Recognizing and responding to young children in need of extra social-emotional support starts with assessment:

An Introduction To Two Caregiver-Completed Social-Emotional Assessment Tools

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University of Oregon
October, 2015
Session Will Cover:

- Framework for understanding social emotional development and importance of assessing it.
- Introduction to:
  - Social-Emotional Assessment/Evaluation Measure (SEAM™)
What is Social-Emotional Development?

- Satisfying, trusting, reciprocal relationships with others
- Ability to play, communicate, and learn
- Experience and handle a full range of emotions, cope with conflicts and face challenges.
- Healthy parent-child interactions are the basis for the development of security and well-being, viewed within the context of the cultural norms and values of families and their community.

Using a contextual-developmental perspective (Chen, 2011)
<table>
<thead>
<tr>
<th>Age</th>
<th>Stage of Development</th>
<th>Behaviors</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-12 months</td>
<td>Attachment</td>
<td>-regulation -recognizable states -attachment -communication</td>
</tr>
<tr>
<td>12-30 months</td>
<td>Autonomy &amp; Self Development</td>
<td>-differentiates between self and others; real and make believe -use of pronouns -exploration -self control; rules</td>
</tr>
<tr>
<td>30 months-7 years</td>
<td>Establishing Peer Relations</td>
<td>-empathy -gender differences -identification of friends -interest in other children</td>
</tr>
</tbody>
</table>
Links exist between earliest emotional development and later social behavior (Cicchetti & Cohen, 1995a, 1995b; Reynolds, Temple, Robertson, & Mann, 2001)

Behaviors, even in infancy, signal the need for intervention (Shonkoff & Phillips, 2000)

Links exist between early risk factors, poor outcomes, and violence (Conroy & Brown, 2004)

By 3rd grade, programs for children with antisocial behavior are mostly ineffective (Greenberg et al., 2003; Walker, 2004)
Video: The Science of Early Childhood Development

- Center on the Developing Child at Harvard University (www.developingchild.harvard.edu)

- Jack P. Shonkoff, M.D., Harvard Graduate School of Education, Harvard School of Public Health, and Harvard Medical School

http://www.youtube.com/watch?v=tLiP4b-TPCA
Prevalence rates of social-emotional behavioral problems in young children are estimated to approach **15-17%**

**One in five (20%)** children in the US has a diagnosable mental health problem that goes untreated

**Only 48%** of pediatricians use formal developmental screening instruments
What are our Concerns?

- Aggressive
- Anxious
- Eating/sleeping/eliminating problems
- Hyperactive, Short attention span
- Oppositional, non-compliant
- Social avoidance
- Limited play interests, perseverative play
- Prolonged tantrums, self harming
Barriers to Early Identification and Treatment of Young Children with Social-Emotional Challenges

- Lack of clear definition of what is acceptable
- Poorly equipped professionals
- Few valid screening measures
- Lack of community-based mental health services for young children and their families
- Difficult for young children experiencing social-emotional difficulties or behavioral challenges to qualify for services
THE PYRAMID MODEL
3-Tiered Approach to Supporting Social-Emotional Development
(PBIS Pyramid Model)

Tier 1
(Underverse Promotion)

Tier 2
(Secondary Prevention)

Tier 3
(Tertiary Intervention)

Source: Center for Social Emotional Foundations for Effective Learning, http://csefel.vanderbilt.edu/
Supportive responsive relationships among adults and children is an essential component to promote healthy social-emotional development.

High quality early childhood environments promote positive outcomes for all children.
Tier 2: Targeted Social-Emotional Support

- Systematic approaches to teaching social-emotional skills can have a preventive and remedial effect.
Assessment based intervention that results in individualized behavior support plans (e.g., Functional behavioral analysis).
Response to Intervention in ECE: Recognition & Response
Assessment is integral to teaching

Tells us:

- Who:
  - is doing fine with current level of instruction and support
  - needs more individualized instruction and support
- What to teach
- How to target teaching efforts
- Whether children are responding to teaching, support, and intervention methods.
The Linked System Framework

ASQ:SE-2™ Screening

SEAM™ Assessment

SEAM™ Goal Development

SEAM™ Intervention

SEAM™ Evaluation

ASQ-3™, ASQ:SE-2™ and SEAM™ Training Materials by Jane Squires, Jane Farrell, Jantina Clifford, Suzanne Yockelson, Elizabeth Twombly, and LaWanda Potter
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Why Screen?

