

A young child with dark hair is smiling and laughing, sitting at a table with a blue cup and a red spoon. The background is a colorful, slightly blurred indoor setting.

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## Before We Begin...

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## Introduction to the ASQ-3

Presented by Zulema Rubalcava



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California Training Institute

## Speaker **SPOTLIGHT**



**Zulema Rubalcava**

Pediatric Partnerships  
Program Officer,  
San Francisco Department of Early Childhood

- Designs and implements activities that support prenatal, postnatal, infant and toddler health and wellness, early identification and intervention, and pediatric quality improvement efforts
- 15 years of experience focused on strengthening and enhancing services available to children and families
- Has provided training, coaching, consultation, and technical assistance in a variety of community settings

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### Training Agenda

- Review benefits of developmental screening
- Describe features of ASQ-3
- Describe and interpret cutoff scores
- Have strategies for involving and communicating with families about developmental screening
- Discuss appropriate follow-up and referrals



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### Common Terms



- Screening
- Diagnostic Assessment
- Monitoring

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### Screening

A brief procedure designed to identify children who should receive more intensive assessment or evaluation from agencies such as Regional Centers or School Districts



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### Diagnostic Assessment



An in-depth assessment of one or more developmental areas to determine the nature and extent of a physical or developmental delay **and** determine if the child is eligible for early intervention services

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### Monitoring

Developmental surveillance – Screening at-risk infants and toddlers **not** known to be eligible for special health or educational services **at frequent intervals**



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**And, Remember**



- Screening **does not** diagnose delays or disabilities
- Screening **does not** identify specific child goals or skills to target; only information on general areas of development

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**Why We Screen**

- 1 in 4 children under the age of 6 in California are “at-risk”
- Only 28.5% of children in California receive timely screenings
- California ranks 44<sup>th</sup> in the country for screening children below the federal poverty level



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**Benefits of Developmental Screening**



- Identifies children at risk for possible developmental delays
- Detects child's strengths and opportunities
- Provides an opportunity to:
  - Address family concerns
  - Educate parents on child development
  - Empower families

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Universal screening and monitoring programs (with individualized and comprehensive follow-up) promote social equity and maximize a child's ability to enter school ready to learn



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## Cultural Adaptability of ASQ



- Alternative administration methods
- Alternative materials suggested on the questionnaire
- Normative sample includes diverse populations
- Scoring allows for omission of inappropriate items

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## Features of the ASQ-3



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### What are the Ages & Stages Questionnaires (ASQ)?

- Parent- or caregiver- completed screening tools that encourage family involvement
- Series of questionnaires for children ages 1 month to 5 ½ years
- Tools to accurately identify children at risk for developmental delay
- Tools to educate adults about child development and guide developmental promotion



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### Parent Report: Research



- Parents are highly reliable when reporting on their child's development (Dinnebeil & Rule 1994)
- ASQ-3 research found 93% agreement between parents and professionals
- Many other studies agree that parents are reliable reporters

Parents ARE the experts on their child!

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### Difference in Family and Professional Report

Research indicates:

- Professionals may underestimate a child's skills
- Higher agreement for easily observed skills and behaviors
- Families report more emerging skills
- Children do different things in different settings



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## Features: Family Engagement



- Encourages family involvement
- Validates parent concerns
- Conveys the value for and importance of the parent's expertise
- Can create teachable moments with families about development
- Bridges communication between providers and families

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## Features: ASQ-3 Intervals

**21 Questionnaire Intervals**

2, 4, 6, 8, 9\*, 10, 12, 14, 16, 18, 20, 22, 24 (spaced 2 months apart)

27, 30, 33, 36 (spaced 3 months apart) 42, 48, 54, 60 (spaced 6 months apart)

**Recommendations:**

- \*Only use 9-month ASQ in medical settings
- Monitor every 4-6 months up to 2 years
- Monitor every 6 months after 2 years
- Monitor more frequently if concerned

