

Healthy Development

Why It Matters

Healthy children are ready to learn and staying healthy supports learning throughout life.¹ Supporting children's well-being is a key part of a whole child approach. This quality standard makes sure preschool providers have clear policies and procedures in place to support both the physical and mental health of young children.

What's Required

Preschool providers must have policies that ensure **children receive health screenings within 45 days** of enrollment. If a screening shows concerns, **families must be offered referrals** to follow-up services. The table below lists each required screening. **Providers do not need to perform the screenings themselves.** They can coordinate with local partners.

SCREENINGS	CONNECTION TO QUALITY
DEVELOPMENTAL	Developmental screenings help us see how a child learns, talks, moves, behaves, and interacts with others. A caregiver or trained professional who knows the child well should complete this screening. Results show if a full evaluation may be needed.
SOCIAL-EMOTIONAL	Social-emotional screenings look at how a child makes friends, cares for others, manages emotions, and solves problems. This is often included in a developmental screening. Results help decide next steps - like continued observation or a full assessment.
ORAL HEALTH	Tooth decay is common, but preventable. Dental issues can affect speaking, eating, and learning. Screenings should be done by a dentist, dental hygienist, or trained professional. Providers can reduce risk by giving families referrals.
VISION	Uncorrected vision problems can make learning hard. Children often do not complain because they do not realize something is wrong. A trained professional should do the screening. If needed, the child should be referred to a doctor or optometrist.
HEARING	Hearing issues can affect speech, language, social-emotional development, and school readiness. A trained professional should screen each child. If there are signs of hearing loss, the child should be referred to a doctor or audiologist.

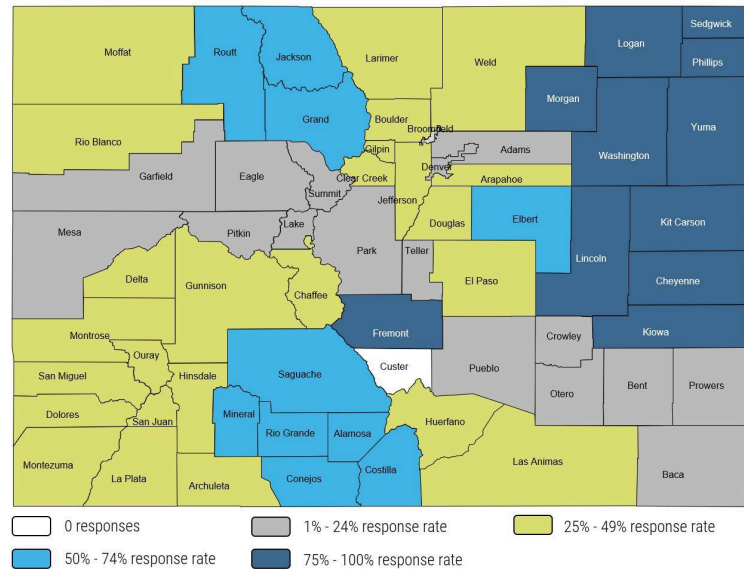
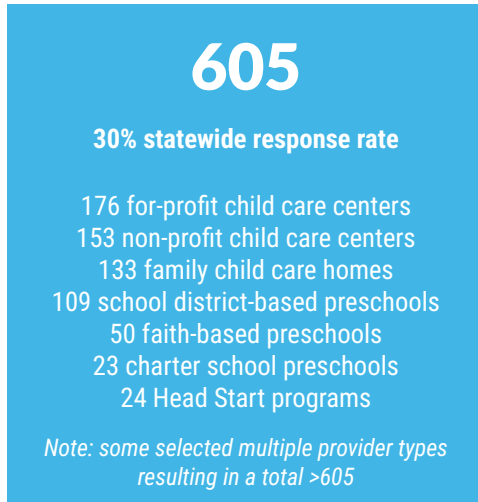


¹ Barnett, W. S., & Friedman-Krauss, A. (2019). [Early childhood education: Three pathways to better health](#). National Institute for Early Education Research.

