

# PRISMA HEALTH<sup>SM</sup>

## **What to do when there are concerns about a child's development**

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# Objectives

- Define developmental delay and note prevalence.
- Discuss how developmental delay is identified.
- Review initial work up for developmental concerns.
- Discuss actions, resources, and referrals to consider for developmental delays.
- Discuss resources for specific developmental and behavioral concerns.

# Developmental delays

- Developmental delays are common – 16.7% of population has a delay or disability in at least 1 developmental domain
- Diagnosing early is beneficial
- Pitfalls of watch and wait

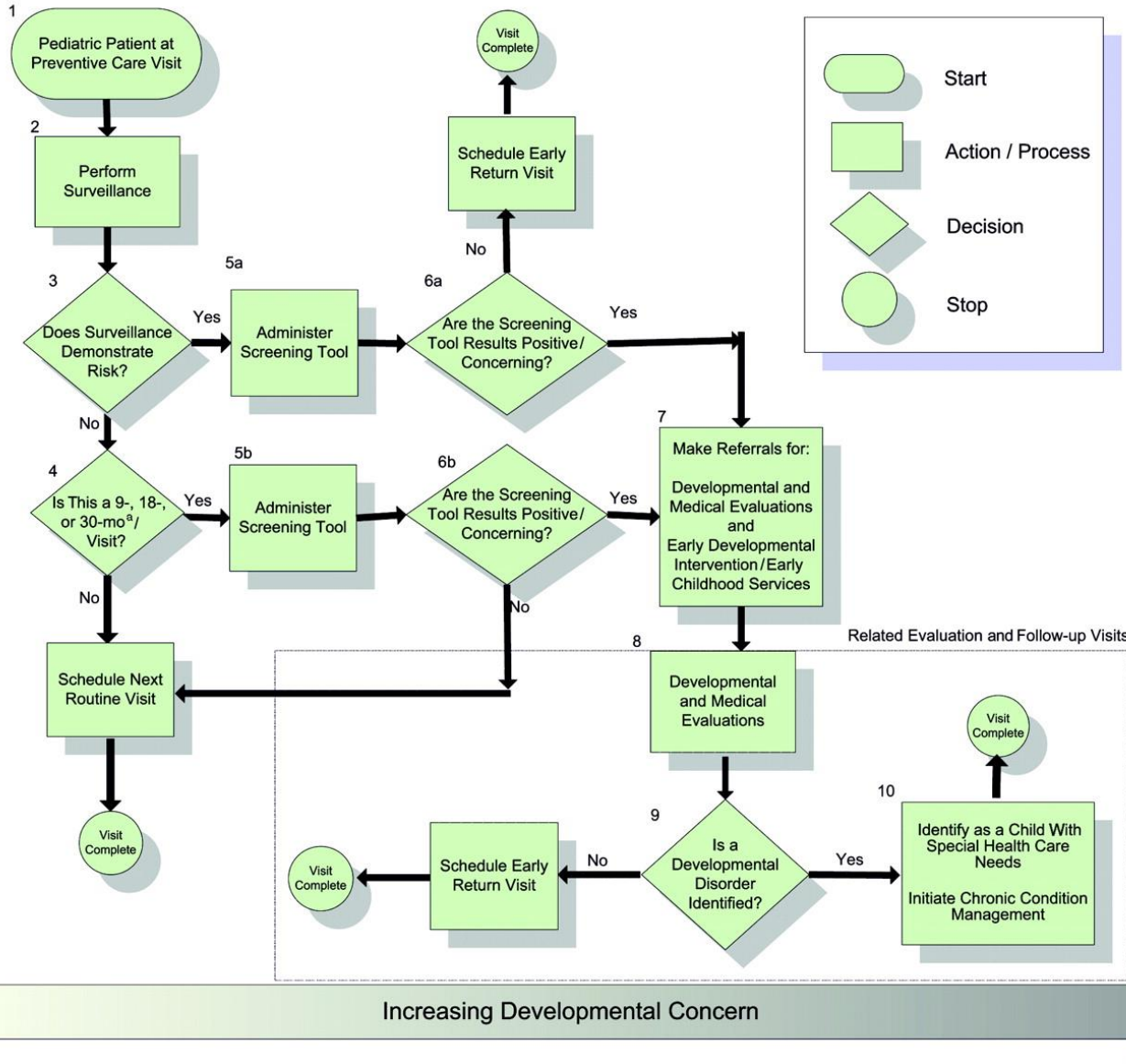
# General Definitions

- Global Developmental Delay: delays in multiple to all aspects of development. Can use diagnosis until age of 5
- Developmental disorder/disability: mental or physical impairment resulting in functional limitations
- Deviations: skills developed out of usual sequence
- Dissociation: differing rates of development in different spheres
- Regression: loss of skills