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## ASQ-3 and ASQ:SE Domains

**ASQ-3**

- Communication
  - Expressive
  - Receptive
- Gross Motor
- Fine Motor
- Problem solving
- Personal-social
  - Adaptive
  - Social



**ASQ: SE-2**

- Social-Emotional development

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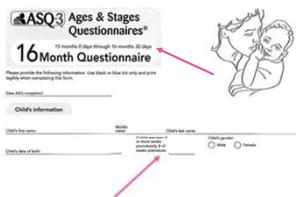
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## Features: Cover Page

- Administration window indicated at top left corner on ASQ-3
- Question about prematurity determines if adjusted age is needed



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## Features: Important Points to Remember



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## Features: ASQ-3 Areas & Questions

PERSONAL-SOCIAL	NO	SOMETIMES	YES	NOT AT ALL	—
1. Does your child get angry with a spouse, even though he might say some nice things?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
2. Does your child act unfriendly by taking things off other kids?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
3. Does your child play with a child he doesn't like by hugging it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
4. While having a fight in the mirror, does your child often say a kiss or hug it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
5. Does your child say anything to try to make something or someone better?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
6. Does your child say anything to her or she needs help, such as with writing a story or answering a question?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—

- 5 developmental areas
- 6 questions in each area
- Response options: Yes, Sometimes, Not Yet
- 4<sup>th</sup> to 6<sup>th</sup> grade reading level

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## Features: ASQ-3 Areas & Questions

- Questions ordered in a hierarchy
- Questions #5 and #6 are average skills for child of that age  
(i.e., a 16-month skill for a 16-month old child)

(i.e., a 16-month skill for a 16-month old child)

FINE MOTOR	YES	NOT YET
1. Does your child help set the plates of a meal? (Not just 1 page for her to help)	<input type="radio"/>	<input type="radio"/>
2. Does your child help make a meal with a spoon or a knife? (If the simple shapes the blade, mark "not yet" for this item)	<input type="radio"/>	<input type="radio"/>
3. Does your child carry a small meal or toy in or out of another place? (If the simple shapes the bowl, mark "not yet" for this item)	<input type="radio"/>	<input type="radio"/>
4. Does your child make small marks or scribbles on paper with either a pencil or a crayon?	<input type="radio"/>	<input type="radio"/>
5. Does your child make marks in the paper with the tip of a crayon (or pencil) pointing away from her?	<input type="radio"/>	<input type="radio"/>
6. Does your child make a page of marks by herself? (She has more than one page at a time)	<input type="radio"/>	<input type="radio"/>

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## Features: Overall Section

18 Month Questionnaire	
<b>OVERALL</b>	Comments
1. Do you think your child is the other children the age for his age?	<input type="radio"/> No <input checked="" type="radio"/> Yes
2. Can your child understand what other people say to him?	<input type="radio"/> No <input checked="" type="radio"/> Yes
3. Do you think your child likes, cares, and likes other children the age for his age?	<input type="radio"/> No <input checked="" type="radio"/> Yes
4. Does your child eat, sleep, and drink the same as other children the age for his age?	<input type="radio"/> No <input checked="" type="radio"/> Yes
5. Does your child have a healthy family of childhood illnesses or housing problems?	<input type="radio"/> No <input checked="" type="radio"/> Yes
6. Do you have concerns about your child's health? If yes, explain.	<input type="radio"/> No <input checked="" type="radio"/> Yes

- Un-scored section
- Looks at quality of skills (e.g., speech)
- Looks at family and medical history
- Parent concerns are **VERY** predictive!

