Home Visits and PEDS for Project Launch

Parenting is not easy; it is multi-faceted, to say the least. Early intervention home visits where professionals enter the home or other places where learning is naturally occurring between parents and young children are essential to helping parents develop skills that will enhance the learning that is already taking place. Once at-risk children have been identified, home visiting programs step in to improve the likelihood that these children will have a better chance at success in early school programs, and parents will become more confident in their parenting abilities.

Home visits often include testing for developmental and social/emotional delays and mental health. Measurement should be as brief but also as comprehensive as possible so that home visitors can spend more time helping than assessing. There are several tools available for surveillance and testing, however, they should be chosen carefully, considering cultural sensitivities, including the language spoken in the home, age of the child, and literacy of the parents. PEDS (Parents’ Evaluation of Developmental Status) is one tool that is brief but accurate, available in many languages, and tests children from birth to 8-years of age ([www.pedstest.com](http://www.pedstest.com) ). PEDS is both an evidence-based surveillance tool and a screening test; it is also a tool for managing a wide range of developmental, behavioral and family issues. With ten short questions to parents, PEDS helps professionals identify children at risk for school problems and those with undetected developmental and behavioral disabilities. It is written at about a third-grade level so it is easy to read or to use by interview, including over the phone, if necessary. Parents answer questions about their child’s development, either in written form or dictated to the facilitator.

A follow-up tool, PEDS: Developmental Milestones is brief (only 6-8 questions) yet picks up more evidence-based specifics on any delays that the PEDS test may have identified(<http://www.pedstest.com/AboutOurTools/LearnAboutPEDSDM/IntroductiontoPEDSDM.aspx> ). The PEDS: DM contains positive parenting activities in the form of read aloud stories about age-appropriate parent-child interactions (like sound and word play) and problem-solving (e.g., dealing with tantrums, refusals, sibling rivalry) and is colorful and attractive to children and parents. It does not require a materials kit, although paper and markers are helpful.

The critical aspects of measurement are: a) knowing what parents are worried about (PEDS is a powerful parent engagement tool since it captures what parents want to know); and b) measuring children’s skills across all developmental areas including social-emotional/mental health. The PEDS: DM does this in only 6 to 8 questions! PEDS: DM and the MCHAT-R are within PEDS Online, and create a data base for monitoring progress and program evaluation. There is also a link to a trial test. In case the internet is not available at home visits, there is also a print response form and PEDS Online works on smart phones or a tablet that can be accessed without a Wi-Fi connection. . There is a case study available to understand more thoroughly how PEDS can help: <http://www.pedstest.com/SeeTheTest/CaseStudies/tabid/132/articleType/ArticleView/articleId/136/StephenUsing-Parents-Evaluation-of-Developmental-Status-PEDS-and-PEDS-Developmental-Milestones-PEDSDM-A-Case-Study-of-a-30-month-old-Child.aspx>.

Research has shown that early intervention greatly increases the likelihood of graduating from high school, of living independently, avoiding teen pregnancy, holding a job, etc. The absence of early intervention contributes to the fact that 1 in 3 children have either disabilities or substantial school difficulties; 18% drop out of high school. Home visits are a step in realizing the potential of children who are living in at-risk homes and/or communities.