# Identify developmental delays

- Concerns of parents, family and other caregivers
- Screenings at well visits
- Development milestone resources for parents and providers
  - CDC – Learn the Signs. Act Early.
    - Milestone Tracker App
    - Developmental checklists
    - <https://www.cdc.gov/ncbddd/actearly/hcp/index.html>

# Screenings



- Ages Stages Questionnaire (ASQ)
- Parents Evaluation of Developmental Status (PEDS)
- Survey of Well Being in Young Children (SWYC)

# Common myths for delays

- Boys develop more slowly
- Speaking two languages at home
- There's a family history of delayed milestones but he will "catch up"
- Having an older sibling that is talking for them
- Child is just being "lazy"
- Being held/carried too much can cause motor delays
- It's a stage
- The child looks fine and is happy

# Red Flags

- No vocalization by 6 months
- Does not respond to sounds by 7 months
- No canonical babbling by 9 months (babababa, mamama)
- No sitting without support by 10 months
- Not standing by 16 months
- No consistent use of mama/dada by 1 year
- Not walking by 18 months
- No single words by 18 months
- Less than 20 words by 2 years
- Can't stand on one foot by 3 years



# A delay is noted ... what next?

- **Inquire about regression of skills**
- Address if need for hearing evaluation
- Referrals for further evaluation and treatment

# Audiology evaluation

- Hearing loss is relatively common
- Normal newborn hearing test does NOT rule out hearing loss
- Audiologists with pediatric experience

# Initial referrals

- Considerations
  - Age
  - Is the delay specific or multiple domains?
  - Wait list times – **do not want to delay intervention!**
- Refer to Baby Net, Help Me Grow, and/or Child Find
- Refer to pediatric ST, OT and/or PT for further evaluation and to begin treatment

# Baby Net

- South Carolina's Fulfillment of Individuals with Disabilities Education Act (IDEA) Part C program
- Serves children <36 months old
- Services available

# Help Me Grow

- Help Me Grow is a program that links families to existing, community-based resources and services for children at-risk for developmental, behavioral, or learning problems.
  - Free screening forms for parents
  - Help with referrals
  - Information on local resources
  - Activities for families
- **1-855-476-9211**
- **<http://helpmegrowsc.org/>**

# Child Find

- South Carolina's Fulfillment of Individuals with Disabilities Education Act (IDEA) Part B program
- Serves Children >3 years of age
  - Eligible for evaluation at 30 months
- Services Offered

# Family Connection

- Contact Number 1-800-578-8750  
[www.familyconnections.org](http://www.familyconnections.org)
- Services
  - Education
  - Healthcare
  - Families
  - Training
  - Resources

# Pediatric Therapies

- Speech
- Occupational
- Physical



# Further developmental concerns

- Autism
- Behavior
- Anxiety
- ADHD
- Learning disabilities/Intellectual disabilities

# Autism Spectrum Disorder

- Diagnosis: DSM-5 criteria
  - Social communication and interaction criteria
    - Social-emotional reciprocity
    - Nonverbal communicative behaviors
    - Relationships
  - Restricted, repetitive behavior criteria

# Autism- Red flags

- Parental concern
- Failed MCHAT-R/F screening
- Deficits in joint attention
- Poor eye contact
- Lack of interest in others
- Lacking meaningful speech
- Delayed language milestones

# Resources if concerns for autism

- Referral to Baby Net (<3yo)
  - Early interventionist
- Need full evaluation for diagnosis
- STAT screening
  - DDSN- Department of Disabilities and Special Needs
  - Developmental Behavioral Pediatrics referral

# Resources for parents if autism is diagnosed

- Baby Net EI (<3yo)
  - DDSN- case manager – as child ages
- Child Find
- ABA (Applied Behavioral Analysis)
- Parent and family support

# Applied Behavioral Analysis

- Intensive behavioral intervention approved for children with ASD
  - ABA Techniques: positive reinforcement, modeling, promoting, scripting, extinction of negative behaviors, antecedent based interventions
  - Can be up to 40 hours a week
- ABA waiting list
  - <https://msp.scdhhs.gov/autism/site-page/find-autism-provider>

# Behavior Issues

- Tantrums
- Aggression
- Defiant
- Inattention
- Hyperactivity/impulsivity

# Considerations

- Type of behaviors
- Severity of behaviors
- Location of family
- Time and transportation constraints
  
- Options for parents?
  - In-home resources for behavioral modifications
  - More in-depth parenting classes and therapies