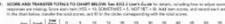
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## Features: Summary Sheet

Each ASQ-3 interval has its unique summary sheet

Summary sheets have 5 sections:

- o Child/family information
- o Bar Graph with cutoffs
- o Overall Section
- o Score and Interpretation guidance
- o Follow up action taken
- o Optional: Individual question responses

ASQ® 16 Month ASQ-3 Information Summary		13 months ago through 12 months old
Child's Name:	Date ASQ completed:	
ASQ-3 ID #:	The age assigned for presentation:	
Advancing program needs:		
<b>1. HOME AND TRANSITION: ASQ-3 ASSESSMENT</b> <i>See ASQ-3 User's Manual, section 1, for instructions on how to use this section to determine if your child has developmental needs in the home environment.</i>		
		
<b>2. TRANSFER: CHILDREN'S NEEDS</b> <i>Circle each response that applies. See ASQ-3 User's Manual, section 2, for instructions on how to use this section to determine if your child has developmental needs in the child's environment.</i>		
		
<b>3. ASSESSMENT: PARENT/PROFESSIONAL INFORMATION AND RECOMMENDATION FOR FOLLOW-UP</b> <i>Circle the responses that apply to your child. If you are not sure about a response, ask your healthcare provider or another healthcare professional to help you decide. If you are not sure about a response, ask your healthcare provider or another healthcare professional to help you decide.</i>		
		
<b>4. FOLLOW-UP ACTION: CHILD'S ASSESSMENT</b> <i>Circle the responses that apply.</i>		
		
<b>5. OPTIONAL: ASSESSMENT: PARENT/PROFESSIONAL INFORMATION AND RECOMMENDATION FOR FOLLOW-UP</b> <i>Circle the responses that apply.</i>		
		

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## Frequently Asked Questions

**I don't have time to do this. Can you do it?**

*The ASQ is a parent completed questionnaire, and because you know your child best it is really important for you to share what you know about your child. I can support you in this process, but I can't complete the ASQ without you.*

Why do you want to do this with my child? Is something wrong?

No, there is nothing wrong; we offer these questionnaires to all of our families. These first five years are really important times for learning—in fact these years are the time of the most rapid growth in a child's brain. It's really helpful to do a quick check and make sure everything is on schedule.

What are you going to do with this information? Who is going to see it?

*This is up to you. I can keep the questionnaire in my files or you can keep it, or we can both keep a copy. It would be great for you to share results with your child's doctor. I would never share information about your child with anyone without your permission.*

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## Scoring and Implementation

Ages & Stages Questionnaire, 3<sup>rd</sup> edition (ASQ-3)

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## Selecting the Correct Questionnaire

1. Determine age of child in months and days:  
• Subtract Date of Birth from Date ASQ Completed

2. Adjust age if needed for prematurity (up to 2 years).

- Adjust age when 3 or more weeks premature.
- Subtract # of weeks from age of child.

*If child was 6 weeks premature, what is their adjusted age?*

### 3. Use age (or adjusted age) to select questionnaire.

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## Scoring the ASQ-3

- Step 1: Review the responses. If any missing items, try to obtain answers. If item is inappropriate, leave it blank.
- Step 2: Calculate domain area totals; add up all questions in domain area: "Yes"=10; "Sometimes"=5; "Not yet"=0
- Step 3: Read the answers to the Overall section questions carefully and respond appropriately.
- Step 4: If any questions were not answered (omitted), calculate new area total (next slide with an example)

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## Adjusting Score When Answers are Omitted

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Scoring Practice				
<b>PERSONAL-SOCIAL</b>				
	YES	SOMETIMES	NOT YET	
1. Does your child feed himself with a spoon, even though he may spill the food?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>10</b>
2. Does your child help未经他自己 by taking off clothes like socks, hat, shoes, or mittens?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>10</b>
3. Does your child play with a doll or stuffed animal by hugging it?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>10</b>
4. While looking at himself in the mirror, does your child offer a toy to his own image?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>9</b>
5. Does your child get your attention or try to show you something by pulling on your hand or clothes?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<b>10</b>
6. Does your child come to you when she needs help, such as with winding up a toy or unscrewing a lid from a jar?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<b>5</b>
PERSONAL-SOCIAL TOTAL				
<b>85</b>				

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# Resources for Adjusted Score

ASQ Age Calculator App [www.agesandstages.com](http://www.agesandstages.com) Quick Start Guide



