 Briefcase Resource Document	Description and Purpose: Assessing for age appropriate behavior
	Where Found: DDSDCB: Screening Document Fields

Assessing for Age Appropriate Behavior

The assessment section of the DD Screening Document (DHS-3067) records evaluations of the person’s functioning as a prelude to service plan development and eligibility determination. Complete Fields 26-38 in the Assessment Section to reflect the person’s functioning against the norm for their age. Fields 30, 31, 32, 33, 34 and 36 are particularly sensitive to age and developmental stages.

To accurately score these fields, persons who conduct assessments should be aware of normal childhood developmental milestones for attainment of sensory, motor, speech, language and cognitive skills. The Long-Term Care Consultation Services Form: Supplemental Form for Assessment of Children under 18 (DHS-3428C) provides guidance on assessments for children under age 18.

Primary modes of functioning

Scores in the Assessment Section reflect the person’s usual functioning level or primary mode of adaptation. As exceptions to the person’s primary functioning increase in complexity, duration and frequency, score the screening document at higher levels of need.

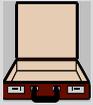
Example: A person may typically walk with crutches at home, in school and for most community activities. For extended leisure activities or shopping trips the person uses a wheelchair.

Field 30. Mobility: *Score 03-Walks aided. Document in the Notes: Person uses a wheelchair for strenuous activities.*

If the person’s condition is episodic, and the wheelchair is unpredictably necessary for extended periods, the screening team should factor those considerations into the final assessment.

Example: A child usually uses crutches to walk; however, due to failing health, the wheelchair is necessary longer periods of time. The child can bear weight for transfers.

Field 30. Mobility: *Score 04-Propels own wheelchair and can bear weight for transfers. Document in the Notes : Child can and does use crutches when in robust health.*

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Fields 30-33

For infants and children, enter a score of 99 until the child reaches the age at which the skill is usually attained and the lack of the skill creates a need for additional services or supervision.

For example, to determine the appropriate rating for Field 30. MOBILITY, the worker should have general knowledge about developmental milestones for walking: a child usually walks unassisted by 2 years of age. If the child is too young to have attained this skill, score 99 for the field.

If the child is at the age in which a specific competency is expected but has not been attained, use other scores on the rating scale.

Using the mobility example, if the parent must carry or use a stroller for a child who is 2 ½ years old, score 02-Walks short distances independently or 03-Walks aided or 08-Not mobile due to overriding medical conditions and specify in notes.

The following prompts taken from the Talaris Research Institute will help the screening team identify high level developmental milestones. Do not use them exclusively. If developmental lags are suspected, refer the person to a specialist for professional testing.

Field 30. Mobility: Walks unassisted between 18 to 24 months of age

Field 31. Fine Motor Skills: Dresses and undresses without assistance, 51 to 59 months; uses tableware for eating, 50 to 59 months; holds a pencil, 28 to 36 months

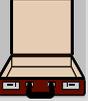
Field 32. Expressive Communication: Utters a grammatically correct declarative sentence, 24 to 31 months; speaks in complex sentences, 51 to 59 months.

Field 33. Receptive Communication: Follows a three part command, 40 to 48 months; verbally recalls part of a story 41 to 48 months

Field 34. Self Preservation

To evaluate self-preservation, assess the physical, emotional, cognitive and behavioral functioning, environmental circumstances and individual experiences of the individual.

DHS recommends scoring 99 for children under the age of 8 as the child has not reached the age at which self-preservation skills can be expected.

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For children over the age of 8, assess the child’s judgment, physical capabilities to respond to emergencies, behavior history and stability. Ask questions of the child or their caretakers such as:

1. What would you do if there was a fire in your house?
2. What would you do if a stranger offered you a ride to the store?
3. Do you know what a weather warning is?
4. What do you do if there is a tornado?

As soon as reasonable, introduce training programs to improve self-preservation skills that enhance safety and assist the individual attain the highest level of competence and independence.

Field 38. Challenging (Excess) Behavior Scales: Rating behaviors that impact skill development or functioning.

Unusual behaviors may become linked to sensory/motor, language, or other functional abilities. Score behaviors separately from the skill being evaluated on the screening document.

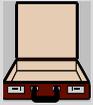
Example 1. A child uses idiosyncratic gestures and signs to communicate. However, when frustrated and unable to make their needs known, the child screams and throws objects while gesturing.

Field 32. Expressive Communication: Score the child’s expressive language skills using 06-Uses single signs or gestures to express wants and needs.

Field 38. Challenging (Excess) Behavior Scales: Score (I) Temper outbursts or (J) Other. Document in the Notes: Person may scream and throw objects to make needs known.

Example 2. The person’s vision is corrected with glasses; however, the individual refuses to wear glasses and purposely breaks them.

Field 27. Vision: Score 02-Impairment corrected to normal with glasses or contacts.

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Field 38. Challenging (Excess) Behavior Scales: Score (F) Property Destruction or (J) Other. Document in the Notes: Destroys and refuses to wear glasses.

Field 36. Independent Living Skills

Five separate functional areas compose the Independent Living Skills field:

- Self Care
- Daily Living Skills/Household Management
- Money Management
- Community Living
- Leisure and Recreation

This field's intent is to evaluate the person's functional ability and assess the level of instruction needed to provide a program of active treatment. The screening team should consider developmental stages when scoring the screening document.

Field (A) Self Care (Activities of daily living)

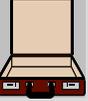
Self-care includes the activities of dressing, eating, toileting, grooming, bathing, dental care and personal hygiene. In most instances, children 5 years of age or older have mastered self-care tasks. However, many children under 5 years of age are able to participate in some self-care activities.

If the child is an infant or young child under one year of age, score 99-Unknown and document in the Notes.

Example: A four-year old child with a diagnosis of severe cerebral palsy cannot participate in self-cares. Score 05-Persons unable to participate in activity. Many four- year old children are toilet-trained; can help with dressing; assist in bathing and feed themselves.

Fields (B), (C), (D) and (E) Instrumental Activities of Daily Living/Community Living

IADLs include daily living skills, household management (cooking, cleaning, use of appliances), money management, community living, leisure and recreation. These skills require instruction through the middle childhood and adolescent years.

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In most instances, children 12 years of age or older have become somewhat independent in their exercise of IADLS and community living skills. Score 00-Other and document in the Notes.

After 12 years of age, use the rating scales.

Screening team training resources

Standardized tools such as the Denver Developmental Materials, Inc. (<http://www.denverii.com/>) or the *Bayley Scales of Infant and Toddler Development* can be used to training staff to evaluate infants' and toddlers' developmental stages.

The following Web sites contain information regarding developmental stages the worker can use as background information.

1. University of Michigan Health Systems Developmental Milestones: <http://www.med.umich.edu/1libr/yourchild/devmile.htm>
2. University of Maryland Medical Center Developmental Milestones: <http://www.umm.edu/ency/article/002348.htm>
3. *First Signs* Monitoring Development: <http://www.firstsigns.org/healthydev/healthydev.htm>
4. Talaris Research Institute: <http://www.talaris.org/timeline.htm>
5. Tufts University Child and Family Web Guide: <http://www.cfw.tufts.edu/>
6. Centers for Disease Control and Prevention - National Center on Birth Defects and Developmental Disabilities Developmental Milestones: http://www.cdc.gov/ncbddd/autism/actearly/milestones_3months.html
7. American Academy of Pediatrics Developmental Stages: <http://www.aap.org/healthtopics/stages.cfm>