Under Detected

Clearly Typical

Clearly Atypical

Adapted from Macias, M. (2006) D-PIP Training Workshop

ASQ-3™, ASQ:SE-2™ and SEAM™ Training Materials by Jane Squires, Jane Farrell, Jantina Clifford, Suzanne Yockelson, Elizabeth Twombly, and LaWanda Potter
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What is ASQ:SE-2™?

- Parent-completed questionnaires that reliably identify young children at risk for social or emotional difficulties
- Screens 7 key behavioral areas—self-regulation, compliance, adaptive functioning, autonomy, affect, social-communication, and interaction with others
• 9 questionnaires (2, 6, 12, 18, 24, 30, 36, 48, and 60 months)
• Each questionnaire has 19–39 items
• Competed by parents/family members or teachers/caregivers
• 10–15 minutes to complete; 1–3 minutes to score
• Available in English and Spanish
### Areas of ASQ:SE-2™

<table>
<thead>
<tr>
<th>Behavioral Area</th>
<th>Items address the child’s:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-regulation</td>
<td>...ability or willingness to calm or settle down or adjust to physiological or environmental conditions or stimulation.</td>
</tr>
<tr>
<td>Compliance</td>
<td>...ability or willingness to conform to the direction of others &amp; follow rules.</td>
</tr>
<tr>
<td>Adaptive functioning</td>
<td>...success in coping or ability to cope with physiological needs (e.g., sleeping, eating, etc.).</td>
</tr>
<tr>
<td>Autonomy</td>
<td>...ability or willingness to self-initiate or respond without guidance (i.e., toward independence).</td>
</tr>
<tr>
<td>Affect</td>
<td>...ability or willingness to demonstrate his/her own feelings &amp; empathy for others.</td>
</tr>
<tr>
<td>Social-Communication</td>
<td>.....ability or willingness to interact with others by responding to or initiate verbal or nonverbal signals to indicate interests or needs, etc.</td>
</tr>
<tr>
<td>Interaction with people</td>
<td>.....ability or willingness to respond to or initiate social responses to parents, etc.</td>
</tr>
</tbody>
</table>
ASQ:SE-2™ Items

• Competence and problem behaviors
  – Does your child greet or say hello to familiar adults?
  – Does your child stiffen or arch his back when picked up?

• Externalizing and internalizing behaviors
  – Does your child try to hurt other children, adults, or animals?
  – Is your child too worried or fearful?
What’s New For The 2nd Edition?

- 2 month questionnaire
- Expanded age range: 1 month–72 months
- New data and cutoffs
- Monitoring zone
- New behavior and communication items
- Item and response refinements
- Revised Spanish translation
- Updated design
- New Item Response Sheets
- New and updated parent engagement materials
- New supporting products:
  - Quick Start Guide in English and Spanish
  - Learning Activities in English and Spanish (coming in 2016)
  - ASQ:SE-2 in ASQ Online

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2 month questionnaire

- Screen children 1 month, 0 days to 2 months, 30 days
- 16 scored items, 3 overall items
- Sample items
  
  When you talk to your baby, does he look at you and seem to listen?