# Help for the parenting toolbox

- Triple-P Positive parenting program
  - Evidence-based training program
  - 19 languages
  - Online courses, small groups
  - Specialized courses
- Parent-Child Interaction Therapy
  - Evidence-based training program
  - Therapist observes through mirrored glass and coaches parents

# Family Connection

- Triple P: Stepping Stones Primary Care
- Triple P Seminar Series
  - *Positive parenting for children with a disability*
  - *Helping your child reach their potential*
  - *Changing problem behavior into positive behavior*

<https://www.familyconnections.org/>

# Anxiety

- Excessive fear that leads to changes in behavior and impairs daily living
- Prevalence of up to 20%

# Anxiety

- CBT (Cognitive Behavioral Therapy): >7 years of age
- PCIT: 2-7 years
- Coping Cat
  - Reduces symptoms and impairments
- Multimodal
  - Pharmacotherapy, CBT, family therapy

# ADHD

- Inattention, hyperactivity, and impulsivity that cause impairment in functioning
- Parent training program – behavior modification
- School interventions
- Medications

# Intellectual and Learning Disabilities

- Intellectual Disability: Deficits in both cognitive and adaptive skills that cause significant impairment in an individual who will require additional supports with both academic and daily living skills
- Learning Disability: Difficulties in learning and in academic skills that are substantially below the expected level of the child's cognitive functioning

# School's Role

- Schools are required by law to consider an evaluation of a child to determine if services are needed if parent requests
- In most cases, a school evaluation is faster than one through pediatric psychology
- Testing done but questions remain?

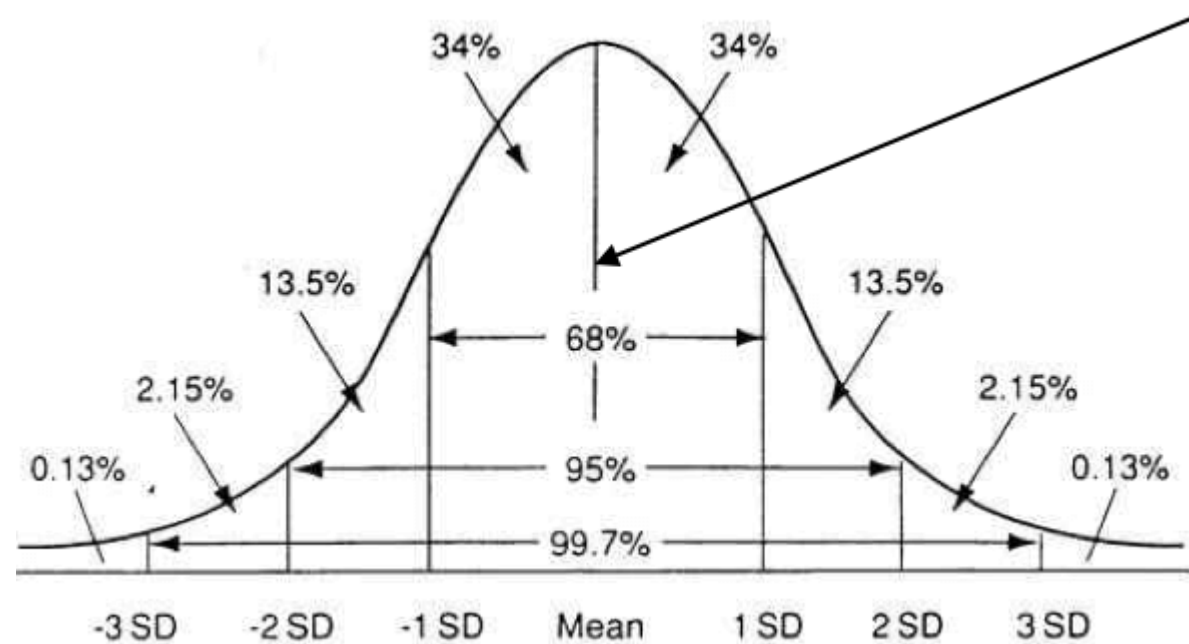
# PCP Role – if educational testing completed

- Rule out Anxiety & ADHD – Common Disorders
- Change in performance
  - Sudden- rule out other medical disorders
  - Gradual- often a more chronic cause



# What to look for in testing

- Understanding the standard scores



# What to look for in testing

- Does cognitive testing reflect scores on achievement testing?
- Discussing realistic expectations
- What resources is the school offering through IEP?

# Helpful information for initial DBP visit

- Parents:
  - Milestone history (baby books)
- Previous testing/evaluations
  - IEP/504 plan
  - Previous psychoeducational testing
  - PT/OT/ST evaluations
- Previous notes from providers

Questions?

# References

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