

Developmental Screening of Preschool Children Ages 3 Through 5 Years Old



The Colorado Department of Education (CDE), as the state education agency responsible for implementing Part B of IDEA, is required to ensure children suspected of having a disability are located, identified and evaluated for special education services. At the local level, Special Education Administrative Units (AUs) are expected to support community screening efforts and conduct developmental screening in order to identify all children who may have a qualifying disability and need special education. This document is intended to support general screening practices in community and general education settings, as well as for Special Education Administrative Units as a means to timely identifying and locating all children potentially eligible for IDEA services.

Screening

To support all children in learning and to fulfill each child's potential, CDE recognizes that early identification of developmental delays or disabilities is critical. "A developmental screening is a formal way of gauging how a child is developing. It may be a questionnaire or checklist for a parent or caregiver to complete, or it may be a list of tasks the child is asked to do. A developmental screening is a first step: it is used to identify whether further evaluation is needed" (Macy, 2022, p.1 [NAEYC](#)). Children who need special education who are not identified as soon as possible may lose valuable specially designed instruction and services. Screening and referral practices are important ways to ensure timely identification of a delay or disability. This guidance document is arranged in three sections and will discuss:

[Guidance on General Screening Practices](#)

[Screening in Community and General Education Settings](#)

[Individualized Screening by Special Education Administrative Units](#)

Guidance on General Screening Practices

Family Involvement

Screening practices should be sensitive to the family's needs and engage them during the screening process. Be flexible on scheduling, have appropriate, culturally unbiased tools and/or procedures and allow families to participate as they feel able. Families will engage with a process they understand. The Council for Exceptional Children's Division for Early Childhood recommends that "practitioners build trusting and respectful partnerships with the family through interactions that are sensitive and responsive to cultural, linguistic, and socio-economic diversity" ([DEC Recommended Practices In Early Intervention/Early Childhood Special Education 2014. p 10](#)).

Screening Tools

CDE does not specify which screening tools to use, however screening instruments must be valid and reliable. CDE does not endorse the use of homegrown tools that are created by individual school districts or programs. Appropriate screening instruments are those that accurately identify children who should receive more in-depth assessment. Screening instruments should be relatively quick to administer, review all areas of development including motor, cognitive, social and emotional, communication, self-help, vision and hearing, involve the family's perspective and be linguistically and culturally reliable and valid. Developmental screening



tools should identify potential vision and hearing concerns as a part of the review of the child's physical development. When using a tool that is not normed on the population for which it is being used (e.g. culture, primary language) the results cannot be considered valid. Incorporating a robust family report and/or a cultural liaison/interpreter during the screening process may help in appropriate interpretation of screening results on populations for which there are not presently valid and reliable tools. Cultural liaisons and interpreters should have appropriate training on participation in the screening process. Over referral and under referral should be considered when choosing screening instruments. For more information on valid and reliable screening tools, please see the [Early Childhood Developmental Screening: A Compendium of Measures for Children Ages Birth to Five](#).

A screening program should always include gathering relevant additional information about the child to ensure that the results accurately represent the child's present level of learning and development. If those who know the child best have information that conflicts with the screening results, professional judgment must guide next steps. Next steps may include proceeding to a special education referral or evaluation, additional screening in the area of concern raised and/or ongoing observation by members of the family and program staff.

The Professionals Who Conduct Developmental Screening

Developmental screening should be conducted by professionals trained to use the tool(s) they are administering. Manuals for each standardized screening tool describe the types of professionals and the education or expertise needed to administer the tools. Additionally, organizations, including Head Start, public and private preschool programs or other early learning entities sponsoring screening activities should ensure the cultural competence of staff in relation to populations screened and staff must be aware of and work against any of their own implicit or explicit biases.

Results of Developmental Screening

As outlined in [A Joint Position Statement of the National Association for the Education of Young Children \(NAEYC\) and the National Association of Early Childhood Specialists in State Departments of Education \(NAECS/SDE\) \(2003.p.3\)](#): "Screening is always linked to follow-up. When a screening or other assessment identifies concerns, appropriate follow-up, referral, or other intervention is used. Diagnosis or labeling is never the result of a brief screening or one-time assessment." Those administering screenings are expected to share screening results with the family at the time the screening is completed. For students screened within the early childhood program, results would be shared with the family as close to the screening completion as possible. At the conclusion of the screening process, families are provided with information to assist them in understanding next steps, including [referral for special education](#), when warranted.

