

DEVELOPMENTAL MILESTONES ASSESSMENT FOR CHILDREN UNDER THE AGE OF SIX AND AT DEVELOPMENTAL RISK

INSTRUCTIONS

"Detecting developmental delays early is challenging. Delays or deviations in development may come to the attention of professionals and parents because a child is known to have risk factors by history, has physical findings or medical conditions likely to be associated with delays, or manifests delays at the time of observations. A delay in a skill becomes evident only at the age when a specific developmental milestone is expected". (1) "Child development is a dynamic process and is often hard to measure by its very nature". (2) "A single test at one point in time only gives a snapshot of the dynamic process, making periodic screening necessary to detect emerging disabilities as a child grows". (3)

1. Select the age-appropriate assessment tool.
2. In conjunction with the caretaker (parent, guardian, etc.) and recipient (if appropriate) address each item on the assessment tool.
3. Categories preceding the "Health Watch" category are ranked from left to right as Rarely, Sometimes, Often and Regularly. This is an attempt to maintain consistency with the adult LOF assessment tool.
4. Please note that "Health Watch" ratings are ranked from left to right as Regularly, Often, Sometimes, and Rarely. This is an attempt to adhere to the American Academy of Pediatrics Medical Library documents and also to provide the evaluator with specific data that they (or the caretaker) can share with the physician if necessary.
5. It is expected that the Developmental Milestones Assessment will be conducted as a recipient-centered, culturally sensitive process. The final product should include input from the caretaker, the recipient (if appropriate), the physician and any other service provider involved with the care/welfare of the recipient. This input may include interviews, telephone calls, copies of records, etc.
6. The following definitions should be adhered to when completing the assessment:

"Rarely" Behavior occurs quarterly or less
"Sometimes" Behavior occurs one a month or less
"Often" Behavior occurs 2-3 times per month
"Regularly" Behavior occurs weekly or more
7. The Developmental Milestones are the typical stages of development for children. They are to be assessed to determine abilities, skills, and needs of the child and will be the basis for the development of a plan of care. A simple majority of ratings of "Sometimes" and "Rarely" within any one of the designated milestone categories places the child in the "at risk of developmental delay" population.

(1) *Committee on Children with Disabilities, American Academy of Pediatrics. Policy Statement: Developmental surveillance and Screening of Infants and Young Children (RE0062). Vol. 108, No. 1 July 2001. 192-196.*

(2) *Committee on Children with Disabilities, American Academy of Pediatrics. 192-196.*

(3) *Committee on Children with Disabilities, American Academy of Pediatrics. 192-196.*

8. Any ranking of "Often" or "Regularly" in the Health Watch category places the child in the "at risk of development delay" population.
 9. Any child that meets the "at risk of development delay" criteria should be referred to a physician for further assessment.
 10. Re-assessments should be conducted at least at each age-specified stage of development. Additional assessments should be conducted whenever there is significant change in the child's functioning level.
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**DEVELOPMENTAL MILESTONES ASSESSMENT
FOR CHILDREN UNDER THE AGE OF SIX AND AT DEVELOPMENTAL RISK
(at the end of 1 month of age)**

Recipient Birth Name: _____

Recipient Medicaid Number: _____

Recipient Date of Birth: _____

Developmental Milestone	Regu- larly	Often	Some- times	Rarely
MOVEMENT				
Makes jerky, quivering arms thrusts				
Brings hands within range of eyes and mouth				
Moves head from side to side while lying on stomach				
Head flops backward if unsupported				
Keeps hands in tight fists				
Strong reflex movements				
VISUAL				
Focuses 8 to 12 inches away				
Eyes wander and occasionally cross				
Prefers black-and-white or high-contrast patterns				
Prefers the human face to all other patterns				
HEARING				
Hearing is fully mature				
Recognizes some sounds				
May turn toward familiar sounds and voices				
SMELL & TOUCH				
Prefers sweet smells				
Avoids bitter or acidic smells				
Recognizes the scent of own mother's breastmilk				
Prefers soft to coarse sensations				
Dislikes rough or abrupt handling				
HEALTH WATCH				
	Rarely	Some- times	Often	Regu- larly
Sucks poorly and feeds slowly				
Does not blink when shown a bright light				
Does not focus and follow a nearby object moving side to side				
Rarely moves arms and legs; seems stiff				
Seems excessively loose in the limbs, or floppy				
Lower jaw trembles constantly, even when not crying or excited				
Does not respond to loud sounds				
If the child shows any of these signs of developmental delay in the second, third or fourth week of life, the caregiver should notify their physician.				

