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**FAQ Supporting Early Childhood Special Education Programs (619) during COVID-19
School Closures**
Created April 28, 2020

All Individuals with Disabilities Education Act (IDEA) timelines remain in effect.

1. Do the IDEA requirements under Part B apply to services to preschoolers with disabilities?

Yes. Implementing Part B of IDEA and the federal regulations apply to all eligible children and youth with disabilities, ages 3 through 21 years. Although the Part B regulations rarely reference the term, preschoolers with disabilities, these regulations still apply to preschoolers served under IDEA.

Transitional Activities from Part C to Part B

2. Are there any changes to the transition Part C to Part B timelines for children transferring from our Early Intervention (EI) agencies?

The federal requirements to ensure that children transitioning from Part C to Part B have an Individualized Educational Program (IEP) in place by each child's third birthday have not been waived, and Schools should attend transition conferences and adhere to all IDEA timelines as normal. Schools should take all reasonable efforts to comply with the requirement to conduct an initial evaluation, develop an IEP for each child and may utilize alternative means for IEP team meetings, such as telephone or videoconferencing.

3. Have the IDEA requirements for preschool transition conferences been modified due to the school closure?

At this time, there is no waiver for IDEA requirements. Schools should reach out to their transition C to B partners. Schools are still required to attend these conferences and adhere to all IDEA timelines as normal. Part C agencies are offering virtual meetings, so please alert your staff to be prepared with a Review of Existing Evaluation Data (REED) and parent consent. Schools should use the Prior Written Notice (PWN) diligently during this time to lay out clearly

how school staff members will be completing evaluations in agreements with families. The School's guidance is to do all parts of the evaluations that can be done without face-to-face contact such as rating scales, review of Part C information/evaluations, and review of any medical information or parent provided evaluations. If a determination can be made or an area of eligibility is clear, schools should do so. The PWN can spell out clearly what further evaluation will be completed as soon as Stay At Home provisions are lifted and buildings are again open.

EI agencies will be holding transition conferences, and must still send the transition summary form and any evaluations and required paperwork at least 30 days in advance of transition conference so Schools can be ready to attend. These agencies are also required to document if the School attended or not.

4. What is the notification process when EI agencies and the Schools are struggling to adhere to the transition guidance timelines?

The state utilizes transition coaches for regions of the state. If the EI agency or the schools are unable to connect or reach a consensus, the protocol is to reach out to your transition coach and resolve at the local level. If this is not satisfactory and solutions cannot be resolved, the coach will reach out to the state transition lead who will contact either (New Mexico Special Education Division) SED or (Family Infant Toddlers) FIT lead for supports. All agency levels support both agencies to resolutions for smooth and effective transitions for students and families.

List of Transition Leads in your area: <http://www.cdd.unm.edu/early-childhood-programs/early-childhood-learning-network/early-childhood-transition-initiative/index.html>

5. Since FIT is currently unable to do home visits, some of the assessments may not be current. What is the guidance for Schools? Accept outdated assessment data or hold off on the transition conference until updates can be conducted?

At this time, there is no current ability to waive these IDEA requirements for Part C or Part B. FIT continues to serve children in their programs via tele-therapy. This has been an established practice in addition to home visits for many years. They continue to assess progress and will continue to provide the Transition Assessment Summary (TAS) forms and assessments to schools for transition conferences. (See also Question #21 of this FAQ.)

6. Can students who have had their third birthday continue to receive IDEA Part C services pending the completion of their transition to preschool if that transition was delayed by the school closure?

The requirements for transition from Part C to Part B has not changed, and there is no ability to continue Part C services past a child's third birthday. The FIT Program service provider agency must notify the School of children who reside in the School's educational jurisdiction and who are potentially eligible for Part B services. Schools must conduct effective program planning and support efforts for Schools to have eligibility determined and an IEP developed and implemented for eligible children by the child's third birthday.

7. During the transition conference, are Schools still required to have parents sign parent consent?

Yes, all timelines from the Transition Guidance Document remain in effect. Provide the family with Procedural Safeguards and information about how early childhood special education services might be offered during the COVID-19 crisis. During this COVID-19 national emergency, screenings and evaluations for children referred under Part C may occur through virtual means. Ensure that all Family Educational Rights and Privacy Act (FERPA) requirements are followed. First and foremost, ensure transparency with the family, gain their informed written consent, and provide PWN as required. Document all communications with the child's family.