Provider Quality Self-Reports

In August 2024, the Colorado Department of Early Childhood (CDEC) invited all 2,045 preschool providers participating in the 2024-25 school year to complete a voluntary online self-report. The form asked about Healthy Development practices. CDEC also asked the 32 Local Coordinating Organizations to help spread the word. The self-report form was open for four weeks.

A total of 605 preschool providers from 63 of Colorado's 64 counties completed the self-report. These providers represented a wide range of preschool settings.



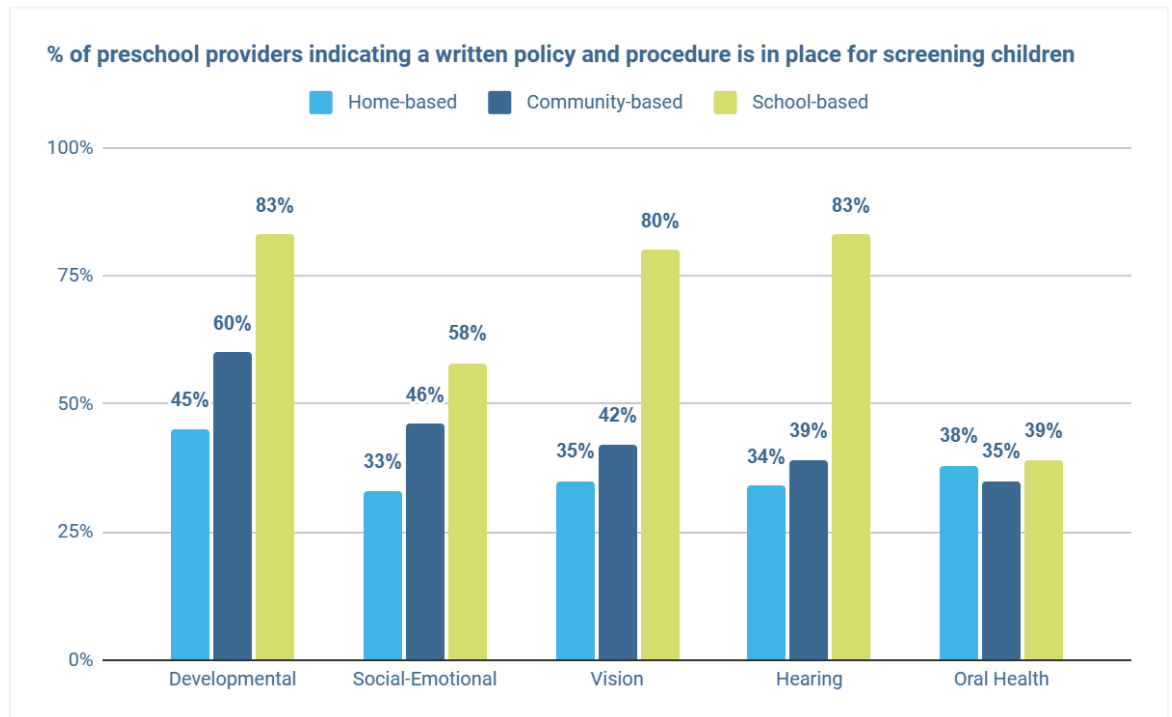
WHAT PROVIDERS SAID

These findings reflect what preschool providers reported about their own practices. The information was not verified. Because participation was voluntary, this information should not be seen as a full picture of the Universal Preschool Program. The goal of reviewing the 2024-25 responses was to support resource development, not to assess quality.

Providers in school settings were more likely to report having comprehensive policies to screen children within 45 days (see chart).

69% of providers said they have policies to **refer families to services** when a need is identified.

50% reported having policies to **help families access early childhood mental health** support.



EARLY MILESTONES
COLORADO

POLICIES

Providers were asked to describe their policies. Responses showed that providers use different approaches to meet the Healthy Development standard based on the needs of families they serve.