**ADJUSTING SCORES WHEN ITEM RESPONSES ARE MISSING**

What can I do if I have to calculate an ASQ score or rescore the ASQ test score if an adjusted administration is required? If an ASQ test is administered in a modified or adjusted format, the rescore procedure for the reduced version must be used on the scores for the three items that are to be administered according to the ASQ test directions for the adjusted score. Find the total number of items that were administered. If the total number of items administered is less than the total number of items on the ASQ test, then the adjusted score is calculated by dividing the total number of items administered by the total number of items on the ASQ test. If the total number of items administered is equal to or greater than the total number of items on the ASQ test, then the adjusted score is calculated by dividing the total number of items administered by the total number of items on the ASQ test.

Age Score	Adjusted one item - Items tested	Adjusted score - Items tested
56	56	56
48	48	48
40	40	40
32	32	32
24	24	24
16	16	16
8	8	8
0	0	0
1	6	25
2	6	33
3	6	50
4	6	67
5	6	75
6	6	83

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## Example of Completed & Scored Information Summary Sheet

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**ASQ-3 Score & Interpretation**

Consider the following:

Total ASQ-3 Area Scores  
 Overall Responses/Parent Concerns



What other factors may impact a child's screening results?




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**ASQ-3 Score & Interpretation**

How might a child's family and cultural context impact early development?



- Communication styles
- Geography/Environment
- Values & Beliefs
- Parenting Practices

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**ASQ-3 Score & Interpretation**

Not Yet?      Why Not?



Did the child have an opportunity to try items? Is item appropriate given the child's cultural context?

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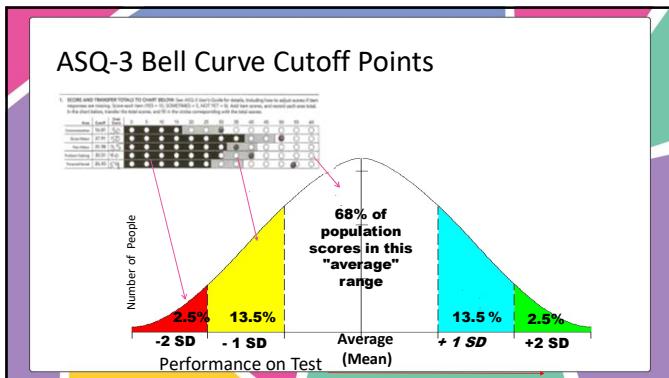


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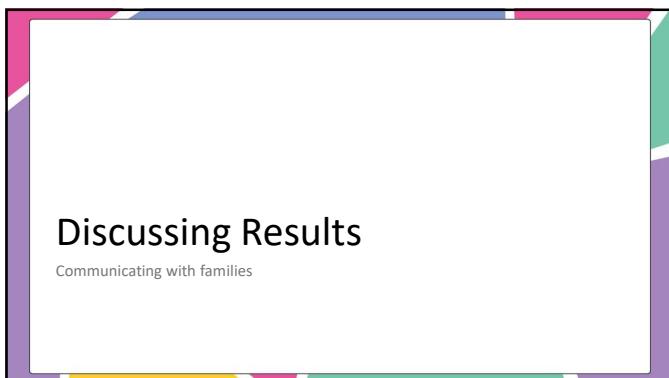


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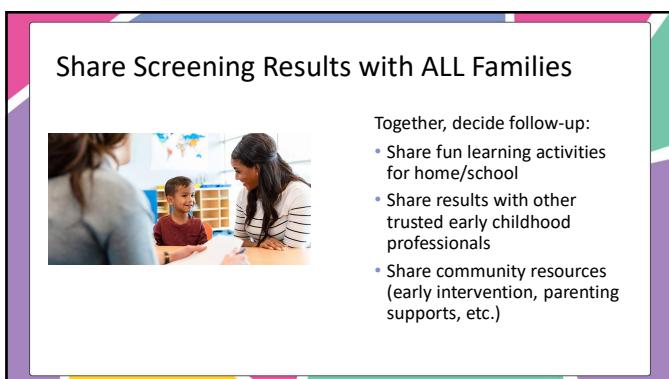
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## Discussing Results...with all families