A family may choose not to participate in an alternative evaluation or assessment, which will result in the child's evaluation being postponed until the evaluation can be conducted in person. Schools should clearly document all decisions in the PWN during the meeting and all accept and reject decisions should be documented during the meeting and reviewed with the parent prior to providing a copy to parents.

8. How should parents be contacted to discuss transition?

Adhere to guidance provided in NM Guidance: Children Transitioning from IDEA Part C to Part B. <https://webnew.ped.state.nm.us/wp-content/uploads/2019/08/NM-Guidance-Children-Transitioning-from-IDEA-Part-C-to-Part-B.pdf> The Part C Family Service Coordinator shall discuss with parents the options for inclusive settings for preschool so that the child can be with typically developing peers. The discussion should include addressing the parents' need for childcare (if they work or are in school) and how this might be arranged if the preschool is only half (1/2) day. Part C can use telephone, email, text, or mail to contact parents.

School staff are not required to participate in the meetings between FIT providers and the family members preceding the Transition Conference. Schools are encouraged to routinely communicate with FIT providers about public school programs, activities, and resources.

9. Are there any specific requirements in IDEA B for signing documents when a meeting is conducted by video conference or telephone?

The School representative secures parental consent for initial evaluation during the transition conference (Appendix E). Parents must fully understand what signing consent means and the resulting actions that will occur. Therefore, the School representative is responsible for providing and describing Part B Procedural Safeguards, assessments, and assessment methods to the parents. There are no specific requirements or methods for obtaining signatures in a video conference or telephone meeting. One recommendation would be to document the participation in the PWN. For written consents, it is recommended to obtain a scan/email, photograph, etc., of the signed written consent.

10. What requirements do we follow for evaluations?

Schools should do all parts of the evaluations that can be done without face-to-face contact such as rating scales, review of Part C information/evaluations, and review of any medical information or parent provided evaluations. If a determination can be made or an area of eligibility is clear, schools should do so. The PWN can spell out clearly what further evaluation will be completed as soon as Stay At Home provisions are lifted and buildings are again open. Early Intervention agencies are still providing services via telehealth, will be holding transition conferences, and must still send an updated transition assessment summary form, any evaluations, and required paperwork at least 30 days in advance of transition conference so Schools can be ready to attend. At the transition conference, the School should have the opportunity to triangulate data (i.e., IDA, parent input, EI team input, Release(s) of Information obtained, etc.), to discuss and explain potential alternative ways in which evaluations and assessments can be conducted for each family. Early Intervention agencies are also required to document per federal requirements if the School attended or not.

11. How do Schools gather information for the evaluations, entry and exit Early Childhood Outcomes?

When determining methods of conducting alternative evaluations, it is important to consider the effectiveness of gathering information in a virtual format. Each evaluation conducted during this time should include collection and review of a body of evidence. Consider a combination of the following:

- Interviews with caregivers;
- Team collaboration with family;
- Review of existing developmental information, including videos of the child, if available;
- Virtual observation of a play session or other routine;
- Virtual observation of EI therapy sessions with parent consent;
- Guiding parents in simple activities that can then be reviewed together;
- Direct assessments that are able to be conducted in an interview format;
- Initial evaluation and assessments of child and family must be completed following the transition guidance timeline of receiving the consent to assess; and
- Other means available to provide necessary information.

Service Requirements

12. Are Schools required to provide the special education services to students with disabilities in accordance with their IEPs?

If a School is not able to provide services to a student with a disability in accordance with the student's IEP, the IEP team must determine which services can be provided to appropriately meet the student's needs, including whether services can be provided by alternate or additional methods. This may be done through an addendum using the Prior Written Notice (PWN).

Due to the national pandemic emergency, Schools may not be able to provide all services in the same manner. Schools are allowed flexibility in determination of how these services can be provided during the school closure including by use of technology, tele-therapy, or distance instruction. Schools are encouraged to communicate with parents to address new plans for the delivery of special education and related services due to the extended school closure. Schools should not encourage parents to wait for an IEP or services until the Fall.

13. Does the 60-day timeline for initial evaluation apply during the extended school closure?

At this time, there is no waiver for the IDEA requirement. Initial evaluations must be completed within 60 calendar days of written parental consent. If the initial evaluation is not able to take place or was not fully completed due to school closure, Schools should communicate with the parents and convene a meeting (virtually and/or telephonically) to discuss: 1) whether adequate information exists to identify the student as eligible for special education and if so, schedule an EDT/IEP meeting (virtually and/or telephonically), or 2) whether additional information may be needed in order to complete the evaluation and if so, develop a plan for alternative ways in which to obtain the needed information.

