Training Guide

ASQ-3
Ages & Stages Questionnaires
THIRD EDITION
Mission:

Promote the best start for WNY children aged birth-5 so they are healthy and prepared to succeed in school and life.
What is Screening?

Administration of a brief, accurate (valid) tool that:

• Identifies children developing on-schedule
• May identify children who would benefit from practice/support in specific areas
• Identifies children at risk for developmental delays (DD) who should be referred for further evaluation

• Answers the question:
  • Does the child need an in-depth evaluation?
Screenings Should Be Considered in Contexts and Over Time

What Goes Into Your Health?

Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walt: Solving Complex Problems (October 2014)
Choosing the Correct ASQ-3 when the child is Premature

• Correct for prematurity when the child is born 3 or more weeks early, until 24 months

• Create "Adjusted Age"
  ○ Subtract weeks of prematurity from child’s age at administration.
  ○ Use adjusted age to choose appropriate ASQ-3 interval
Features: ASQ-3 Intervals

- 21 Questionnaire intervals:
  
  2, 4, 6, 8, 9, 10, 12, 14, 16, 18, 20, 22, 24
  
  27, 30, 33, 36 (spaced 3 months apart)
  
  42, 48, 54, 60 (spaced 6 months apart)
ASQ Age Calculator

- **Wed Oct 02 2019**
- **Thu Nov 22 2018**
- **3 Weeks**

---

**Chronological Age**
10 Months and 10 Days

---

**Adjusted Age**
9 Months and 19 Days

---

**ASQ-3**
9 or 10 month

---

**ASQ:SE-2**
12 month
Features: ASQ-3 Cover Page

- Administration window indicated on ASQ-3 cover page
- 9-month "window" is for children ages 9 months 0 days through 9 months 30 days
Features: ASQ-3 Areas and Questions

- 5 developmental areas
- 6 questions in each area
- Response options: Yes, Sometimes, Not Yet
- Written at 4th to 6th grade level
- Questions ordered in a hierarchy
Features: ASQ-3 Developmental Areas

• Communication
• Gross Motor
• Fine Motor
• Problem Solving (cognitive)
• Personal Social (self help)

• Sample Item: Does your child stack a small block or toy on top of another one? (18-month questionnaire, Fine Motor area)
Features: ASQ-3 Overall Section

• Un-scored Section
• Looks at quality of skills (e.g., speech)
  - Example: "Does your baby use both hands equally well?"
  - "NO" response indicates possible cerebral palsy; important to follow up
• Parent concerns are very predictive
• Any concerns or questionable responses require follow-up
Features: ASQ-3 Summary Sheet

- Each ASQ-3 interval has unique summary sheets
- Summary sheets have 5 sections:
  - Child/family information
  - Bar graph with cutoffs
  - Overall section
  - Follow-up action taken (new to ASQ-3)
  - Optional section: Individual item responses
### 9 Month ASQ-3 Information Summary

#### Baby's name:

#### Date ASQ completed:

#### Baby's ID #:

#### Date of birth:

#### Administering program/provider:

#### Was age adjusted for prematurity when selecting questionnaire?  
- **Yes**  
- **No**

---

**1. SCORE AND TRANSFER TOTALS TO CHART BELOW:** See ASQ-3 User’s Guide for details, including how to adjust scores if item responses are missing. Score each item (YES = 10, SOMETIMES = 5, NOT YET = 0). Add item scores, and record each area total. In the chart below, transfer the total scores, and fill in the circles corresponding with the total scores.