Developmental Screening in Community and General Education Settings

Caregivers, including parents, teachers or other early learning program staff, are in the best position to monitor children's progress towards achieving expected developmental milestones. All young children should have developmental screening using a formal, validated screening tool at certain intervals across their early years. The National Association for the Education of Young Children (NAEYC) guidelines for developmentally appropriate assessment practice recommends that early learning programs conduct screening of all young children to identify those who have special learning or developmental needs, as well as to plan appropriate curriculum and instruction. This type of screening is typically implemented with whole groups of children across a program and can be considered a general education responsibility as it is completed for each child in a classroom. The [Early Childhood Developmental Screening: A Compendium of Measures for Children Ages Birth to Five](#) suggests "Early, frequent screening of young children for healthy growth and development is



recommended to help identify potential problems or areas needing further evaluation”(OPRE Report 2014-11, p. 1). Developmental screening approaches used across communities may include in-classroom screenings, parent-administered questionnaires and community-based screening events.

The Centers for Disease Control and Prevention states that developmental screening may be done by a doctor or nurse, but also by other professionals in healthcare, early childhood educators, community organizations serving young children and their families (such as home visiting programs) or personnel working in public school settings.

Entities in each community serving young children and their families have an important role and opportunity to assist in screening and referral of children who may need further evaluation and specialized services. Child find activities are meant to be coordinated across the broader early childhood system in each community. These partners may include local early childhood councils, Head Start programs, non-profit early childhood organizations, primary care physicians, Public Health, families and other early childhood organizations.

Screening Results and Next Steps

All entities performing developmental screenings should have a procedure for outcomes which includes making appropriate referrals based on the child’s screening results, the family’s concerns and available resources. According to the individual circumstances, appropriate referrals may include behavioral health, home visitation programs, primary care providers or universal preschool, or to Child Find for further evaluation, as described below.

When results from developmental screening administered in the community or general education settings indicate significantly lower than expected levels of development, a referral should be made to [Child Find](#) to determine whether an evaluation for special education services is warranted. An evaluation for special education services will help answer the question of whether specially designed instruction is needed for the child to receive benefit from the general preschool curriculum. When an educational disability is not suspected and developmental screening results indicate a mild delay or difference, the family should be given information related to appropriate supportive community resources. When screening results indicate no developmental delays or concerns, the screening professional should address any other family concerns or referrals that may be warranted. It may be appropriate to rescreen a child at a later date.

Individualized Screening by Special Education Administrative Units

The remainder of this guidance focuses on screening activities that occur within the Special Education system by Special Education Administrative Unit (AU) personnel. Colorado’s Exceptional Children’s Educational Act defines the responsibilities of Administrative Units for children suspected of having a disability and refers to these responsibilities as the Special Education Referral Process. These responsibilities begin as soon as a person representing the AU suspects that the child may have a disability.

Screening performed by an AU for an individual child may be completed prior to or following the initiation of the “Special Education Referral Process”. The remainder of this document will define and distinguish between:

- Individualized screening by the AU **prior to the initiation of the Special Education Referral Process** because of concerns of a referring party when the AU does not have enough information to suspect an educational disability
- Individualized screening conducted **after initiation of the Special Education Referral Process as a part of the initial evaluation**



Individualized screening by the AU *prior to the initiation of the Special Education Referral Process*

At times it may be necessary to screen children referred to Child Find to inform the decision of whether the Special Education Referral Process should be initiated. Screening may be useful when a referral contains inadequate information to reasonably suspect a disability. An appropriate screening can assist special education personnel in determining whether a disability is suspected.

In this situation, parent consent for screening occurs prior to the IDEA consent for evaluation requirements. AU policies and procedures indicate how screening consent processes occur. CDE suggests that the screening activities be described to the family and the parent be asked to consent in writing.

It is important to remember that when, at any point in the process, special education personnel determine that more in-depth evaluation is warranted, the special education referral process must be initiated.

