Developmental and social-emotional standardized screening identifies children who may benefit from more evaluation, resources and services to improve health and learning outcomes. Child care providers bring many strengths to any effort to support healthy child development: they have trusted relationships with families and know the children they serve, allowing them to pick up on developmental and behavioral concerns.

1500 (18% response rate) licensed family and center-based child care providers responded to a survey seeking to find out what role child care providers currently play in standardized screening and referral, and what can or should be done to support them in those efforts.

Key findings and conclusions:

As with many other professions, there is confusion about screening versus assessment:

- **Screening** identifies children who need more evaluation and possibly services.
- **Assessment** identifies an individual child’s curriculum needs.

Only 16% of respondents reported developmental or social-emotional screening. Only \( \frac{1}{2} \) of these were using a validated screening tool – most use the Ages and Stages Questionnaires (ASQ-3 and ASQ:SE).

Currently, there are no state recommendations in Minnesota for screening in child care. While child care providers are certainly in an excellent position to help identify developmental concerns, careful consideration should be taken before asking child care providers to add screening to their work.

State policy and programs should support and provide technical assistance for partnership between child care providers and existing local screening programs.

Screening programs can partner with local child care providers to share program information, help make sure that all children can access screening, and to support families in follow up with developmental concerns.

There is a wide range of opinions among child care providers about their role in screening.

But the majority agree that partnering with existing local screening programs is the best option:
Many child care providers have strong connections to local screening programs such as clinics, Early Childhood Screening, or others. Fewer refer to local, county or Tribal public health programs.

Child care providers said they would like more information to share with parents about the available programs and how to access them. When and where possible, local screening programs should make information about their services easily available to child care centers in their area to promote referral.

Whether or not they provide screening, the majority of child care providers said that they refer children with developmental concerns to the child’s primary health care provider and to Help Me Grow or the local school district’s early intervention program.

Child care providers should be included in outreach efforts for screening and referral, and in the implementation of Minnesota’s expanded Help Me Grow system.

Child care providers use a variety of resources to learn about child development.

Child care providers have strong connections to multiple sources of information already, which may be used to help relay important information about screening and referral.

Child care providers are interested in child development and would like more training:

- Where to find parenting support: 58%
- Talking to parents about concerns: 56%
- Where to refer: behavioral concerns: 53%
- Where to refer: screening: 50%
- Developmental skills at specific ages: 46%
- Where to refer: dev't concerns: 45%
- Screening tools: 32%

Training resources exist through multiple sources on a number of these topics; efforts should be made to increase awareness of and access to these resources. A few examples are listed below:

- Important sources of existing training for child care providers in Minnesota include Develop (www.developtoolmn.org) and the Center for Inclusive Child Care (CICC) (www.inclusivechildcare.org)
- The Minnesota Child Care Credential (www.mncpd.org) and the Minnesota Infant Toddler Credential both cover information on screening and referral, difficult conversations with families, child development and behavioral issues, and the difference between screening and assessment.
- For topics where training does not currently exist, there may be an opportunity to include this information in existing training methods, or to develop trainings and provide through methods identified as resources by respondents (i.e. Child Care Aware, Child Care Health Consultants, etc.)

For more detailed information on results and recommendations, refer to the full report on the 2015 survey of licensed child care providers in Minnesota, An Important Partnership in Child Development: Child Care Providers and Screening Programs (www.health.state.mn.us).

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