

Explaining the Results of a “Failed” Screen

Some clinicians are understandably reluctant to inform parents of screening test results. However, as noted elsewhere in this newsletter, keep in mind that when screens relying on collaborative information from parents are used, the parents will be interested in the results. This makes the process of delivering difficult news easier than you might fear. Here are some guidelines on what to say:

- Prior to administering a screening tool, have a member of your staff **explain** to the parent **why they are being asked to complete the questionnaire**. This should help ensure that parents understand what is happening and better prepare them for the results.

For example: “Here at BEST PRACTICES PEDIATRICS, we feel it’s important to monitor each child’s developmental progress, and your input is a valuable part of this process. So, we would like for you to complete this brief developmental questionnaire about Mary’s skills as you see them. There also is space to let us know about any questions or concerns you might have about Mary’s development or behavior. If you have any questions about any of the items, please don’t hesitate to ask. After you finish, please give us the form, and I’ll make sure that Dr. Jones reviews it before she meets with you.”

- **Remember the purpose of screening**, ie, screening does not diagnose developmental disorders. As per the policy statement on early detection, positive (ie, abnormal) results of screening should yield (a) referral for early intervention services (even if a diagnosis is not yet identified) and (b) further medical/diagnostic evaluation (eg, through consulting subspecialty services or evaluation teams). This is also important for parents to understand.
- **Use language consistent with the child’s need for more comprehensive assessment**. Phrases like the following can be used: “*may be delayed,*” “*this suggests...*,” “*this may indicate...*,” “*may be having difficulties compared to other children his age,*” “*may be behind other kids,*” “*seems to be learning more slowly,*” “*could be having difficulty learning.*” These are effective terms but not devastating ones. They encourage families to seek additional evaluation without causing paralytic fear often associated with terms like “disabilities” or “handicaps.” If the parent specifically asks about a particular disability, you can acknowledge that possibility, but then emphasize that the main goal of the screening is to identify children at risk, regardless of the cause. This identification could lead to early intervention, which evidence shows is clearly beneficial. Other diagnostic work-ups may also be indicated, depending on the parents’ and your levels of concern.
- **Provide telephone numbers and descriptions of services**. It is likely that families who have the necessary information to follow through are better able to do so. Descriptions of programs may enable families to visualize participation and increase the chance they actually will.
- **Offer ongoing support**. Parents may be faced with family members who have minimal investment in your recommendations for further evaluations and services. This may be the result of observing the problem but rationalizing its meaning, (eg, “*his dad was just like that as a boy and he’s doing fine now*” or “*It’s just a phase, she’ll grow out of it*”). You may want to:
 - Alert the accompanying parent to anticipate possible resistance (in themselves and significant others) and, acknowledge their fears or likely bouts of wishful thinking (eg, observing their child very carefully for signs that contradict delays)
 - Invite parents to return with dissenting family members so that you can re-explain your findings.
 - Let parents know that if they get “cold feet” and decide not to go, you want to be informed, (eg, “*It’s just as if I prescribed medicine and you decided not to give it to him, I’d want you to talk with me about it. Treat this prescription/recommendation in the same way. Don’t be afraid to talk with me if you have reservations about following through.*”)
- **Consider providing all families the names and numbers of local parent support networks**. This is particularly important for parents who are observably anxious or have numerous other life stressors. However, parents may not always reveal when they are distressed and it is probably best to have a uniform approach to offering parents on-going support.
- **If at all possible, avoid giving screening results over the telephone**. If this is not possible, alert parents that the information may be confusing and invite them to call back later if they have questions. This should reduce problematic recall and anxiety. Whether conveying results in person or over the phone, provide written information (eg, a brochure about the referral source, a copy of the referral letter you write, etc). This should help ensure that parents fully understand the results and implications.
- **Identify a social worker to help families** who are likely to have multiple barriers to following through with recommendations (eg, single parents with low incomes and multiple life stressors).
- **Provide accurate written and verbal information**. Communication about less than optimal screening test results should clearly

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indicate that screens only tell whether a child is *more likely* to have a problem and that screens, while often correct, are not perfect: Children with true difficulties may not be identified and children who are coming along normally may fail a screen. Specifically, parents who raise serious concerns but whose children perform well on additional screening should benefit from being told that your office will follow their children carefully and give them some suggestions about how to help in the interim (eg, a parent education sheet on how to stimulate children's language). In this way, you have prepared parents for the possibility that screens may over- as well as under-identify difficulties, and you will have capitalized on a "teachable moment" by giving parents guidance in how to promote their child's development.

- **Follow carefully those children who fail screens but are not found to have problems.** Most are performing below average and have many psychosocial risk factors.⁸ They need developmental promotion, but also referrals to services for children at risk, such as Head Start, quality child care, after-school tutoring, and summer programs. Their parents also may need additional training or social work services.

When children pass screening tests, **offer praise and reassurance** that learning and development appear to be coming along well. Also ask parents if there is information on child-rearing or behavior that would help them.