Individualized Screening *after* initiation of the Special Education Referral Process as a part of the initial evaluation

Individualized screening may be used as part of the special education initial evaluation process to ensure that the evaluation is sufficiently comprehensive. For example, if screening and family input indicate no delays or concerns in physical motor development, the screening result confirms that no further evaluation in that domain is warranted. When a disability is suspected and a review of existing data collected (previous screening results, referral and intake) suggests more information may be needed, screening activities could be included in the initial evaluation. For example, screening of vision and hearing can be completed as a part of the initial special education evaluation. Individualized screening, when occurring after initiation of the Special Education Referral Process, is subject to the initial evaluation timelines. In this circumstance, data obtained from screening adds to the body of evidence as part of a comprehensive evaluation and assists in addressing all, including ruling out, areas of suspected disability.

As required in IDEA and explained in CDE's [IEP Procedural Guidance](#) once a disability is suspected the Special Education Referral Process must be initiated and the family must be provided with a copy of [A Guide to Parent's Rights in Special Education: Special Education Procedural Safeguards Notice](#). The [Prior Written Notice and Consent for Evaluation](#) form notifies the parent regarding the decision to seek further evaluation. Screening activities included as a part of the broader special education evaluation should be described on the IDEA Part B prior written notice, and parent consent must be obtained. A parent's informed consent must be obtained before an evaluation can be conducted. The Office of Special Education Programs makes it clear that parent consent for evaluation should be requested once the AU suspects the child to be a child with a disability. In their [Analysis of Comments and Changes to the Final Rules and Regulations for IDEA 2004](#), the document outlines that it would not be acceptable to delay seeking consent once the AU suspects the child to be a child with a disability.

Conclusion

Developmental screening is a critical activity for early identification of developmental delays or disabilities. When planning and conducting developmental screenings within a community, general education setting or the special education referral process, a system of follow-up that includes responsiveness to family concerns, as well as the outcome of the screening, is vital.

The references and resources listed below may be useful in implementing screening systems in your program and community.

With questions or for more information, contact [Melissa Taucher, Child Find Specialist](#).



Additional Screening Resources:

Centers for Disease Control and Prevention: [Developmental Monitoring and Screening \(2024\)](#)

This site contains information related to developmental monitoring as well as family friendly brief checklists of milestones by age. CDC's "Milestone Tracker App" is also linked which is described as convenient way to "Track your child's milestones from age 2 months to 5 years with CDC's easy-to-use illustrated checklists; get tips from CDC for encouraging your child's development; and find out what to do if you are ever concerned about how your child is developing.

[Assuring Better Child Health and Development](#)

This website offers information about the projects and goals of this Colorado non-profit, referred to as "ABCD" which describes its mission as: "ABCD partners with and builds connections across healthcare, community agencies, and early childhood systems to expand best practices."

Colorado Department of Education's webpage: [Early Childhood Special Education Resources and Guidance](#)

This website contains updates, technical assistance and guidance documents, policy statements, FAQs and links to other resources related to Child Find and Early Childhood Special Education.

[Guidelines for Identifying Preschool Children for Special Education: Part B Child Find for Children Ages Three through Five Years Old \(2022\)](#)

As noted in its introduction: "This guidance document describes the components of Colorado's Child Identification System and Effectiveness Indicators for Special Education Administrative Units to use in carrying out their requirements under the Individuals with Disabilities Education Act (IDEA) and the Exceptional Children's Education Act (ECEA). It contains sections on Leadership and Administration, Partnership and Collaboration, Intake and Referral, Individualized Screening, Initial Child Evaluation and Continuous Quality Improvement.

[Understanding and Choosing Assessments and Developmental Screeners for Young Children Ages 3-5: Profile of Selected Measures](#)

This compendium provides profiles of common assessment and developmental screening tools for children aged 3-5. It also includes a summary table intended to provide an overview of the different tools.

References:

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U.S. Department of Education, Office of Special Education and Rehabilitative Services. (2006, August 14). [*Assistance to States for the Education of Children With Disabilities and Preschool Grants for Children With Disabilities*](#) (34 C.F.R. Parts 300 & 301) (Final rule, Vol. 71, No. 156, pp. 46). **Federal Register.**

This CDE guidance document is meant for clarification, is not legally binding, and is not to be confused with legal advice. This guidance reflects CDE’s recommendations, but Administrative Units (AUs) may have developed their own policies or procedures that differ from those described herein. Be sure to refer to your local AU’s policies and procedures through the Director of Special Education. If you are seeking legal advice, please contact your legal counsel.

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