14. What steps should a School take if they cannot meet required compliance indicators due to school closure?

If a school closure due to COVID-19 impacts a School's ability to meet required compliance indicators, the PED Special Education Division is requesting the following for each student impacted:

- State student identification number
- Indicator(s) impacted for each student
- Dates when actions occurred (i.e., evaluation, IEP, transition IEP, etc.)
- Additional comments if necessary to support why the School was non-compliant

The PED Special Education Division will establish a due date for the information after school resumes. At the end of the school year, Schools will be required to provide IEPs, consent for evaluation, evaluation timelines, etc., for each student and indicator that were missed. All of this information will help the PED Special Education Division to communicate with the Office of Special Education Program (OSEP) and ensure that Schools are not indicated as noncompliant due to the school closure.

Compensatory Education for Early Childhood Special Education

15. How will schools handle compensatory services?

Pursuant to the guidance from the Office for Civil Rights (OCR), if a preschool student does not receive services after an extended period of time, the student's IEP team must make an individualized determination whether and to what extent compensatory services are needed. Home instruction/services should be consistent with the student's IEP to the most appropriate extent possible. Schools should talk to parents, who are key members of the IEP team, and help

them consider how they may best ensure that students with disabilities have the necessary supports, including medical supports, in place during a public health-related school closure. Consultation with the parents should explore how students with disabilities will gain equitable access to home instruction and continue to make progress or maintain skills in developmentally appropriate activities or toward meeting their individualized IEP goals. This is a temporary situation, and schools must offer special education services to the most appropriate extent possible while students are away from their schools/programs. Once the school reopens, Schools should review all data regarding individual student progress during the period of school closure to determine whether to convene an IEP team meeting to consider compensatory services. IEP teams may need to consider compensatory services when students return to school and IEPs may need to be adjusted accordingly. The IEP team should determine the amount of compensatory special education and/or related services students with IEPs may require, on a case-by-case basis, when normal school operations resume.

Early Childhood Outcome (ECO) Entrance and Exit Ratings

16. Are ECO's entry and exit rating suspended during the time of school closures?

No, ECO requirements have not been waived. Every student in program will have data submitted two times per year. Reporting is required for all 619 preschool students aged 3-5. Students must be assessed within 30 days of commencing the program, but no later than 30 days or less from the end of the school year. Students who enroll in the program less than 30 days from the end of the school year do not require data to be entered. This will be yearly entry data and yearly progress data on every student who has been enrolled in a preschool program for at least 6 months.

17. How do schools gather information for ECOs?

IEP teams should use assessments, observations, and referral information to give a student an ECO entrance and exit rating. If it is not feasible to give a child an anchor assessment at entrance, document what materials were used to determine the ECO rating, and provide PWN as required. The IEP team will meet and use available data to complete the ECO Exit rating to reflect the student's current level of performance. This information can be student work, observations, testing completed prior to COVID-19, parent or caregiver input, etc. Document in PWN what material was used to determine the Exit rating. Please remember, all students with an IEP (even speech only students) must be assessed in all three areas.

IEP teams will need to utilize a group meeting via an online platform or phone conference for both entry and exit scores in each area - **positive social-emotional skills, acquisition and use of knowledge and skills, and the use of appropriate behaviors to meet their needs**. The School should utilize scores and present level descriptors of the ECOs in the IEP goals and objectives as there should be an alignment of data and descriptors in both documents. The team shall include the family of the student as part of the discussions of progress and scoring in an online team format. Baseline data is critical in measuring progress toward the exit assessment that gives efficient data to make essential educational decisions once normal school operations resume.

Examples:

- Interviews with caregivers;
- Team collaboration with family;
- Review of existing developmental information, including videos of the child, if available;
- Virtual observation of a play session or other routine;
- Virtual observation of EI therapy sessions with parent consent;
- Guiding parents in simple activities that can then be reviewed together;
- Direct assessments that are able to be conducted in an interview format;
- Initial evaluation and assessments of child and family must be completed following the transition guidance timeline of receiving the consent to assess; and
- Other means available to provide necessary information.

