

# Head Start Developmental Screening

**CO PA** Training & Resources

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Growth & Nutrition Immunization & TB Disability Medical Record **Developmental** Mental Health Health History Referral Sp. Case

User Defined Funding Emergency Transportation Checklist Notif.Letter Case Notes Goals Visits Child Reports

**Add Developmental Screening HS**

Child Name: Child ID: DOB: Age: Gender: |

**\*Has this child completed routine screenings for developmental, sensory and/or behavioral concerns during the operating period?**

**\*Needs follow-up assessment or formal evaluation to determine if the child has a disability?**

Screening Date Performed By Instrument Apply to All Clear All

**Developmental Screening ( Next Due )**

Screening Date	Performed By	Instrument	Result	Score
		Please Select	Please Specify	

Screening Decision: Please Specify Re-Screening Date: Cut-Off: Information

Comments:

- **“Has the child completed routine screenings for developmental, sensory and/or behavioral concerns during the operating period?”**  
Select “yes” if the following have been completed: ESI-R, ESI-R Parent Questionnaire, parent-completed ASQ:SE, and teacher-completed ASQ:SE.
- **“Needs follow-up assessment or formal evaluation to determine if the child has a disability?”**  
Select “yes” if the child is being referred based on screening decision or parent/teacher concerns; i.e. developmental concerns, speech/language.  
Select “no” if no follow-up is needed.
- **Skip the next line** (Screening Date, Performed By, Instrument, Apply to All, and Clear All)

# Head Start Developmental Screening

behavioral concerns during the operating period?

\*Needs follow-up assessment or formal evaluation to determine if the child has a disability?

Screening Date	Performed By	Instrument	Result	Score
<input type="text"/>	<input type="text"/>	Please Select	Please Specify	<input type="text"/>

Developmental Screening ( Next Due )

Screening Decision: Please Specify Re-Screening Date:

Comments:

Previous Results

## ESI-R Information

- **Screening Date:** Report the date the screening was administered to the student.
- **Performed By:** Enter the name, not the title, of the person who performed the screening.
- **Instrument:** Report the form (P or K) of the ESI-R or IDT-R that was used for the screening.
- **Result:** Enter the actual outcome of the developmental screening (Passed, Failed, or Needs Re-screen). **Children who score in the re-screen range should be re-screened within 6 to 8 weeks of the initial screening date.**
- **Score:** the score does not need to be entered.

# Head Start Developmental Screening

The screenshot shows a web-based form for developmental screening. At the top, there is a navigation bar with the COPA logo and buttons for HR, Family, Child, Enrollment, Sites, Reports, and Log Out. The main form is titled 'Developmental Screening ( Next Due )' and has a table-like structure with the following fields:

- Screening Date:** A date picker field.
- Performed By:** A text input field.
- Instrument:** A dropdown menu with 'Please Select' as the current selection.
- Result:** A dropdown menu with 'Please Specify' as the current selection.
- Score:** A text input field.
- Screening Decision:** A dropdown menu with a list of options: 'Please Specify', 'OK', 'Re-screen', 'Refer', and 'Child has IEP'. The 'Please Specify' option is currently selected.
- Re-Screening Date:** A date picker field.
- Comments:** A text input field.
- Previous Results:** A text input field.

Below the main form, there is a section for 'Social-Emotional Screening ( Next Due )' with similar fields for Screening Date, Performed By, Instrument, Result, and Score.

- **Screening Decision:** Based on whether the child will be referred for CPS evaluation or not.

**Select “OK”** if the screening result was ok and the child will not be referred.

**Select “Re-screen”** if this is the initial screening and the screening result was re-screen (*If a child scores re-screen twice, the decision is refer*).

**Select “Refer”** if the child is being referred to CPS for any reason (i.e. parent/teacher concerns, weakness in speech/language) even if score is OK. Identify reason for referral in comment section.

**Select “Child has IEP”** if the child has a current IEP. Children with a current IEP are not screened.
- **Re-Screening Date:** If decision is re-screen, enter the date by which child should be re-screened (8 weeks later). This date will appear on the Developmental Screening Report in bold and will act as a reminder.

# Head Start Developmental Screening

behavioral concerns during the operating period?

\*Needs follow-up assessment or formal evaluation to determine if the child has a disability?

Screening Date	Performed By	Instrument		
<input type="text"/>	<input type="text"/>	Please Select	Apply to All	Clear All
Developmental Screening ( Next Due )				
Screening Date	Performed By	Instrument	Result	Score
<input type="text"/>	<input type="text"/>	Please Select	Please Specify	<input type="text"/>
<b>Screening Decision:</b>	Please Specify	<b>Re-Screening Date:</b>	<input type="text"/>	Cut-Off: Information
<b>Comments:</b>	<input type="text"/>			
<b>Previous Results</b>	<input type="text"/>			

- **Comments:** Add any pertinent information regarding the ESI-R screening in this section. Examples of information that should be reported include: the language used to screen the child if other than English or Spanish; any developmental concerns, such as speech and language; and any follow up that is planned based on the ESI-R Screening Decision.
- **Previous Results:** Scores from previous screenings will automatically drop down to this section.