Comments:

Parties involved in assessment process:

Parent/Guardian: _____

Physician: _____

Others: _____

Evaluator: _____

(Please print or type full name here)

(Signature)

(Date)

DEVELOPMENTAL MILESTONES ASSESSMENT
FOR CHILDREN UNDER THE AGE OF SIX AND AT DEVELOPMENTAL RISK
(at the end of 3 months of age)

Recipient Birth Name: _____

Recipient Medicaid Number: _____

Recipient Date of Birth: _____

Developmental Milestone	Regu- larly	Often	Some- times	Rarely
MOVEMENT				
Raises head & chest when lying on stomach				
Supports upper body with arms when lying on stomach				
Stretches legs out & kicks when lying on stomach or back				
Opens and shuts hands				
Pushes down on his legs when his feet are place on a firm surface				
Takes swipes at dangling objects with hands				
Grasps and shakes hand toys				
Brings hand to mouth				
VISUAL				
Watches faces intently				
Follows moving objects				
Recognizes familiar objects & people at a distance				
Starts using hands and eyes in coordination				
HEARING & SPEECH				
Smiles at the sound of caregiver's voice				
Begins to babble				
Begins to imitate sounds				
Turns head toward direction of sound				
SOCIAL/EMOTIONAL				
Begins to develop a social smile				
Enjoys playing with other people and may cry when playing stops				
Becomes more communicative and expressive with face and body				
Imitates some movements and facial expressions				
HEALTH WATCH				
Does not seem to respond to loud sounds	Rarely	Some- times	Often	Regu- larly
Does not notice hands by 2 months				
Does not smile at the sound of caregiver's voice by 2 months				
Does not follow moving objects with eyes				
Does not grasp and hold objects				
Does not smile at people				
Can not support head well				

Developmental Milestones were adopted from the American Academy of Pediatrics Medical Library website: www.medem.com

HEALTH WATCH (cont.)	Rarely	Some-times	Often	Regu-larly
Does not reach for and grasp toys				
Does not babble				
Does not bring objects to mouth				
Begins babbling, but does not try to imitate any of caretaker's sounds				
Does not push down with legs when feet are placed on a firm surface				
Has trouble moving one or both eyes in all directions				
Crosses eyes most of the time (occasional crossing of eyes is normal in these first months)				
Does not pay attention to new faces, or seems very frightened by new faces or surroundings				
If the child shows any of these signs at this age, the caregiver should notify their physician.				

Comments:

Parties involved in assessment process:

Parent/Guardian: _____

Physician: _____

Others: _____

Evaluator: _____
(Please print or type full name here)

(Signature)

(Date)

**DEVELOPMENTAL MILESTONES ASSESSMENT
FOR CHILDREN UNDER THE AGE OF SIX AND AT DEVELOPMENTAL RISK
(at the end of 7 months of age)**

Recipient Birth Name: _____

Recipient Medicaid Number: _____

Recipient Date of Birth: _____

Developmental Milestone	Regu- larly	Often	Some- times	Rarely
MOVEMENT				
Rolls both ways (front to back, back to front)				
Sits with, and then without, support of hands				
Supports whole weight on legs				
Reaches with one hand				
Transfers object from hand to hand				
Uses raking grasp (not pincer)				
VISION				
Develops full color vision				
Distance vision matures				
Ability to track moving objects matures				
LANGUAGE				
Responds to own name				
Begins to respond to "no"				
Distinguishes emotions by tone of voice				
Responds to sound by making sounds				
Uses voice to express joy and displeasure				
Babbles chains of consonants				
COGNITIVE				
Finds partially hidden object				
Explores with hands and mouth				
Struggles to get objects that are out of reach				
SOCIAL/EMOTIONAL				
Enjoys social play				
Interested in mirror images				
Responds to other people's expressions of emotions				
HEALTH WATCH	Rarely	Some- times	Often	Regu- larly
Seems very stiff with tight muscles				
Seems very floppy like a rag doll				
Head still flops back when body is pulled up to a sitting position				
Reaches with one hand only				
Refuses to cuddle				
Shows no affection for the caregiver				
Does not seem to enjoy being around people				