  Do you and your baby enjoy feeding times together (breast or bottle feeding)?
Expanded age range

- 1 month–72 months
- Facilitate enrolling and monitoring children from birth
- Screen children through school entry
- No gaps between questionnaires
- 60 month questionnaire screens children 54 months, 0 days to 72 months, 0 days
Behavior and Communication items

• 16 new behavior and communication items (3–7 new items per questionnaire)
• Elicit parent concerns that may point to autism and early communication issues
• Focus on “red flags” related to reciprocity, smiling, eye contact
  • *Does your child try to show you things by pointing at them and looking back at you?*
  • *When you smile at your baby, does he smile back?*
• If parents have concerns about autism, you can start with ASQ:SE-2™
Updated Cutoff Scores

• New standardization study—14,074 children
• Total number of completed questionnaires—16,424
• Sample mirrors the U.S. population in terms of race/ethnicity and includes all socio-economic groups
• All new cutoff scores
Technical Data

• Reliability
  – Test-retest: .89 (excellent)
  – Internal consistency: .84 (excellent)

• Validity
  – Investigated with more than 2,800 children
  – .83 (excellent)

• Sensitivity
  – .81 (excellent)

• Specificity
  – .83 (excellent)
Andrew is almost 2 years old and lives with his mother, father and 6-month-old brother. Andrew attends a center-based child care program 5 mornings a week, and is at home with his baby brother and grandmother in the afternoons. His mother is a student at the university and his father works full-time. His mother was home with him full-time until 3 months ago, when she started attending a community college.
Andrew enjoys playing with cars and balls. He is very active and is climbing on furniture and getting into everything out of curiosity. At the child care center Andrew has difficulty separating from his mother and sometimes cries for long periods of time. He is also slow to warm up and join in activities.
Features: Flexibility in ASQ:SE-2™ Administration

Method(s)
- mail-out, home visit, interview, online, clinic

Setting(s)
- Child care/school setting, doctor’s office, home, child welfare, EI/ECSE

Intervals
- all or selected intervals

Andrew’s mother received her ASQ:SE-2™ from the Child Care center as part of their universal screening efforts.
# 24 Month QUESTIONNAIRE

21 months 0 days through 26 months 30 days

Questions about behaviors children may have are listed on the following pages. Please read each question carefully and check the box [✓] that best describes your child’s behavior. Also, check the circle [✓] if the behavior is a concern.

## Important Points to Remember:

- Answer questions based on what you know about your child’s behavior.
- Answer questions based on your child’s usual behavior, not behavior when your child is sick, very tired, or hungry.
- Caregivers who know the child well and spend more than 15–20 hours per week with the child should complete ASQ:SE-2.

<table>
<thead>
<tr>
<th></th>
<th>OFTEN OR ALWAYS</th>
<th>SOMETIMES</th>
<th>RARELY OR NEVER</th>
<th>CHECK IF THIS IS A CONCERN</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does your child look at you when you talk to him?</td>
<td>[✓] z</td>
<td>[ ] v</td>
<td>[ ] x</td>
<td>[ ] v</td>
</tr>
<tr>
<td>2. Does your child seem too friendly with strangers?</td>
<td>[ ] x</td>
<td>[ ] v</td>
<td>[✓] z</td>
<td>[ ] v</td>
</tr>
<tr>
<td>3. Does your child laugh or smile when you play with her?</td>
<td>[✓] z</td>
<td>[ ] v</td>
<td>[ ] x</td>
<td>[ ] v</td>
</tr>
</tbody>
</table>
Low scores (0) indicate competent behaviors and high scores (10) indicate problem behaviors. Concerns weight an item with extra 5 points.

- **Scoring Options**
  - Often or Always: 0 or 10
  - Sometimes: 5
  - Rarely or Never: 10 or 0
  - Is this a concern? Yes = 5

- High scores falling above empirically-derived cutoff points are indicative of problems.
Review Andrew’s ASQ:SE-2™
Glance at items marked:

- **Z- value 0;** indicating competent behaviors.
- **X- value 10,** indicating problem behaviors.
- **V- value 5,** indicating potential concerns that need to be explored.
- **Concern- value 5,** indicating the caregiver has concerns.
COMPETENT BEHAVIORS

- Joint attention
- Healthy stranger anxiety
- Happy, interactive, friendly, cuddly, affectionate.
- Points to and shows Interest in people, other children, toys and events.
- Enjoys meal time, book time and music.