# Head Start Developmental Screening

behavioral concerns during the operating period?

\*Needs follow-up assessment or formal evaluation to determine if the child has a disability?

Screening Date:

Performed By:

Instrument:

Apply to All Clear All

**Developmental Screening ( Next Due )**

Screening Date	Performed By	Instrument	Result	Score
<input type="text"/>	<input type="text"/>	<input type="text" value="Please Select"/>	<input type="text" value="Please Specify"/>	<input type="text"/>

Screening Decision:  Re-Screening Date:

Comments:

Previous Results

Cut-Off: Information

- **Enter Re-Screen Information:**

Enter the screening date, performed by, instrument, result, and comments as described for initial screenings on pages 2 through 5.

Enter the screening decision “OK” or “Refer” based on the result of the second screening.

**Children who score “Re-screen” on the second screening are referred for a cognitive/educational evaluation.**

1<sup>st</sup> Re-screen / 2<sup>nd</sup> Re-screen = “Refer”

1<sup>st</sup> Re-screen / 2<sup>nd</sup> OK = “OK”

The previous screening information will drop down to previous results.

## Head Start Social-Emotional Screening (Teacher)

The screenshot displays the 'Social-Emotional Screening ( Next Due )' section, which is circled in red. This section contains a table with the following columns: Screening Date, Performed By, Instrument, Result, and Score. Below the table, there are fields for Screening Decision, Re-Screening Date, and Comments. A 'Previous Results' section is also visible below the main table.

Social-Emotional Screening ( Next Due )				
Screening Date	Performed By	Instrument	Result	Score
<input type="text"/>	<input type="text"/>	Please Select	Please Specify	<input type="text"/>
Screening Decision: Please Specify		Re-Screening Date:	<input type="text"/>	Cut-Off: Information
Comments: <input type="text"/>				
Previous Results				
Other ( Next Due )				
Screening Date	Performed By	Instrument	Result	Score
<input type="text"/>	<input type="text"/>	Please Select	Please Specify	<input type="text"/>
Screening Decision: Please Specify		Re-Screening Date:	<input type="text"/>	Cut-Off: Information

### ASQ:SE Information (Teacher) entered in the Social-Emotional Screening section

- **Screening Date:** Enter the date of the teacher-completed ASQ:SE.
- **Performed By:** Enter the name of the teacher who completed the questionnaire.
- **Instrument:** Select ASQ:SE.
- **Result:** Enter the actual outcome of the teacher-completed screening based on the score being below or above the cutoff (Passed or Failed). Children are never re-screened on the ASQ:SE.
- **Score:** This information does not need to be entered.

## Head Start Social-Emotional Screening (Teacher)

The screenshot shows the COPA Social-Emotional Screening form. The header includes the COPA logo and navigation tabs for HR, Family, Child, Enrollment, Sites, Reports, and Log Out. The form title is "Social-Emotional Screening ( Next Due )". The form is divided into several sections:

Screening Date	Performed By	Instrument	Result	Score
<input type="text"/>	<input type="text"/>	Please Select	Please Specify	<input type="text"/>
<b>Screening Decision:</b> Please Specify		<b>Re-Screening Date:</b>	<input type="text"/>	Cut-Off: Information
<b>Comments:</b> <input type="text"/>				
<b>Previous Results</b>				

- Screening Decision:** Indicate the decision – “OK” or “Refer.” If the child’s score is: **Under the cut-off on both** parent and teacher questionnaires, the decision is “OK”. **Over the cut-off on either or both** the parent and teacher questionnaires, the decision is “Refer”.

**Select “Refer” if child is being referred** for parent/teacher concerns, such as aggressive behavior, even if score is under the cut-off. Identify reason for referral in comment section.
- Re-Screening Date:** This field does not apply to the ASQ:SE.
- Comments:** Add any teacher responses to the ASQ:SE open ended questions that need to be addressed in a follow-up meeting. Also add the date of the meeting to discuss the next steps based on ASQ:SE “Refer” decision or teacher ASQ:SE responses if applicable. Document any follow up that is planned during the meeting in COPA case notes in the Disabilities category.
- Previous Results:** Previous screenings will automatically be shown.