"Our enrollment form has questions asking when the child's last vision, hearing and speech screenings are. If they haven't had one, I have resources available at our parent info desk." - Faith-based community preschool

"We work with our local BOCES to provide developmental screenings through Child Find each year. Screening records are kept in the children's files. Brief questionnaires are also included in the children's enrollment packets for parents to complete and they are kept in the children's files as well." - School district preschool

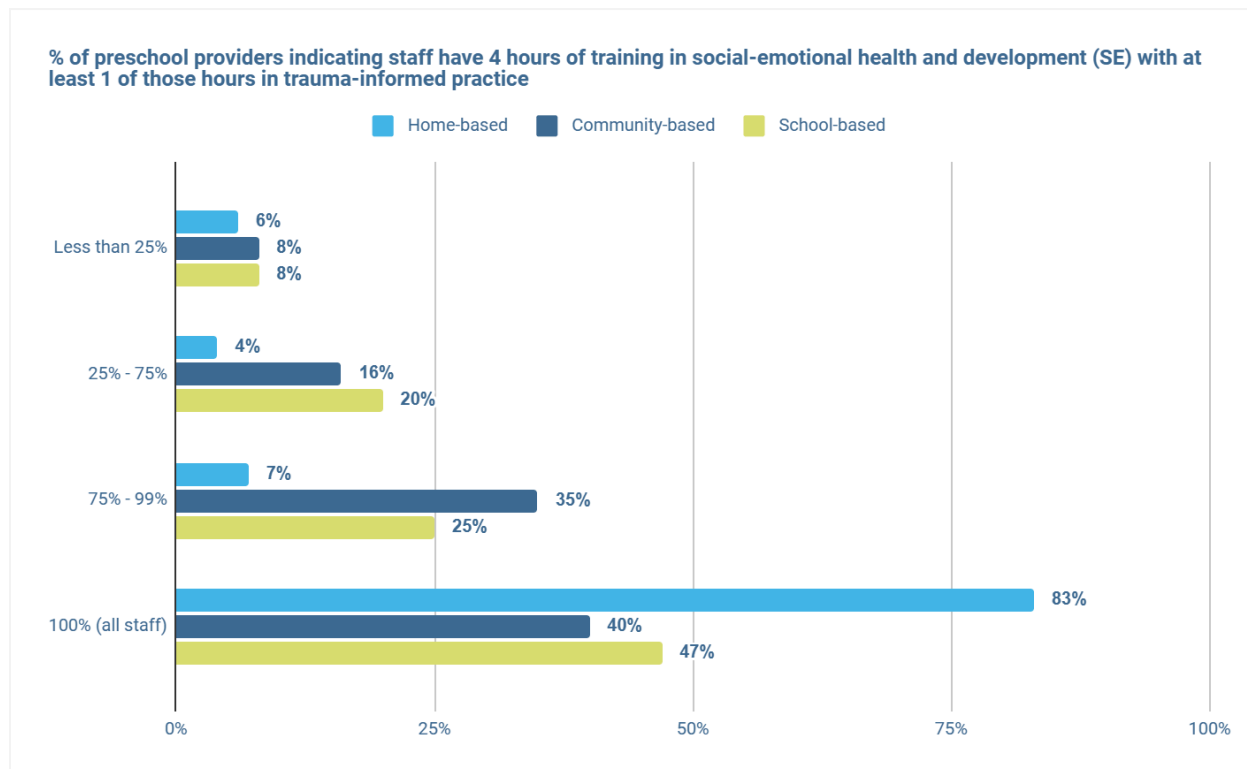
"I collect pediatrician's screening results and add my own assessment" - Family child care home preschool

"We have a therapist come and do a screening for all families that want it." - Non-profit community preschool

"Occasionally, a child has difficulty adjusting to a private preschool environment. If this circumstance occurs, members of the School Leadership Team make every effort to work professionally and respectfully with families and their children to determine an appropriate course of action." - Private community preschool

STAFF TRAINING

Providers were asked about staff training. Family child care homes – home-based preschool providers – were more likely to report that all staff met training requirements related to Healthy Development (see chart). Providers were not asked how close their staff were to meeting training requirements. Child care licensing already requires three hours of training in social-emotional health and development. For those not there yet, reaching the requirement should be manageable.