18. How do evaluation-teams transition from Part C's four eligibility categories to Part B eligibility?

Part C Eligibility Areas for the FIT Program:

- Developmental Delay
- Established Condition
- Biological/Medical Risk
- Environmental Risk

Remember that the evaluation for transitioning children must meet Part B eligibility criteria, demonstrate educational impact, and have a need for special education services. As Schools utilize the REED process to review Part C information, they look for areas of suspected disability.

Transition to Kindergarten

19. Are Schools still required to hold kindergarten transition meetings?

The process for students transitioning to kindergarten will follow the same procedures as other IEP meetings and guidance. The final IEP prior to entry to kindergarten should be the transition meeting. It is important to document all decisions made and provide PWN as required. If schools hold a non-IEP transition collaborative meeting between grade levels (preschool and kindergarten) at the end of the year, it is at the discretion of the district.

Child Find

20. Will Schools be required to conduct Child Find during this time of school closure?

These requirements of the IDEA have not been waived. Schools should continue Child Find activities, including steps to identify, locate and evaluate students as students with disabilities eligible for special education throughout the extended school closure due to COVID-19. Aligned to New Mexico Technical Evaluation and Assessment Manual (NMTEAM) guidance, Schools

can review existing information about the child, medical information, parent-provided evaluations, and obtain rating scales as well as any other assessments or tests that could be administered without being face-to-face with the student.

If a determination of eligibility can be made, Schools should convene an eligibility determination team (EDT) (virtually or telephonically) to determine if the student is eligible and is in need of specially designed instruction and if so, develop an IEP to be implemented.

If a determination of eligibility cannot be made due to the need to obtain additional information in order to complete the evaluation, Schools must develop a plan for alternative ways in which to obtain the needed information.

Hearing and Vision

21. How do we handle hearing and vision screenings and evaluations?

The New Mexico School for The Blind and Visually Impaired (NMSBVI) and the New Mexico School for the Deaf (NMSD) are providing early intervention services for students who have an established condition of vision and/or hearing diagnosis or presumptive eligibility, parent concern or Primary Care Provider (PCP) concern. Identified children are receiving services by telehealth from NMSBVI and NMSD staff currently. Evaluations of children are continuing and vision and hearing screenings may be postponed for up to 90 days per FIT standards (see FIT FAQ, Question #18 at <https://nmhealth.org/publication/view/help/5694/>). Transitions for children from Part C to Part B services cannot be delayed due to inability to screen vision or hearing. Document actions clearly in the PWN. School aged services are being provided through the required PED Continuous Learning Plans from NMSBVI and NMSD or from their respective school districts. Transition to preschool requires a diagnosis of vision or hearing loss. Students from Part C with an established condition will have a vision and hearing evaluation and diagnosis. Schools should utilize these documents. For students without an established condition, schools should complete vision and hearing screenings within 45 days of face-to-face services resuming. Initial evaluations should not be delayed due to inability to obtain a hearing and visual evaluation.

Early Intervention agencies are also required to conduct hearing and vision screenings only. Schools are required to follow through on failed hearing and vision screenings from FIT. When children fail one vision screening or if the family or agency has concerns, children are referred to NMSBVI for further evaluation. After two failed hearing screens, FIT agencies refer children to an audiologist or PCP for further hearing evaluation. NMSD can support agencies in this process.

Early Intervention agencies send the Transition Assessment Summary Form along with assessments and current Individualized Family Service Plan (IFSP). Pages 4, 11, and 12 of the IFSP reference vision and hearing screenings along with any services from NMSD or NMSBVI. These agencies also have the New Mexico Hearing and Vision Screening Tools (Forms) for each child. Schools may request these records, if available.

FIT TRANSITION HEARING FORM



FAMILY INFANT TODDLER PROGRAM (FIT)

NEW MEXICO HEARING SCREENING TOOL

*Developed by the New Mexico School for the Deaf (NMSD)
 Phone: 505-476-6402 Fax: 505-476-6424*

Date of Screening: _____ Child's Name: _____ DOB: _____

Agency: _____ Screener: _____

Newborn Screening? Yes No If yes, indicate results & where done: _____

Initial Screening Annual Screening or Recheck

History of ear infections: Yes (How many episodes _____) No

PE tubes? Yes (currently in past how many times _____) No

Cold or allergies at time of exam? Yes No

Comments on History: _____

Permission for Hearing Screening: _____ Date: _____
Parent/Legal Guardian Signature