## Head Start Social-Emotional Screening (Parent)

The screenshot shows a web-based form for ASQ:SE screening. At the top, there is a navigation bar with the COPA logo and tabs for HR, Family, Child, Enrollment, Sites, Reports, and Log Out. The main form area is divided into sections. The 'Other (Next Due)' section is highlighted with a black oval around the 'Screening Date', 'Performed By', and 'Instrument' fields. The 'Screening Date' field is a date picker, 'Performed By' is a text input, and 'Instrument' is a dropdown menu. The 'Result' field is a dropdown menu, and the 'Score' field is a text input. Below these are fields for 'Screening Decision' (dropdown), 'Re-Screening Date' (date picker), and 'Comments' (text area). The 'Follow-Up' section contains 'SRT Date' (date picker), 'Referral Date' (date picker), and 'Evaluation Date/60th Day' (date picker). A 'Submit' button is located at the bottom of the form.

### ASQ:SE Information (Parent) entered in the Other section

- **Screening Date:** Enter the date of the parent-completed ASQ:SE.
- **Performed By:** Enter the name(s) of the parent(s) who completed the questionnaire.
- **Instrument:** Select ASQ:SE.
- **Result:** Enter the actual outcome of the parent-completed screening based on the score being below or above the cutoff (Passed or Failed). Children are never re-screened on the ASQ:SE.
- **Score:** This information does not need to be entered.

Revised: 1/2011

## Head Start Social-Emotional Screening (Parent)

The screenshot shows the COPA system interface. At the top, there is a navigation bar with tabs for HR, Family, Child, Enrollment, Sites, Reports, and Log Out. Below the navigation bar is a form for entering screening data. The form includes fields for Screening Date, Performed By, Instrument (a dropdown menu), Result (a dropdown menu), and Score. There are also fields for Screening Decision (a dropdown menu), Re-Screening Date, and Comments. A 'Previous Results' section is visible at the top and bottom of the form. A red circle highlights the 'Screening Decision' and 'Re-Screening Date' fields.

- **Screening Decision:** Indicate the decision – “OK” or “Refer.” If the child’s score is: **Under the cut-off on both** parent and teacher questionnaires, the decision is “OK”. **Over the cut-off on either or both** the parent and teacher questionnaires, the decision is “Refer”.

**Select “Refer” if child is being referred** for parent/teacher concerns, such as aggressive behavior, even if score is under the cut-off. Identify reason for referral in comment section.
- **Re-Screening Date:** This field does not apply to the ASQ:SE.
- **Comments:** Add any parent responses to the ASQ:SE open ended questions that need to be addressed in a follow-up meeting. Also add the date of the meeting to discuss the next steps based on ASQ:SE “Refer” decision or parent ASQ:SE responses if applicable. Document any follow up that is planned during the meeting in COPA case notes in the Disabilities category.
- **Previous Results:** Previous screenings will automatically be shown.

Revised: 1/2011

# Head Start Screening Follow-Up

The screenshot shows the COPA system interface. At the top, there is a navigation bar with the COPA logo and a 'Training & Resources' button. Below this is a menu with tabs for 'HR', 'Family', 'Child', 'Enrollment', 'Sites', 'Reports', and 'Log Out'. The main content area is titled 'Other (Next Due)' and contains a form with the following sections:

- Screening Date:** A date input field.
- Performed By:** A text input field.
- Instrument:** A dropdown menu with 'Please Select' as the current selection.
- Result:** A dropdown menu with 'Please Specify' as the current selection.
- Score:** A text input field.
- Screening Decision:** A dropdown menu with 'Please Specify' as the current selection.
- Re-Screening Date:** A date input field.
- Comments:** A text area.
- Previous Results:** A section with a 'Previous Results' icon.
- Follow-Up:** A section containing:
  - SRT Date:** A date input field.
  - Referral Date:** A date input field.
  - Evaluation Date/60th Day:** A date input field.
- Previous Results:** A section with a 'Previous Results' icon.

A black oval highlights the 'Follow-Up' section, specifically the 'SRT Date', 'Referral Date', and 'Evaluation Date/60th Day' fields.

## Screening Follow-Up

An SRT meeting **must** be held for every child who scores in the “Refer” range on either the ESI-R or ASQ:SE.

- **SRT Date:** If applicable, enter the date of the Screening Review Team (SRT) meeting. The results of the SRT meeting must be given in the corresponding comment section above.
- **Referral Date:** Enter the date the decision was made to refer this child to Chicago Public Schools for further evaluation. The child must also be entered on the COPA referral section. Make sure the referral dates in each section match.
- **Evaluation Date/60th Day:** Once the parent signs the CPS Consent for Evaluation, the multi-disciplinary staff at the school has 60 school days to complete the evaluation. Enter the date of the 60th day which can be obtained from the case manager at the child’s school.

\*\*\*See **Appendix A** for a quick reference guide.\*\*\*