Children learn from the moment they are born. Their brains rapidly grow as they constantly change, process experience, interact with the environment, and develop. Children normally meet their early socio-emotional, speech and language, cognitive, and gross motor/movement developmental milestones at a certain age. Some expected milestones are normally reached as soon as early infancy. Children achieve more complex skills as they grow older and mature. Parents often have questions about whether or not their baby or child is developing normally. There has been a great deal of study regarding developmental milestones, which involves a range of ages for which certain skills develop.

The following link allows you to visit the Centers for Disease Control Developmental Milestone Checklist and see what is expected at 5 intervals before age 1 and several subsequent ages: [http://www.cdc.gov/ncbddd/actearly/milestones/index.html](http://www.cdc.gov/ncbddd/actearly/milestones/index.html). The table below presents examples of some of the milestones that are expected at specific ages.

<table>
<thead>
<tr>
<th>Age</th>
<th>Socio-emotional</th>
<th>Speech and Language</th>
<th>Cognitive</th>
<th>Gross motor and movement</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 months</td>
<td>Begins to smile</td>
<td>Coos and makes sounds</td>
<td>Pays attention to familiar faces</td>
<td>Holds their head up</td>
</tr>
<tr>
<td>1 year</td>
<td>Develops “stranger-danger”</td>
<td>Use simple gestures and try to say one-word exclamations</td>
<td>Examine objects by shaking/banging</td>
<td>Pulls themselves up to stand</td>
</tr>
<tr>
<td>3 years</td>
<td>Imitates actions</td>
<td>Converses using 2 to 3 meaningful sentences</td>
<td>Engages in imaginative pretend play</td>
<td>Walks up and down the stairs</td>
</tr>
<tr>
<td>5 years</td>
<td>Shows concerns and sympathy</td>
<td>Retells a story using complete thought/sentences</td>
<td>Knows and understands concepts such as money and food</td>
<td>Swings and climbs</td>
</tr>
</tbody>
</table>

Toddlers and preschool-aged children normally thrive and learn through their encounters with the environment. Children’s development benefits from proper nutrition, healthcare, an emotionally supportive safe and warm parenting environment, and an environment that provides opportunities for safe interactions and enrichment.

Children who suffer prenatal or perinatal complications, have genetic predispositions to learning disorders, or infants and young children exposed to trauma, neglect, or deprivation may have difficulties. Unfortunately, delays can be caused by birth trauma, or acquired traumas such as pediatric brain injury. Some of these may not become apparent until the particular skill areas are supposed to be developed or when they are stressed by demands at later ages or with school. When delays seem present, parents often worry if this is a normal delay, or something more significant.

**What is Preschool or Early Childhood Assessment?**

**Definition:** A method of examining developmental progress, acquired knowledge, and skills is through *Preschool Assessment*. Also referred to as *early childhood assessment*, it is a process of gathering, integrating, and interpreting of information, which includes developmental/medical history, neurobehavioral functions, and observations of children 3 to 5 years of age. Infants and toddlers may also be assessed using age-appropriate testing tools.
Since at any given age in preschool, some skills are in development, and some milestones reached, preschool assessment provides a snapshot of the knowledge the child is acquiring as well as evaluating whether expected milestones have been reached. Such assessments provide essential objective information regarding skills a child is able to do independently and activities the child may need assistance to accomplish. The focus of such assessments is also to identify a child’s particular strengths and weaknesses in the different domains of development. Assessments help quantify delays, strengths or weaknesses which allows for later objective assessment of progress or effectiveness of any therapeutic or other early childhood interventions.

Preschool assessment helps in early identification of toddlers and children who may be at risk for developmental delays or whom may be in need of further referrals for health assessments or other services. For example, children who are suspected of having Autism Spectrum Disorder, who have suffered anoxia or other brain injury at birth, or those who suffer other neurodevelopment disorders, or those who have medical problems which impact on neurological functioning (i.e., genetic disorder, chronic illness, epilepsy, renal disease, brain tumor, etc.) should be evaluated. Children who seem to be lagging behind their peers, or siblings at the same age, should also be assessed to allow for early identification and interventions.

Such assessments provide critical information which serves as a starting point for referrals to rule out physical or health causes for delays, provide suggestions for learning strategies and usually serve as a starting point for the establishment of developmentally appropriate instructional programs or the initiation of appropriate pediatric speech and language therapy or pediatric occupational therapy (OT). Information gathered from a comprehensive psychological preschool assessments also helps establish a baseline to monitor progress, and when coupled with follow-up testing allows for assessment of subsequent development (evaluation of growth other time), trends, and helps in providing an objective independent basis to judge the effectiveness and outcomes of implemented programs and services.

**What is School Readiness?**

Toddlers and young children are often evaluated to assess their school or kindergarten readiness. *School readiness* traditionally defined as the child’s attainment of a certain set of emotional, behavioral, and cognitive skills needed to learn, work, and function successfully in school (National Association of School Psychologists [NASP]). Different states/school districts have different rules and regulation for school readiness. For more information on Florida’s laws regarding school readiness, please visit: [http://www.flsenate.gov/Laws/statutes/2011/0411.01](http://www.flsenate.gov/Laws/statutes/2011/0411.01)

**What kind of tests do psychologist or pediatric neuropsychologists use for assessment?**

There are many different tests included in a preschool assessment battery. These may vary in terms of the breadth of skills measured, and some are designed as general batteries, while others provide more in depth assessment of a particular skill or developmental area. The number of tests or the length of evaluation is dependent of the reason for referral (please see below).

A comprehensive developmental history is an essential component of psychological, neuropsychological or preschool assessments. This includes information regarding pregnancy and delivery with child, early medical illnesses and problems, family history of medical or psychological problems, etc. This provides valuable information which may help guide the evaluation in terms or areas to look at more carefully, and what may be expected. This allows the clinician to determine if results fit a particular syndrome or are in line with what parents or teachers observe, whether there are things that may have been missed, or in some cases, whether or not it seems the testing itself may have been “off” due to a child’s “bad day,” poor or variable effort, or other factors which might impact test results. While test results are helpful at guiding interventions, there is a danger especially at young ages, that simple reliance on a test score without competent clinical assessment, can yield spurious findings and conclusions. Often, to supplement and help confirm the child’s test performance, parents and/or teachers may be asked to complete rating scales.

Assessments can vary in terms of their complexity, scope, and purpose. Often pediatric neuropsychologists will conduct more comprehensive assessments, which cover multiple areas of functioning in some depth. Pediatric neuropsychologists may also guide more thorough assessments of children with conditions they commonly assess, such as those for autism spectrum disorder, childhood brain injuries, neurodevelopmental disorders, and for children who have medical conditions which impact on neurodevelopment or development in any of the areas of social skills, sensory or motor skills, language, attention, memory, cognitive skills, or emotional functioning.

Full version of the article was originally published in the Summer 2014 Edition of Clinical Psychology E-Magazine, and in the articles and archives section of [www.cpancf.com](http://www.cpancf.com)