Key Takeaways

The Healthy Development requirements will be rolled out over time to give providers a chance to adjust while continuing to serve families. **Any decisions about program quality should consider how changes may affect families' access to care.**



Recognize Quality

Many providers already use practices that match the Healthy Development standard

- The **Ages & Stages Questionnaires** (ASQ and ASQ:SE) were the most commonly reported developmental and social-emotional screening tools (143 mentions)
- Responses show that **providers often coordinate with pediatricians** and other health care professionals to support families and children



Provide Resources

Providers want more tools and support to better understand and apply the quality standards. A common example was confusion between screening and assessment. While both tools give helpful information about a child's development, they are not the same:

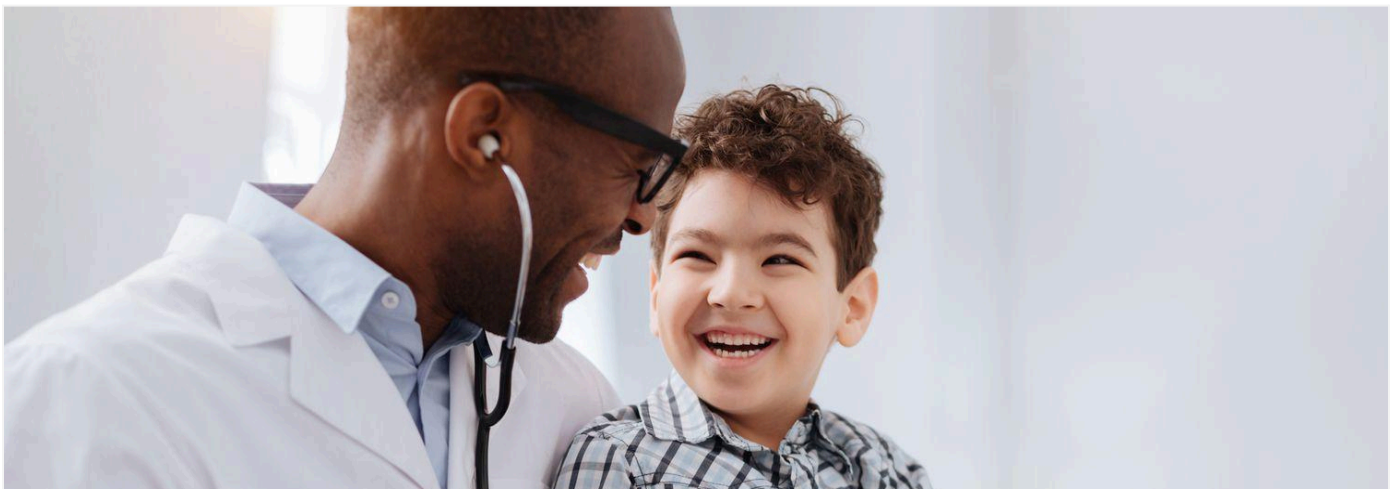
- **Screening gives a quick snapshot** to show if a child's development is on track. It can flag concerns and help decide if a child needs a referral for further evaluation. Screening does not diagnose conditions or decide if a child needs special services.
- **Assessment is a deeper process** used to better understand a child's learning and development. It can help identify strength and needs over time.



Make Connections

Providers are looking for help to connect with local partners to strengthen their work.

- Many **communities already have experts who provide screening and referral** services, including local public school districts.
- Since schools are more likely to offer full screening services, there is also an opportunity for these **larger organizations to support nearby providers** in meeting the standards.
- Local Coordinating Organizations have a key role in **connecting providers** with local partners. This is especially important for smaller programs like family child care homes.



Acknowledgements

The Colorado Department of Early Childhood (CDEC) generously provided data from the online self-report forms completed by providers. Katie Squibb, PhD, and Morgan Janke, MPA, from Early Years Forward, conducted the analysis for this brief.



EARLY MILESTONES
COLORADO