Test Description	Results					
	Right			Left		
<input type="checkbox"/> Visual Inspection of Ear <small>-looking at the ear for signs of problems that could affect the screening process or need medical attention</small>	pass <input type="checkbox"/>	refer <input type="checkbox"/>	unable to test <input type="checkbox"/>	pass <input type="checkbox"/>	refer <input type="checkbox"/>	unable to test <input type="checkbox"/>
<input type="checkbox"/> Otoacoustic Emissions (OAE) <small>-a brief objective measurement of hearing ability</small>	pass <input type="checkbox"/>	refer <input type="checkbox"/>	unable to test <input type="checkbox"/>	pass <input type="checkbox"/>	refer <input type="checkbox"/>	unable to test <input type="checkbox"/>
<input type="checkbox"/> Tympanogram <small>-measurement of the eardrum and middle parts of the ear</small>	pass <input type="checkbox"/>	refer <input type="checkbox"/>	unable to test <input type="checkbox"/>	pass <input type="checkbox"/>	refer <input type="checkbox"/>	unable to test <input type="checkbox"/>

Results and Recommendations (attach results to back of form)

- Right Left Passed the hearing screening
- Referred for:
- Re-screen in 2 weeks
 - Follow-up with Primary Care Physician regarding _____
 - Follow-up with an Audiologist-please make this appointment as quickly as possible
 - Follow-up with an Ear, Nose and Throat (ENT) doctor -please make this appointment as quickly as possible
 - Consultation to share results with external agency (see separate release of information)
 - Referral for consultation with NMSD PICP (see separate release of info form)

If screening occurred at a Child Find or community event - family contact:
 Parent/Guardian name: _____ Phone: _____ City/County: _____

Print & attach DPOAE results for left & right ear below

Additional Comments

Record Tympanometry Result below

	Right Ear	Passing Range	Left Ear
Ear Canal Volume (ECV)		.2 - 2.0 cm3	
Peak (height)		.2 - 1.8 cm3	
Peak Pressure (daPa)		-150 - +100 daPa	
Circle Result	Pass <input type="checkbox"/> Refer <input type="checkbox"/>		Pass <input type="checkbox"/> Refer <input type="checkbox"/>

Attach or draw Tympanogram below



FIT TRANSITION VISION FORM

FAMILY INFANT TODDLER PROGRAM (FIT)

**NEW MEXICO VISION SCREENING TOOL
 FAMILY INFANT TODDLER PROGRAM**

(Adapted with permission from Baby Watch, Utah Early Intervention Program)
 This screening does not equate with an assessment by a medical professional.

Referred to NMSBVI	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Receiving Services from NMSBVI	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date		

Child's Name _____ DOB _____
 Parent's Name _____ Phone _____
 Address _____
 City _____ State _____ Zip _____
 Name (person doing screening) _____ Referring Agency _____
 Contact Person _____ Phone _____

PARENT INTERVIEW

Results of parent interview, describe any concerns:

I. HISTORY: (Check all that apply) No Concerns Unknown

A. Child's History

<input type="checkbox"/> Low birth weight < 3.5 lbs.	<input type="checkbox"/> Hydrocephaly/microcephaly	<input type="checkbox"/> PVL (periventricular leukomalacia)
<input type="checkbox"/> Prematurity < 32 wks	<input type="checkbox"/> Syndrome	<input type="checkbox"/> Non-accidental trauma (NAT)
<input type="checkbox"/> Small for gestational age	<input type="checkbox"/> Cerebral hemorrhage	<input type="checkbox"/> Significant illness:
<input type="checkbox"/> Meningitis/encephalitis	<input type="checkbox"/> Hypoxia, anoxia, low apgars	<input type="checkbox"/> Hearing loss
<input type="checkbox"/> Head trauma/tumor	<input type="checkbox"/> Neurological disorder	<input type="checkbox"/> Sepsis
<input type="checkbox"/> Retinopathy of prematurity (ROP)	<input type="checkbox"/> Intraventricular hemorrhage (IVH)	<input type="checkbox"/> Vacuum Extraction
		<input type="checkbox"/> Medications:
		<input type="checkbox"/> Seizures
		<input type="checkbox"/> Cerebral Palsy

B. Exposures during pregnancy

<input type="checkbox"/> Rubella	<input type="checkbox"/> Toxoplasmosis	<input type="checkbox"/> Cytomegalovirus (CMV)	<input type="checkbox"/> Significant illnesses:
<input type="checkbox"/> Herpes	<input type="checkbox"/> Alcohol / drugs	<input type="checkbox"/> Medication(s)	

