

Don't Just Wait and See: Improving Developmental Screening and Follow-

***1. Participant Name:**

***2. Do you have easy-to-read materials to help parents track their child's development from birth to age 5 and help them talk with you about their progress?**

- Yes, I have what I need
- Yes, but I could use better materials
- No, and I would like to find good materials
- No, and I don't need them

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***3. Do you routinely distribute these materials to families?**

Yes

No

***4. Are you familiar with *Learn the Signs. Act Early.* materials?**

Yes

No

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***5. Do you print or order *Learn the Signs. Act Early.* materials and distribute them to families?**

Yes

No

***6. Do you routinely conduct developmental monitoring/surveillance at every health supervision visit?**

Yes

No

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***7. Do you routinely document developmental monitoring/surveillance in the patient's chart/medical record?**

Yes

No

***8. Do you currently perform standardized developmental screening tests in your practice using a standard screening tool?**

Yes

No

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***9. What tool(s) do you use to perform standardized developmental screening tests (check all that apply)?**

- Ages and Stages Questionnaire (ASQ)
- Ages and Stages Questionnaire, Third Edition (ASQ-3)
- Child Developmental Inventory (CDI)
- Parents' Evaluation of Developmental Status (PEDS)
- Parents' Evaluation of Developmental Status: Developmental Milestones (PEDS:DM)
- Survey of Wellbeing of Young Children (SWYC)
- Denver II Developmental Screening Test

Other Screening Tool (please specify)

***10. Check all options below that apply to the screening tool that you use:**

- My practice is paper-based (we do not currently use Electronic Health Records)
- Parent completes the screening test on paper and my practice scans the score sheet into the Electronic Health Record (EHR)
- Parent completes the screening test on paper and the primary care provider or a staff member enters scores into the EHR
- My practice has purchased an online product from the screening tool publisher

Other (please specify)

***11. At what age well-visits do you routinely conduct developmental screening tests (check all that apply)?**

- 9 months
- 18 months
- 24 months
- 30 months

Other (please specify)

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***12. Do you currently perform routine standardized developmental screening tests for autism spectrum disorder in your practice using a standard screening tool?**

- Yes
- No

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*13. What tool(s) do you use to perform standardized developmental screening tests for autism spectrum disorder (check all that apply)?

- Modified Checklist for Autism in Toddlers (M-CHAT)
- Modified Checklist for Autism in Toddlers, Revised with Follow-up (M-CHAT-R/F)
- Pervasive Developmental Disorder Screening Test-II (PDDST-II)

Other (please specify)

*14. Check all options below that apply to the screening tool that you use:

- My practice is paper-based (we do not currently use Electronic Health Records)
- Parent completes the screening test on paper and my practice scans the score sheet into the Electronic Health Record (EHR)
- Parent completes the screening test on paper and the primary care provider or a staff member enters scores into the EHR
- My practice has purchased an online product from the screening tool publisher

Other (please specify)

*15. At what age well-visits do you routinely conduct developmental screening tests for autism spectrum disorder (check all that apply)?

- 18 months
- 24 months
- 30 months

Other (please specify)

*16. Do you routinely discuss both positive and negative screening results with families?

- Yes
- No

***17. Do you document the discussion?**

- Yes
- No

***18. Do you have a standard process in place for next steps when a concern is noted by the primary care provider during the developmental screening process?**

- Yes
- No

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*19. Is the standard process followed?

- Yes
- No

*20. When there is a positive developmental screening result, do you refer patients/families to any of the following for follow-up care (check all that apply)?

- Early Intervention/Part C of the Individuals with Disabilities Education Act (IDEA)
- Developmental-Behavioral Pediatrician
- Therapies (speech therapy, physical therapy, occupational therapy, etc)
- Not applicable (do not refer families for follow-up care)

Other (please specify)

*21. Are children who receive a positive developmental screen able to get the follow-up care they need in a timely fashion?

- Yes
- No

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***22. If not, why are patients unable to get the follow-up care they need?**

***23. Do you have a referral tracking system in place for children identified by a developmental or autism standard screening test as at-risk or delayed?**

- Yes
- No

***24. Does your practice provide ongoing training and orientation to staff on how to conduct developmental surveillance and screening?**

- Yes
- No

***25. Does your practice provide ongoing training and orientation to staff on how to communicate developmental concerns and screening results with families?**

- Yes
- No