PROBLEM BEHAVIORS and CONCERNS

- Separation anxiety
- Frequent, intense upsets
- Difficulty soothing and calming
- Hyperactive. Doesn’t listen or show caution when moving fast.
- Disturbed, interrupted sleep patterns
- No words to express state
- Elimination irregularities
- Aggression
- Several caregivers feel stress with his behaviors.
Guides staff step-by-step, from score interpretation through follow-up decision-making:

- Clear page-by-page scoring table and total score box
- New scoring graphic and visual interpretation of results
- Area to record concerns
- Area to review referral considerations
- Area to record follow-up actions
Monitoring Zone

- Added to help with score interpretation and follow-up decision-making
- Is similar to monitoring zone in ASQ-3™
- Includes scores close to the cutoff

2. ASQ:SE-2 SCORE INTERPRETATION: Review the approximate location of the child’s total score on the scoring graphic. Then, check off the area for the score results below.

- The child’s total score is in the □ area. It is below the cutoff. Social-emotional development appears to be on schedule.
- The child’s total score is in the □ area. It is close to the cutoff. Review behaviors of concern and monitor.
- The child’s total score is in the □ area. It is above the cutoff. Further assessment with a professional may be needed.
24 Month Information Summary 21 months 0 days through 26 months 30 days

Child's name: Andrew

Date ASQ:SE-2 completed: ____________________________

Child's ID #: ____________________________

Child's date of birth: ____________________________

Person who completed ASQ:SE-2: Mother

Child's age in months and days: 22 mos

Administering program/provider: childcare Center

Child's gender: ☑ Male  ☐ Female

1. ASQ:SE-2 SCORING CHART:
   - Score items (Z = 0, V = 5, X = 10, Concern = 5).
   - Transfer the page totals and add them for the total score.
   - Record the child's total score next to the cutoff.

   | TOTAL POINTS ON PAGE 1 | 10 | 10 |
   | TOTAL POINTS ON PAGE 2 | 30 | 30 |
   | TOTAL POINTS ON PAGE 3 | 30 | 30 |
   | TOTAL POINTS ON PAGE 4 | 30 | 30 |
   | Total score | 125 | 65 |

   Cutoff | Total score
   65 | 125

2. ASQ:SE-2 SCORE INTERPRETATION: Review the approximate location of the child's total score on the scoring graphic. Then, check off the area for the score results below.

   - The child's total score is in the area. It is below the cutoff. Social-emotional development appears to be on schedule.
   - The child's total score is in the area. It is close to the cutoff. Review behaviors of concern and monitor.
   - The child's total score is in the area. It is above the cutoff. Further assessment with a professional may be needed.

3. OVERALL RESPONSES AND CONCERNS: Record responses and transfer parent/caregiver comments. YES responses require follow-up.

   1-31. Any Concerns marked on scored items? ☑ Yes  ☐ No

   Comments: extreme upsets, hard to calm

   32. Eating/sleeping concerns? ☑ Yes  ☐ No

   Comments: fights sleep, wakeful

   33. Other worries? ☑ Yes  ☐ No

   Comments: hyper, more tantrums, separation anxiety


   ❒ Setting/time factors (e.g., is the child's behavior the same at home as at school?)

   ❒ Developmental factors (e.g., Is the child's behavior related to a developmental stage or delay?)

   ❒ Health factors (e.g., Is the child's behavior related to health or biological factors?)

   ❒ Family/cultural factors (e.g., Is the child's behavior acceptable given the child's cultural or family context? Have there been any stressful events in the child's life recently? Home new school, new baby, daycare)

   ❒ Parent concerns (e.g., Did the parent/caregiver express any concerns about the child's behavior?)

5. FOLLOW-UP ACTION: Check all that apply.

   ❒ Provide activities and rescreen in 6 months.

   ❒ Share results with primary health care provider.

   ❒ Provide parent education materials.

   ❒ Provide information about available parenting classes or support groups.

   ❒ Have another caregiver complete ASQ:SE-2. List caregiver here (e.g., grandparent, teacher). child care provider teacher

   ❒ Administer developmental screening (e.g., ASQ-3).

