**Hawaii Developmental Screening and Referral Guidelines for Early Childhood and Community Providers
(Document created by Family Health Services Division in partnership with Early Childhood Action Strategy)**

The purpose of these developmental screening guidelines is to provide basic information for those conducting developmental screening of children ages birth through five years of age. These recommended guidelines are critical to ensuring that young children achieve their optimal health and development. They are based on national resources (American Academy of Pediatrics Policy Statement of Developmental Surveillance and Screening Guidelines; the Centers for Disease Control and Prevention Act Early Campaign; Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents; Caring for Our Children; Head Start Performance Standards; and the National Association for the Education of Young Children) and tailored for Hawaii’s children between the ages of birth through age five. These guidelines are based on a review of national and local best practices and went through a vetting process with early childhood providers.

1. **Guiding Principles**
	1. All children benefit from a comprehensive screening system that includes supports and timely follow-up.
	2. All families and communities should be supported to promote their children’s optimal health and development.
	3. Implementation of a comprehensive screening system requires collaboration and coordination among all partners.
	4. Screening, referral, and follow-up should be done with engagement of families and include communication with the primary care provider (medical home, primary care physician, family physician, pediatrician, etc.).
2. **Screening**
	1. Families should be engaged as partners in the screening including knowing why it is being done, how the results will be used, and what to expect as part of the follow-up plan.
	2. Those who are conducting the screening should know what to do with the results such as, when and to whom to refer, what available supports and resources are available, and when and how to follow-up with the family.
	3. Programs doing developmental screenings should use a validated evidenced-based, developmentally appropriate screening tool that is sensitive to the area being screened and use the tool as it is designed.
3. **Referrals**
	1. Families should be engaged as partners in the referral knowing what their options are, what the process will be, and how they will be supported.
	2. Programs that do screening should follow the referral criteria of the validated screening tool they are using.
	3. If there is a developmental concern and/or the screening results fall into the referral range for children under three, discuss with parents about making a referral to Department of Health/Early Intervention Referral Line for a comprehensive developmental evaluation.
	4. If there is a developmental concern and/or the screening results fall into the referral range for children over age three, discuss with parents about making a referral to Department of Education/Preschool Special Education for a comprehensive developmental evaluation.
	5. Programs who conduct the screenings should share the screening results with the primary care provider including the status of the screening results and if a referral was made to Early Intervention or DOE Preschool Special Education.
	6. If parents refuse the referral, a follow-up screening should be done at the next interval and information to support their child’s development should be shared.