HEALTH WATCH (cont.)	Rarely	Some- times	Often	Regu- larly
One or both eyes consistently turn in or out				
Persistent tearing, eye drainage or sensitivity to light				
Does not respond to sounds around him				
Has difficulty getting objects to mouth				
Does not turn head to locate sounds by 4 months				
Does not roll over in either direction				
Still has Moro reflex after 4 months (A dramatic reflex present during these first few weeks is called the Moro reflex. If the baby's head shifts positions abruptly or falls backward, or he is startled by something loud or abrupt, he will react by throwing out his arms and legs and extending his neck, then rapidly bringing his arms together as he cries loudly. The Moro reflex peaks during the first month and then usually disappears after two months.)				
Still has the tonic neck reflex at 4-5 months (One of the more interesting automatic responses is the tonic neck reflex, otherwise known as the fencing posture. You may notice that when your baby's head turns to one side, his arm on that side will straighten, with the opposite arm bent as if he's fencing. Do not be surprised if you don't see this response, however. It is subtle, and if your baby is disturbed or crying, he may not perform it. It disappears at 5 to 7 months of age.)				
Does not roll over in either direction by 5 months				
Seems inconsolable at night after 5 months				
Does not smile spontaneously by 5 months				
Can not sit with help by 6 months				
Does not laugh or make squealing sound by 6 months				
Does not actively reach for objects by 6 to 7 months				
Does not follow objects with both eyes at near (1 foot) and far (6 feet) ranges by 7 months				
Does not bear some weight on legs by 7 months				
Does not try to attract attention through actions by 7 months				
Does not babble by 8 months				
Show no interest in games of peekaboo by 8 months				
If the child shows any of these signs at this age, the caregiver should notify their physician.				

Comments:

Parties involved in assessment process:

Parent/Guardian: _____

Physician: _____

Others: _____

Evaluator: _____
(Please print or type full name here)

(Signature)

(Date)

**DEVELOPMENTAL MILESTONES ASSESSMENT
FOR CHILDREN UNDER THE AGE OF SIX AND AT DEVELOPMENTAL RISK
(at the end of 12 months of age)**

Recipient Birth Name: _____

Recipient Medicaid Number: _____

Recipient Date of Birth: _____

Developmental Milestone	Regu- larly	Often	Some- times	Rarely
MOVEMENT				
Reaches sitting position without assistance				
Crawls forward on belly				
Assumes hands-and-knees position				
Creeps on hands and knees				
Gets from sitting to crawling or prone (lying on stomach) position				
Pulls self up to stand				
Walks holding on to furniture				
Stands momentarily without support				
May walk two or three steps without support				
LANGUAGE				
Pays increasing attention to speech				
Responds to simple verbal requests				
Responds to "no"				
Uses simple gestures, such as shaking head for "no"				
Babbles with inflection				
Says "dada" and "mama"				
Uses exclamations, such as "Oh-oh!"				
Tries to imitate words				
COGNITIVE				
Explores objects in many different ways (shaking, banging, throwing, dropping)				
Finds hidden objects easily				
Looks at correct picture when the image is named				
Imitates gestures				
Begins to use objects correctly (drinking from cup, brushing hair, dialing phone, listening to receiver)				
SOCIAL/EMOTIONAL				
Shy or anxious with strangers				
Cries when caregiver leaves				
Enjoys imitating people in his play				
Shows specific preferences for certain people and toys				
Tests caregiver responses to his actions during feedings				
Tests caregiver responses to his behavior				
May be fearful in some situations				
Prefers caregiver over all others				
Repeats sounds or gestures for attention				

Developmental Milestones were adopted from the American Academy of Pediatrics Medical Library website: www.medem.com

Developmental Milestone	Regu- larly	Often	Some- times	Rarely
SOCIAL/EMOTIONAL (cont.)				
Finger feeds self				
Extends arm or leg to help when being dressed				
HEALTH WATCH	Rarely	Some- times	Often	Regu- larly
Does not crawl				
Drags one side of body while crawling (for over one month)				
Cannot stand when supported				
Does not search for objects that are hidden while he watches				
Says no single words ("mama" or "dada")				
Does not learn to use gestures, such as waving or shaking head				
Does not point to objects or pictures				
If the child shows any of these signs at this age, the caregiver should notify their physician.				

Comments:

Parties involved in assessment process:

Parent/Guardian: _____

Physician: _____

Others: _____

Evaluator: _____

(Please print or type full name here)

(Signature)

(Date)

