, I will be recording and transcribing what we say during our time together. If you would like we could send you the completed transcription for your review and approval.

We are interested in understanding how childcare providers have implemented the Ages and Stages Screening tool. Please feel free to be as in-depth with your responses as you wish.

Demographic Information	Observations/Comments
<p>My records show that the childcare program you are working with is named _____. Is that correct?</p> <p>What is your position with that daycare?</p> <p>How long have you been in that position?</p>	

Interview Questions

<p>1. Can you describe how the Resource and Referral staff – often called R&R - in your area helped your program implement the use of the ASQ.</p> <p><i>Probe:</i> Can you give me an example of something they did that was helpful?</p> <p><i>Probe:</i> Can you give me an example of something that you wish they had done?</p>	
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<p><i>Probe:</i> Do you think your R&R involvement was critical to the success of the ASQ program?</p>	
<p>2. Are you still using the ASQ and the Ages Social-Emotional – often called the ASQ-SE?</p> <p><i>Probe:</i> If not, why not?</p>	
	Observations/Comments
<p>3. Thinking of the parents who completed the ASQ, Do you think they find it useful?</p> <p><i>Probe:</i> Do you think they are more aware of their child’s development after completing the ASQ? What makes you think so(provide an example)?</p>	
<p>4. Thinking of those parents who did not complete the ASQ, why do you think they did not complete it?</p> <p><i>Probe:</i> Can you think of a way to overcome that barrier?</p>	
	Observations/Comments
<p>5. The state recommends screening children at 6, 18, 30, 42 and 54 months. Did you use this screening schedule or a different one?</p> <p><i>Probe:</i> If different why?</p> <p><i>Probe:</i> Were there any barriers that kept you from screening all children at each recommended age?</p> <p><i>Probe:</i> How were these concerns addressed/resolved?</p> <p><i>Probe:</i> Who do you turn to when there is a problem?</p>	
	Observations/Comments
<p>6. How has completing the Ages and Stages Screening Program impacted your interaction with the children & the parents in the daycare?</p> <p><i>Probe:</i> How has it changed what you do day to day?</p>	
	Observations/Comments
<p>7. Thinking of a child that had a ‘gray’ or ‘black’ score based on the Ages and Stages, can you give some examples of what changed in the classroom or other services the child received after you reviewed the results?</p>	
	Observations/Comments
<p>8. What recommendations do you have for directors who plan to implement the Ages & Stages Screening Program?</p>	
	Observations/Comments
<p>9. What recommendations do you have for teachers who plan to</p>	

implement the Ages & Stages Screening Program?	
	Observations/Comments
10. What recommendations do you have for parents who plan to implement the Ages & Stages Screening Program?	
	Observations/Comments
11. Can you describe the benefits if any of implementing the ASQ screening program?	
	Observations/Comments
<p>12. Is there anything else you want to tell me about the Ages & Stages Screening Program?</p> <p>To thank you for your time and valuable information, we will be sending you a check for \$50. Unless you tell me otherwise, it will be in the name of {say their name and verify spelling}. What address can I send your thank you check to make sure you get it? Thank you for your time.</p>	<p>Name:</p> <p>Address:</p> <p>City:</p> <p>Zip:</p>

Appendix 7: Phase II Physicians Phone Survey

Date: _____ **Name of Physician:** _____
R & R Area: _____ **Office Manager's name:** _____

Results of call:

- Conducted interview with Physician or _____ why: _____
 Phone number disconnected
 Person did not know about ASQ and Physician not available.
 No answer (mark this only after you have tried 5 times at 5 different times a day)

Call Log

Date /Time Called	Results/Notes

I am _____ with University of Arkansas for Medical Sciences. I am trying to reach **Physician's name:** _____.

The Division of Child Care for the State of Arkansas has asked us to contact physicians who received referrals based on the ASQ screener this year. If you have time now I would like to ask a **four** brief questions about your experience with the use of the Ages and Stages Questionnaire in your practice, or I can call you back at a time later today when you could be available to answer my questions.

1. Are you familiar with the ASQ screening program (i.e., beyond just receiving referrals)?
 Yes No Yes, after explanation

If no, explain: the ASQ project is a state of AR initiative to encourage child care providers to use the Ages and Stages Questionnaire to screen children for developmental delays and encourage parents to see their child's pediatrician if the screen suggest delay.

Comments: _____

2. Our records show that your practice received some referrals based on the ASQ screener. Are you aware of any of these referrals?

Yes No Don't know

3. Have you seen a child that was referred based on the ASQ?

Yes No Don't know

- a. If so, do you think the information you received in from the ASQ was helpful/useful?

Yes No

Why/why not: _____

4. Do you support the use of the ASQ project in AR?
 Yes No

5. Would you like additional informational regarding the ASQ project?

Thank you for your time.

