

## **Selected Internet Resources for Developmental, Psychosocial and Social Capital Screening for Rural Pediatricians**

American pediatrics is somewhat unique, in that we have undertaken the responsibility to not only promote health among our young patients, but to also assist with their intellectual and physical development. We do this every day as part of our primary routines, providing anticipatory guidance on nutrition, growth and development, behavior, safety and parenting. Recently the American Academy of Pediatrics has suggested that we undertake a new responsibility, that of formal developmental screening to identify those children who are not developing appropriately.

Screening, though, should, also include those factors that impact healthy development later in life, such as

- ❖ maternal depression,
- ❖ socioeconomic distress,
- ❖ community connectedness,
- ❖ substance abuse,
- ❖ child mental health and
- ❖ domestic violence.

Most primary care offices are looking for screens that cover all of these issues in one simple form. A good example of a screen meeting this criterion is Howard Dubowitz's Parent Screening Questionnaire. The Questionnaire has been published in Pediatrics (<http://pediatrics.aappublications.org/cgi/content/full/119/3/435> for AAP members).

Other screens applicable for primary care are available in the Bright Futures Mental Health Tool Kit (<http://brightfutures.aap.org/web/FamiliesandCommunitiesToolsandResourcesDetail.asp?PageID=607&ContentID=1453>), including the Kemper Kelleher screen and depression screens. Another great source for developmental screening information and depression screens is the developmental and behavioral pediatrics web site (<http://www.dbpeds.org/screening/>). For those interested in mental health screening for children who are school age, the Pediatric Symptom Checklist is easily downloadable (<http://psc.partners.org/>)

The Commonwealth Fund ([www.cmwf.org](http://www.cmwf.org)) has some great resources for primary care practices interested in child development and screening. One of their best resources produced by the Center for Children's Healthcare Improvement and the Vermont Child Health Improvement Program is *A Practical Guide for Healthy Development* ([http://www.commonwealthfund.org/publications/publications\\_show.htm?doc\\_id=462115](http://www.commonwealthfund.org/publications/publications_show.htm?doc_id=462115)). A chapter in the Guide of particular interest to those looking for screening instruments is the third module on Family Psychosocial Screening and Surveillance ([http://www.commonwealthfund.org/General/General\\_show.htm?doc\\_id=359750](http://www.commonwealthfund.org/General/General_show.htm?doc_id=359750))

This chapter includes the Beaufort stress index that we use in our office, an introduction to screening tools, and screening protocols to be used in primary care offices.

One of the more ambitious and complete protocols for primary care doctor's offices has been developed by Ray Sturner and Barbara Howard at John's Hopkins University. Their screening algorithms are computer-based and linked to resources for families. Further information can be found at <http://www.childhealthcare.org/>.

In our office, we use a variety of screens. At birth we do the two question depression screen (<http://www.montana.edu/wwwwebm/Depression.htm>) and the Beaufort Stress Index available in the Practical Guide for Healthy Development cited above). We have also adapted questions from the AAP's Connected Kids program (<http://www.aap.org/ConnectedKids/>) that we have parceled out through all of our pre-school well child visits. We use the PEDS (<http://www.pedstest.com/>) developmental screen at 9 months, 18 months and between 2 and 3 years of age. AT 15 months and 18 months we use the joint attention questions off of the MCHAT ([www.dbpediatrics.org/media/mchat.pdf](http://www.dbpediatrics.org/media/mchat.pdf)) to evaluate for autism. Upon entry to first grade, we use the pediatric symptom checklist (<http://psc.partners.org/>) to evaluate for mental health issues.

I would be more than interested in hearing what other offices are now using for screens. We do charge for a number of our screens with the 96110 code, but to the best of my knowledge only Medicaid reimburses us. We're still committed to trying to do a better job of identifying those families who need help with developmental support. And we have gotten very positive feedback from our patients. Helping those patients who screen positive has resulted in a productive relationship with our local home-based parenting program. Our screening regimen probably adds only a couple of second on to each visit, as the screen is briefly noted in the chart by the doctor or nurse practitioner. It works. And it makes us better pediatricians. For more information, or a copy of the Beaufort Pediatrics screening protocol, e-mail me at [frushton@aap.net](mailto:frushton@aap.net).