- Plan for cultural or language issues
- Be timely and insure confidentiality
- Start by celebrating the child
- Review the purpose of screening and questionnaire
  - Start with strengths
  - Avoid terms such as “test”, “pass”, “fail” (use family-friendly language, i.e. strengths, skills in progress, opportunities to practice/support)
- Invite families to share observations and suggestions for follow-up actions




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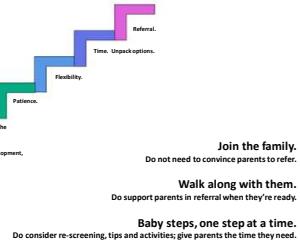
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## Having Difficult Conversations

Relieved and ready? Or upset, confused, defensive, protective, in disagreement, needing more time?

What are they thinking? Read subtle cues. Validate. When sharing concerns, be specific. What other factors should be considered?




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## Next Steps & Follow-Up

Building a system of early identification and intervention

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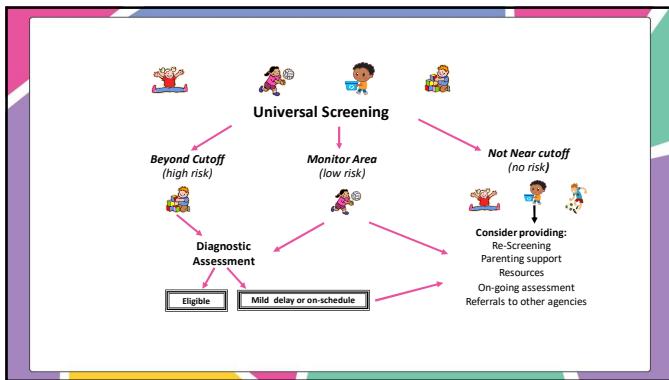


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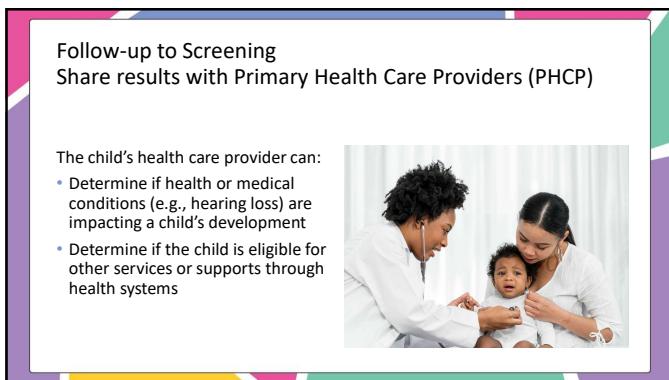
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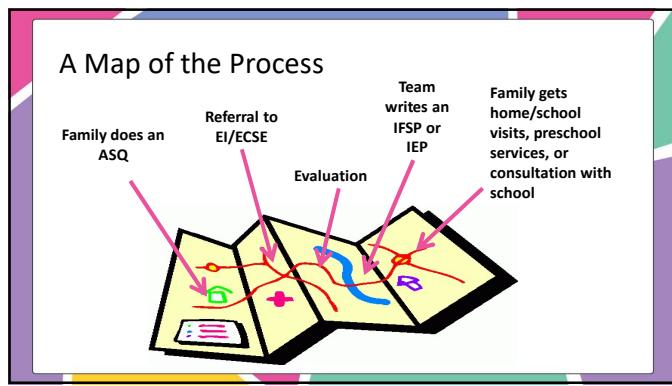
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### In Summary/Q&A

The grid contains 12 small, square portraits of diverse young children, arranged in a 3x4 grid. Each child has a unique expression and appearance, representing a diverse population.

- Screening tools can help bridge communication with families
- Developmental issues are very complicated
- Referrals should be based on a variety of considerations in addition to scores
- Any questions?

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