Appendix 8: Parent-Provider Satisfaction Survey

Questions 1-12 for Teacher Response

1. Date Summary Completed ____/____/____

2. Center or Program Name

3. What county is your program in?

Center/Program Type

Center Home Home visitation

5. Child's age in months: ____ __ months

6. ASQ-3 completed by

Parent Provider Both

7. ASQ-3 result

	White	Gray	Black
Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gross Motor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fine Motor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problem Solving	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal Social	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. ASQ-SE completed by

Parent Provider Both

9. ASQ-SE result

Below cutoff Near cutoff Above cutoff

10. Do you intend to modify planning and activities provided for the child in these domains?

	Yes	No	Not Sure
Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gross Motor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fine Motor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problem Solving	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal Social	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Physician who will receive results

12. Will you make additional referrals? If yes, please describe.

Questions 13-19 for Parent Response

13. Were the questions on the Ages and Stages Questionnaire clear?

- Not at all clear
- Somewhat clear
- Very clear

14. How comfortable were you answering questions on the Ages and Stages Questionnaire?

- Not at all comfortable
- Somewhat comfortable
- Very comfortable

15. Do you understand the purpose of the Ages and Stages Questionnaire?

- Not at all
- Somewhat
- Yes, very clearly

16. How much did you learn about your child's development after taking the Ages and Stages Questionnaire?

- None
- A little
- A lot

17. Was information you were given about your child's development helpful?

- Not at all helpful
- Somewhat helpful
- Very helpful

18. How likely are you to discuss results with your child's doctor?

- Not at all likely
- Somewhat likely
- Very likely

19. How soon do you intend to set an appointment with your child's doctor?

- Within one month
- Within the next 3 months
- Within the next 6 months

This survey is part of the Ages & Stages Pilot Project.

The goal of the project is to ensure that children are healthy and ready to learn. The project seeks to coordinate parents, teachers, and physicians in providing the best care possible for each individual child.

Participating children should be screened at 6, 18, 30, 42, and 54 months.

Teachers and parents, please fill out the survey after discussing ASQ screening results. Upon completion, teachers should fax or mail the survey to the teacher's R&R contact.

This survey may be reproduced, but additional copies are also available upon request.

For requests or questions, contact your Resource and Referral Agency or Janice Dent at UAMS (501)682-9914, dentjanicel@uams.edu.

Thank you for participating!

Appendix 9: Phase II Final Providers Phone Survey

Date: _____ **Name of Provider Facility:** _____
R & R Area: _____ **Director's name:** _____

Results of call:

- Conducted interview with Director or _____ why: _____
 Phone number disconnected
 Person did not know about ASQ and director not available.
 No answer (mark this only after you have tried 5 times at 5 different times a day)

Call Log

Date /Time Called	Results/Notes

I am _____ with University of Arkansas for Medical Sciences. I am trying to reach **Director's name**.

The Division of Child Care for the State of Arkansas has asked us to conduct a survey of the childcare facilities that are participating in the Ages and Stages Questionnaire project. Our records show that your center is part of that project. That is, you or some of your staff were trained to use the ASQ (*repeat Ages and Stages if they ask*). Is that correct?

Yes No

If you have time now I would like to ask a few brief questions about your experience with the use of the Ages and Stages Questionnaire in your facility, or I can call you back at a time later today when you could be available to answer my questions.

1. When did you start using the ASQ to screen for developmental delays this year?
 Jan Feb Mar Other _____ not yet
2. When did you start using the ASQ SE (socio-emotional) to screen for developmental delays this year?
 Jan Feb Mar Other _____ not yet
3. How many ASQ forms have been completed at your center? _____ (*if they have difficulty answering, ask them to estimate*)
 - a. Can you estimate how many of those were completed by parents? _____
 Not many About half Most
 - b. Can you estimate how many parent conferences you conducted to review the ASQ results? _____
 Not many About half Most
4. Can you estimate how many *Provider-Parent Satisfaction Surveys* your program completed and returned to the R&R? _____

(As part of the evaluation of the project, programs were asked to have teachers and parents complete a short survey after the ASQ conference. It's a one page form that is split with one side for the teacher to complete and the other side for parents.)

If they say "we completed them but haven't sent them to the R&R"

Ask them to please send them to their R&R _____.

If they don't have any forms ask them :

Can we send you some forms to complete? Yes No

If yes – How many would you need for the next month? _____

Then email Janice when you finish the call and let her know how many to send them.

DentJaniceL@uams.edu

5. Have you received any information from physicians based on the ASQ screens you sent to them?

None At least one physician More than one

Comments: _____

6. Did using the ASQ change what you do day to day with the children who screened in grey or black (e.g. the curriculum)?

Yes No

a. Can you give one

example?: _____

7. Do you plan to continue using the ASQ and/or the ASQ-SE after June ?

Yes both Yes one note which: ASQ/ASQ-SE Neither

8. Would you identify one challenge you have had implementing the ASQ program?

Comments: _____

9. Would you identify one benefit you see in using the ASQ program?

Comments: _____

10. Would you estimate the number of children that were in your facility to be _____ (# children). Note number in comment if they offer it.

Yes No too high too low comment _____

11. Would you be willing to participate in a longer survey about the ASQ? If so, it would last about an hour and you would receive \$50 to thank you for your time. This will be conducted sometime in late May through mid June.

Yes No

12. Best time to contact for longer survey? _____

13. Phone number to use at that contact time? _____

14. Name of Participant _____

15. Name of provider facility _____