<table>
<thead>
<tr>
<th>Area</th>
<th>Total Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication</td>
<td>15.97</td>
</tr>
<tr>
<td>Gross Motor</td>
<td>17.82</td>
</tr>
<tr>
<td>Fine Motor</td>
<td>31.30</td>
</tr>
<tr>
<td>Problem Solving</td>
<td>28.72</td>
</tr>
<tr>
<td>Personal Social</td>
<td>18.91</td>
</tr>
</tbody>
</table>

---

**2. TRANSFER OVERALL RESPONSES:** Bolded responses require follow-up. See ASQ-3 User’s Guide, Chapter 6.

1. Uses both hands and both legs equally?  
   - **Yes**  
   - **NO**  
   - **Comments:**

2. Feet are flat on the surface most of the time?  
   - **Yes**  
   - **NO**  
   - **Comments:**

3. Concerns about not making sounds?  
   - **YES**  
   - **NO**  
   - **Comments:**

4. Family history of hearing impairment?  
   - **YES**  
   - **NO**  
   - **Comments:**

---

**3. ASQ SCORE INTERPRETATION AND RECOMMENDATION FOR FOLLOW-UP:** You must consider total area scores, overall responses, and other considerations, such as opportunities to practice skills, to determine appropriate follow-up.

- If the baby's total score is in the **XX** area, it is above the cutoff, and the baby's development appears to be on schedule.
- If the baby's total score is in the **XX** area, it is close to the cutoff. Provide learning activities and monitor.
- If the baby’s total score is in the **XX** area, it is below the cutoff. Further assessment with a professional may be needed.

---

**4. FOLLOW-UP ACTION TAKEN:** Check all that apply.

- Provide activities and resources in ____ months.
- Share results with primary health care provider.
- Refer for (circle all that apply) hearing, vision, and/or behavioral screening.
- Refer to primary health care provider or other community agency (specify reason):
- Refer to early intervention/early childhood special education.
- No further action taken at this time.
- Other (specify):

---

**5. OPTIONAL:** Transfer item responses (Y – YES, S – SOMETIMES, N – NOT YET, X – response missing).

<table>
<thead>
<tr>
<th>Area</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross Motor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fine Motor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Problem Solving</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Social</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**HELP ME GROW**

WESTERN NEW YORK

THE EARLY YEARS MATTER MOST
Features: ASQ-3 Cultural Adaptability

• Alternative administration methods for individuals from different cultural backgrounds
• Alternative materials for individuals from different cultural backgrounds
• Scoring permits omission of inappropriate items
• Normative sample includes diverse populations
ASQ-3 Scoring

**Step 1:** Review responses. If any missing items, try to obtain answers. If item is inappropriate, omit item.

**Step 2:** Calculate area totals: "yes" = 10; "sometimes" = 5; "not yet" = 0.

**Step 3:** If any items omitted, calculate new area total (see next slide for example).
Workflow + Employee Roles

Dr. Gail Ferguson
9 month old arrives for visit

MA gives language appropriate ASQ to family and reviews how to fill out in waiting room/intake

If foreign language speaking & time allows, go through ASQ with Language Line

If form is completed and time allows, fill out summary sheet and leave packet in door for provider

Provider reviews ASQ results and requests, if necessary, using developmental tools

Provider completes summary sheet if not yet done

Provider reviews results with family
Provider documents results in charts

**Negative ASQ**
- Provider reviews Rx for Success & HMG info
- MA makes a copy and puts in scan bin and the original goes in toolkit

**Borderline ASQ**
- Provider gives appropriate education sheets for borderline areas (MA would place in door if they had completed summary)
- Provider plans to repeat ASQ at 1 year old WCC. Put reminder in chart

**Positive ASQ**
- Provider/MA complete EI & HMG referral forms
- MA makes 1 copy of entire packet. The copy is put in Fax/Mail bin. Original to be stored in toolkit
Documenting ASQ Results in Patient Chart

1. Login to EHR > Open new encounter in patient chart > Click on Assessment / Plan (left panel)

2. Open Templates for Well Child – scroll down & click on the link to open
Documenting ASQ Results in Patient Chart

- OR
- Open Short List for Well Child

### Assessment/Plan

- Patient Problem List
- Patient Medications
- My Short Lists

#### Short Lists

- Well Visit Protocols - Pediatric w/Immunizations
  - Underimmunization status (Z28.3)
  - Expectant parent prebirth pediatrician visit (Z76.81)
  - Preoperative examination (Z01.818)

