Using Parents' Evaluation of Developmental Status (PEDS) and PEDS: Developmental Milestones (PEDS:DM): A Case Example



Stephen Richards*, age 29 months, received health care from Paragon Pediatrics, a practice implementing the American Academy of Pediatrics' 2006 policy on developmental screening and surveillance. The practice added a 30 month visit devoted to detecting and addressing developmental and behavioral issues. Clinicians used both PEDS and the PEDS:DM. Mrs Richards filled out a PEDS Response Form while she was in the waiting room. She expressed some concerns about Stephen's behavior and understanding of language.

*For this case example, no personally identifying information is included. Pseudonyms are used along with stock photography.



PEDS RESPONSE FORM

Paragon Provider

Child's Name <u>Stephen Richards</u>

Parent's Name Mr. and Mrs. Richards

3/21/12 Child's Birthday ___

Child's Age _29 months

Today's Date _

Please list any concerns about your child's learning, development, and behavior.

Mostsly his behavior. He doesn't smind me or seem to listen to me at all. Tantrums all the time.

Do you have any concerns about how your child talks and makes speech sounds?

Circle one: (No)

A little

COMMENTS:

Do you have any concerns about how your child understands what you say?

Circle one: No A little COMMENTS:

Do you have any concerns about how your child uses his or her hands and fingers to do things?

Circle one: /No A little COMMENTS:

Do you have any concerns about how your child uses his or her arms and legs?

Circle one: (No)

A little

Do you have any concerns about how your child behaves?

Circle one: No Yes A little COMMENTS:

This may just be the terrible twos, but it is really terrible.

Do you have any concerns about how your child gets along with others?

Circle one:

Do you have any concerns about how your child is learning to do things for himself/herself?

COMMENTS: Circle one: (No) Yes A little

He tries to be too independent.

Do you have any concerns about how your child is learning preschool or school skills?

Circle one: (No) A little COMMENTS:

I think he's too young for that sort of stuff.

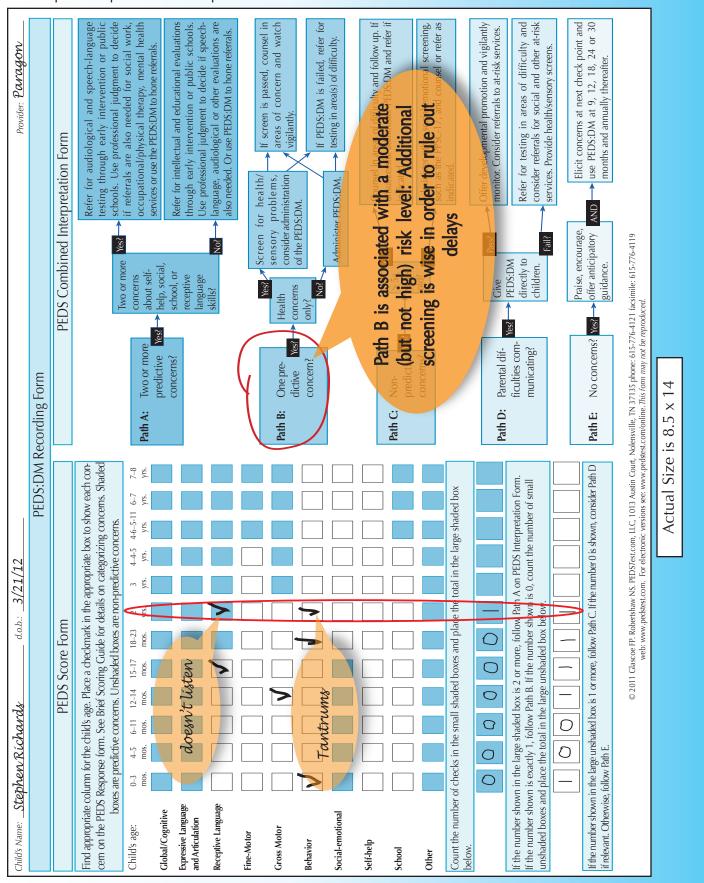
Please list any other concerns.

Actual Size is 8.5 x 11

Nothing other than behavior and listening.

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The PEDS Score Form shows how Mrs. Richards' concerns were categorized (receptive language and behavior). These concerns indicated the need to follow Path B on PEDS and to screen further due to a potentially elevated risk for developmental problems. In response the PEDS:DM was administered to determine the best course of action.



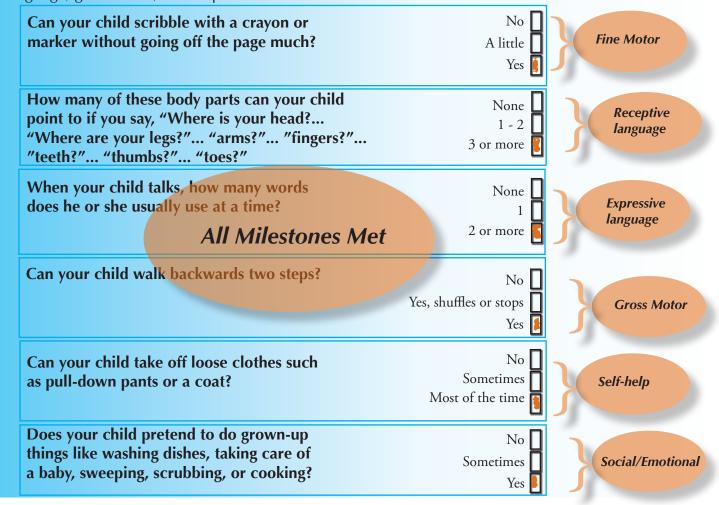
PEDS: DM forms are laminated and parents mark them with a dry erase marker. Opposite the questions are

stories and illustrations to encourage reading aloud. A scoring template is placed over the answers to reveal correct and incorrect responses. Results are marked on the PEDS:DM Growth Chart—see page—where next there is also space for noting specific decisions. On the other side of the PEDS: DM Growth Chart is the PEDS Score and Combined Interpretation Form. Thus a 1



page form remains in the child's chart to track surveillance and screening activities from 0 to 7–11 years.

Here are the PEDS:DM items at the 29 month level and Ms. Richard's responses. These were all correct answers and showed that Stephen had age appropriate fine motor, receptive language, expressive language, gross motor, self-help and social-emotional skills.



Here is the PEDS:DM Growth Chart showing the trajectory of Stephen's development in each domain over time. The Specific Decisions show issues raised during prior encounters and clinicians' responses to each. At the current visit, Stephen received hearing screening (vision as well) which is a helpful response when receptive language concerns are raised. Having ruled out developmental problems, the issue was clearly behavioral and indicated a need to educate this parent on effective disciplinary techniques. In response, she was given an information handout on behavior management (included in the PEDS:DM Professionals' Manual) and asked to call back in two months to report on progress. If problems persisted, clinicians at Paragon were prepared to refer her for parent training classes and/or individual behavioral intervention. Referral resources are also included in the PEDS:DM Professionals' Manual.