C. Immediate family history of childhood vision loss

<input type="checkbox"/> Strabismus/Amblyopia	<input type="checkbox"/> Retinal dystrophy / degeneration	<input type="checkbox"/> Systemic syndromes w/ ocular manifestations
<input type="checkbox"/> Congenital Cataracts	<input type="checkbox"/> Glasses in early childhood	<input type="checkbox"/> Retinoblastoma
<input type="checkbox"/> Congenital Glaucoma	<input type="checkbox"/> Sickle cell disease	<input type="checkbox"/> Other

II. APPEARANCE OF THE EYE(S): (Check all that apply) No Concerns

<input type="checkbox"/> Cloudy or milky appearance	<input type="checkbox"/> Abnormal constriction or dilation of pupil (s)
<input type="checkbox"/> Irregular pupil shape	<input type="checkbox"/> Difference between eyes (size, shape, etc.)
<input type="checkbox"/> Sustained eye turn inward or outward? (after 4-6 months)	<input type="checkbox"/> Excessive tearing
<input type="checkbox"/> Droopy eyelids	<input type="checkbox"/> Jerky eye movements (nystagmus)
<input type="checkbox"/> Absence of eyes moving together	

III. BEHAVIORS THAT ARE OFTEN ASSOCIATED WITH VISUAL IMPAIRMENT: No Concerns

<input type="checkbox"/> Tilt or hold head in unusual position?	<input type="checkbox"/> Visually inattentive/uninterested?
<input type="checkbox"/> Hold objects close to eyes or bend close to look?	<input type="checkbox"/> Inconsistent visual behavior?
<input type="checkbox"/> Seem to look beside, under, or above an object or person?	<input type="checkbox"/> High sensitivity to room light or sunlight?
<input type="checkbox"/> Stare at lights, ceiling fans? (after 3 months of age)	<input type="checkbox"/> Difficulty sustaining eye contact?

FAMILY INFANT TODDLER PROGRAM (FIT)

IV. DEVELOPMENTAL VISION SCREENING (check each item observed)

Items match the IDA Developmental Profile Used by the New Mexico Infant Toddler Program (Except for the Birth Items)

Yes No BIRTH:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Responds to movement or light with a blink reflex
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Pupil responds to light on/off
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Makes momentary eye contact

Comments _____

Yes No BY 1-2 MONTHS:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Looks at object, follows visually
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Looks at adult, responds to voice
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Follows person with eyes
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Observes movement in room

Comments _____

Yes No BY 2-4 MONTHS:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Holds and looks at rattle
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Social smile
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Shows interest by reaching
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Scans visual environment or turns away

Comments _____

Yes No BY 4-7 MONTHS:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Reaches and grasps for toys
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Retrieves lost pacifier or bottle
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Initiates social contact
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Facial mimic
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Creates social contact (reaches)

Comments _____

Yes No BY 7-10 MONTHS:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Works to obtain out of reach toy
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Uncovers toy
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Matches cubes
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Reacts to strangers
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Shows distinct stranger reaction
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Plays peek-a-boo, pat-a-cake, so-big

Comments _____

Yes No BY 10-13 MONTHS:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Tries to build a cube tower
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Imitates scribble
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Explores toys
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Puts one object inside another
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Finds toy behind solid screen
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Uses object in imitation of an adult
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Hands toy or other object back and forth
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Rolls ball to another
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Imitates actions
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Uses locomotion to seek or avoid

Comments _____

Yes No BY 13-18 MONTHS:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Walks well alone
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Places pellet in bottle
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Builds tower of two cubes
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Builds tower of 3-4 cubes
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Finds toy under cup
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Explores drawers and cabinets
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Indicates needs by pointing
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Identifies one body part
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Plays "Where is your eye?" etc.
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Looks for hidden objects
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Begins to detour around obstacles
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Points or asks for desired object

Comments _____

Yes No BY 18-24 MONTHS:

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Walks upstairs, holding rail
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Kicks large ball after demonstration
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Runs well
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Dumps pellets
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Builds tower of 5 or 6 cubes
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Places forms in formboard with help
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Names one picture
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Identifies 5 objects or pictures
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Feeds self well with spoon
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Imitates adult activities (use of tools, housekeeping, etc.)

Comments _____