#### Assessment/Plan

- History & Physical

- Screening for developmental handicaps in early childhood (Z13.42)
  - ASQ
  - 9 month ASQ completed, see scanned in screening tool
  - ASQ scores were above the cutoff in all domains

#### Communication

- Communication score above the cutoff
- Communication score below the cutoff
- Communication score close to the cutoff
• If ASQ is Positive – use the following template and follow referral process with CHWs

9 MONTH WELL CHILD VISIT with abnormal findings (200.121)
The provider performs an ASQ developmental screening.
- Patient’s results are positive – Continue to appropriate referral.
- Patient’s results are negative – Proceed with appropriate recommendations and document in chart.

During visit, provider will place referrals for EI and HMG in the EHR under Assessment & Plan.

With a positive ASQ the MA/Provider asks parent/guardian to sign:

1. An Early Intervention (EI) referral form and
2. A Help Me Grow (HMG) referral form that are both to include reason for referral. *Parent signature is required.

MA places the signed referral form along with the corresponding ASQ documents in the Fax/Mail bin. Medical Records clerk will fax HMG form to ATTN: Family Resource Coordinator and EIP form to Coordination.

ASQ will be saved in: "DEVELOPMENTAL", Help Me Grow and EIP forms will be saved in: "REFERRALS"
CHW assistance may be requested to support EI referrals on site. Within 2 business days, CHW will confirm faxed referrals of HMG & EI in chart & document in referral order, internal comments.

Within 3 business days, EI will contact the patient. Within 5 business days, HMG will create an electronic child profile and contact the family to:

(1) Provide activities that can be done at home to improve child skills (2) Connect family with services to address needs not met by medical home or EI.

In the 1st week of each month, HMG will fax a summary of interactions with patients referred from NHC in the prior month to ATTN: Community Health Supervisor (716) 332-0832.

Summary will include case notes & follow-up actions taken by HMG for each child referred. Each summary form will be scanned into individual patient charts, saved in “DEVELOPMENTAL” & attached to the HMG referral order.

Assigned CHW will assure that referral order is updated with patient’s next steps. CHW will review chart to verify that letters & summaries are appropriately attached to chart & linked to the referral order.

NHC medical and support personnel may contact HMG with questions about a specific referral at any time. NHC team members to retrieve patient information from the HMG child profile system.

Positive ASQ Algorithm for Referral & Follow-up Workflow
### Positive ASQ Algorithm for Referral & Follow-up Workflow

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CHW will document findings in internal comments of referral order. CHW will send a patient message to provider w/update and requesting further steps.</td>
</tr>
<tr>
<td>2</td>
<td>If HMG and/or EI has not been able to be in contact with the patient, CHW will send a patient message to provider w/update and requesting further steps.</td>
</tr>
<tr>
<td>3</td>
<td>If EI has been in contact with the patient but they have not received evaluation, determination of services and/or necessitated therapies, the CHW will document under the referral.</td>
</tr>
<tr>
<td>4</td>
<td>The CHW will send a patient message to provider with update &amp; requesting further steps. If documentation is present, CHW will verify that the evaluation is attached to the EI referral.</td>
</tr>
</tbody>
</table>

3 months after positive screen, CHW will follow-up on HMG & EI referrals using Referral Follow-Up process. If documentation from EI and HMG not present, follow up with the patient to see:

1. If they have been contacted by HMG and what resources family received or activities sent to the family.
2. If they have been contacted by EI and
3. If their child was evaluated. (4) The determination of the EI evaluation (5) If found to be eligible by EI, what therapies they have been determined to need.
ASQ-Portal

- https://www.asqonline.com/login
- Username: nhcenter
- Password: asqnhc