   ❒ Refer to early intervention/early childhood special education.

   ❒ Refer for social-emotional, behavioral, or mental health evaluation.

   ❒ Other: complete steering to identify goals
Andrew’s ASQ:SE-2™ was well above the cut-off, confirming caregivers’ concerns and stress levels coping with his behaviors. After reviewing the screening, The child care provider suggested completing a SEAM™ to help the “team” target social emotional goals and skills to work on together.
What is the SEAM™?

- Social-Emotional Assessment/Evaluation Measure
- Curriculum-based assessment tool designed to be completed by parents/caregivers
What is the SEAM™?

Assists in the development of functional goals in order to:

- Identify “competence” skills and goals that child needs support in developing and strengthening
- Plan interventions to foster positive social emotional development
- Evaluate child progress
SEAM™ system Includes:

- **SEAM™ Infant, Toddler, & Preschool intervals**
- **SEAM™ with Ages** (for professionals such as home visitors)
- **SEAM™ Family Profile**
  - Assesses parent and caregiver strengths
  - Helps identify areas where more supports and resources might be needed to assist parents in fostering their child's social-emotional skills.
- **SEAM™ User’s Guide**
- **Environmental Screening Questionnaire**
  - Assists in gathering information regarding risk factors
Features of the SEAM™

- Completed independently by caregiver or together with guidance and support from professional

- 3 Age Intervals:
  - Infants (2-18 months)
  - Toddlers (18-36 months)
  - Preschools (36-66 months)

- 10 Benchmarks included in each interval
  - 3-8 items per benchmark
SEAM™ Toddler Benchmarks

1. Participates in healthy interactions (4)
2. Expresses a range of emotions (4)
3. Regulates social-emotional responses (3)
4. Begins to show empathy for others (3)
5. Shares attention and engages with others (5)
6. Demonstrates independence (3)
7. Displays a positive self-image (3)
8. Regulates attention and activity level (4)
9. Cooperates with daily routines and requests (2)
10. Shows a range of adaptive skills (4)
### Benchmarks

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Toddler participates in healthy interactions.</td>
<td>(4)</td>
</tr>
<tr>
<td>2.</td>
<td>Toddler expresses a range of emotions.</td>
<td>(4)</td>
</tr>
<tr>
<td>3.</td>
<td>Toddler regulates his social emotional responses.</td>
<td>(3)</td>
</tr>
<tr>
<td>4.</td>
<td>Toddler begins to show empathy for others.</td>
<td>(3)</td>
</tr>
<tr>
<td>5.</td>
<td>Toddler shares attention and engages with others.</td>
<td>(5)</td>
</tr>
</tbody>
</table>
SEAM Response Options:

4 options for rating children’s behavior:

- Very True (Consistently or most of the time)
- Somewhat True (Sometimes, though not consistently)
- Rarely True (Only once in a while)
- Not True (Doesn’t yet show skill)

- Items include examples of what behaviors might look like.
- Parents answer based on their personal experiences and what they know about their child
- Parents can indicate if an item is a concern or if they would like item to become a focus area
Using SEAM™ Results

- Items are all competence skills (i.e., skills we want children to learn or develop).
- Can promote conversations with parents focused on social-emotional development.
- “Non-judgmental” assessment: Items can be scored but results are not intended to compare or identify children.
- Results can be used to identify goals and organize intervention efforts.
- Scores can be used to evaluate child’s progress toward goals.
## Sample SEAM™ Assessment Item

<table>
<thead>
<tr>
<th>C-3.0 Toddler regulates own social-emotional responses</th>
<th>Very True</th>
<th>Somewhat True</th>
<th>Rarely True</th>
<th>Not True</th>
<th>Concern</th>
<th>Focus Area</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>3.1. Toddler responds to soothing when upset</strong></td>
<td>![square]</td>
<td>![X]</td>
<td>![square]</td>
<td>![square]</td>
<td>![circle]</td>
<td>![triangle]</td>
</tr>
<tr>
<td><em>Some examples might be:</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Stops crying when picked up and comforted.</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Resumes playing after being hugged and kissed by caregiver when upset</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3.2 Toddler can settle self down after periods of exciting activity</strong></td>
<td>![square]</td>
<td>![square]</td>
<td>![X]</td>
<td>![square]</td>
<td>![X]</td>
<td>![triangle]</td>
</tr>
</tbody>
</table>
### SEAM™ With Ages And Examples Of Behaviors

#### C-4.0 TODDLER BEGINS TO SHOW EMPATHY FOR OTHERS

<table>
<thead>
<tr>
<th></th>
<th>Toddler matches response to others’ emotional responses.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24</td>
<td>Some examples might be</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24</td>
<td>Quiets when you are upset</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24</td>
<td>Laughs and smiles when others do so</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Toddler tries to comfort others when they are upset.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24</td>
<td>Some examples might be</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–24</td>
<td>Gives crying baby a hug, leads you to soothe an upset infant</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24–36</td>
<td>Kisses your “owie” if you hurt yourself</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24–36</td>
<td>Hugs you if you are sad</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Toddler uses words to talk about another child’s emotions.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–36</td>
<td>Some examples might be</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18–36</td>
<td>Says, “Baby cry, sad” when hearing a baby crying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24–30</td>
<td>Returns toy to stop crying of another child, saying, “Here toy”</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24–36</td>
<td>Says, “That boy is mad” about a child who is screaming</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30–36</td>
<td>Describes a peer’s feelings when watching him cry after being dropped off at child care: “He’s sad because his mom is gone”</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Review Andrew’s SEAM™
And Glance at items marked:

- Very True, indicating a skill or strength.
- Somewhat True and Rarely True, indicating emerging skills and potential goals.
- Rarely True and Not True, indicating a lack of skills and potential goals.
- Concern, indicating the caregiver has concerns
- Focus Area, indicating the caregiver want to focus on this skill
Summarize Andrew’s strengths:

- Curious, active and enjoys playing.
- Affectionate. Talks and plays with others.
- Happy; he smiles and laughs.
- Likes attention from his family and engages in activities with them.
- Feels good about himself and his accomplishments.
- Looks at books and listens to stories that are read to him and likes to sing and dance.
- Eats a variety of foods.
- Cooperates with requests.
Summarize skills Andrew has not yet mastered, concerns, and focus areas:

- Identify emotions of self and others.
- Respond to soothing when upset
- Settle down after periods of exciting activity
- Calm self when upset
- Separate from parent in familiar environment with minimal distress
- Transition from one activity to another without problems
- Accept changes in routines and settings
- Fall asleep and remain asleep with few problems
- Show interest in toilet
Together as a team, identify priority goals:

- When upset, Andrew will calm himself with adult support.

- Andrew will transition between home and daycare and activities in each setting, cooperatively.

- Andrew will easily separate from parent in familiar environment with trusting adults.

- Andrew will carry out a predictable night time routine, fall asleep and remain asleep for 8-10 hours.
Include all caregivers in plan and consider:

- **Build Relationships** *(teachers, children, parents)* 1:1 Special time, follow child’s lead, > positive praise, facilitate pro-social peer interactions. Complete the **Family Profile** as a guide to assess where caregivers’ need support!

- Identify child’s **Interests**, build on **Strengths** and existing skills

- Arrange Environment. **Adapt/Modify** *(visual/auditory cues, room re-arrangement, schedules, sensory opportunities, break spaces)*.

- **Teach** social skills with social-emotional curriculum *(e.g. self-regulation skills, peer interaction skills, literacy)*

- **Refer parents** to EI program, home visiting program, health practitioners, therapists, parenting class; parent support group;

- **Provide resources** to parents *(internet resources, handouts)*.
Assessment items address knowledge, skills and resources that caregivers need to foster social-emotional development in children.

Assessment identifies areas where caregivers/parents need support and resources in order to provide a safe and responsive environment for their children.
### Parent/Caregiver Benchmarks

<table>
<thead>
<tr>
<th>Benchmarks</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>Responding to my child’s needs.</td>
</tr>
<tr>
<td>2.0</td>
<td>Providing appropriate type and level of activities.</td>
</tr>
<tr>
<td>3.0</td>
<td>Providing predictable schedules/routines.</td>
</tr>
<tr>
<td>4.0</td>
<td>Providing a safe home and play environment.</td>
</tr>
</tbody>
</table>
### Sample SEAM Family Profile Item

#### Toddler (for developmental range 18-36 months)

<table>
<thead>
<tr>
<th>F-1.0 Responding to my child’s needs.</th>
<th>Most of the time</th>
<th>Sometimes</th>
<th>Not Yet</th>
<th>Not sure/Need more info</th>
<th>Focus Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.4 I use positive comments and language with my child.</td>
<td>![Marker]</td>
<td>![X]</td>
<td>![Marker]</td>
<td>![Marker]</td>
<td>![X]</td>
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<tr>
<td>• For example:</td>
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<td>– I comment on how gentle my child is being when he is petting the cat.</td>
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</table>
Access Materials:

– Children’s Literature

– Individualized social stories

– Puppets & Persona Dolls

– Simple early childhood games that teach turn taking

– Visuals (routine schedules, labels, choices, jobs, solution cards, etc.)
Plan Environment:

– Environmental evaluation, adjustment, rearrangement
– Visuals and places...to stand on, sit on, wait at, look at
– Designated quiet space or “break” space
– Hands-on curriculum
– Sensory opportunities
Build Relationships

- Positive attention and reinforcement
- Positively stated requests, commands, directions. “walking feet”, “quiet voice”
- Special time/featured child days
- Jobs
- Integrate child/family photos
- Home visits
- Parent conferences
- Invite parent to lunch day
- Communication home (e.g., simple notes, newsletter, information or articles)
Teach social skills:

– Create developmentally appropriate rules (or behavioral expectations) for staff and children.

  • Review rules (positively stated and visually posted)
  • Teach the skills needed to follow the rules!
  • Consistently reinforce children when they get it right!

– Teach emotions; allow for emotion check ins.

– Teach problem solving sequences at age level.
Social Emotional Resources for Parent and Teachers

- Center on the Social and Emotional Foundations for Early Learning (CSEFEL) (csefel.vanderbilt.edu)
- The Incredible Years (incredibleyears.com)
- SEAM Curriculum (in progress)
Re-administer SEAM™ at periodic intervals to measure progress on goals!
# SEAM Toddler Summary Form

**Social-Emotional Assessment/ Evaluation Measure**  
*Research Edition*

**For developmental range 18–36 months**

## Benchmark C-1.0

<table>
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<th>Item</th>
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<tbody>
<tr>
<td>1.1</td>
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<td>1.2</td>
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<td>1.3</td>
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<td>1.4</td>
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<table>
<thead>
<tr>
<th>Admin date:</th>
<th>Strength</th>
<th>Concern/continue monitoring</th>
<th>Focus area</th>
<th>Numerical score (optional)</th>
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• At Tier 1 level: ASQ:SE-2™ & SEAM™ Promotes conversations with parents and increases awareness of social emotional development.

• At Tier 2 level: ASQ:SE-2™ and SEAM™ Assists in identifying children:
  – Who may benefit from targeted, systematic approaches to teaching (SEAM™ @ Tier 2).
  – Who may need referral for further evaluation.

• Re-administer ASQ:SE-2™ periodically to monitor SE well being.

• Re-administer SEAM™ to evaluate child progress on goals.
Brookes On Location offers on-site seminars on ASQ-3, ASQ:SE-2, and SEAM

- Introductory
- Comprehensive
- Training of Trainers (TOT)
- Introduction to ASQ:SE-2 & SEAM

- ASQ Training of Trainers Institutes – dates for 2016 to be announced soon

To learn more, visit http://www.brookesonlocation.com