Engaging in Informed Clinical Reasoning

Informed clinical reasoning is a process team members use to gather information about a child’s developmental functioning in order to make decisions about the child’s eligibility for intervention services. The process requires knowledge of both typical and atypical child development and involves gathering information about the child’s functioning using interviews with parents and other caregivers, direct observations of the child, and review of results from evaluations and developmental assessment instruments. These elements constitute the foundation for becoming “informed” about a child’s developmental abilities and needs in the context of everyday activities or natural environments.

Gathering Multiple Sources of Information for Assessment

- Have at least three people gather information about a child’s strengths (e.g., skills, abilities, interests, preferences) and behavioral difficulties and challenges. Find out how a child is able to interact with objects and people in everyday activities and routines. Learn about the things the child has difficulty doing as part of everyday life. Pay particular attention to the child’s unusual behaviors and to situations and activities where the child struggles to participate.
- Gather the information from multiple sources in multiple ways. Talk with parents and other caregivers who best know the child’s strengths and their concerns about the child’s development. Together with caregivers, observe the child’s participation in different everyday activities and routines. Use developmental checklists or other assessment tools to identify behaviors the child is able to do, is just learning to do, and is not yet doing.
- Keep written records of all the information. Record the methods used and the individuals who are involved in gathering the information, the different settings in which information was obtained, family members’ observations and concerns about the child’s development, and details of the child’s behavior and functioning in different activities.
- Review all of the information that was gathered by the team and discuss how the information provides a picture of the child’s functioning and developmental status. Discuss how the child interacts with people and objects, challenges the child has participating in everyday activities, and any unusual or atypical child behaviors and/or development.
- Consider how the team can use all of the information from all sources to portray an accurate picture of the developmental status of the child. Determine whether the evidence, taken together, confirms that the child has a developmental delay (according to a state’s criteria). Come to an agreement about the child’s strengths, needs, and eligibility for intervention services.
- Explain to the family how the eligibility decision was reached and how available information informed the decision. Provide the family with a written summary of the eligibility determination process, including a description of the findings on the child’s functioning (e.g., strengths, abilities, and areas of delay), the methods used to reach a decision, and the rationale for that decision.

A Quick Peek

Jahwan is a 20-month-old whose mother, Jacy, has requested an eligibility determination for early intervention. She is concerned about Jahwan’s interactions with others. Jacy and professionals on the evaluation team make plans for an assessment visit including observing Jahwan in everyday activities at home to identify his strengths and challenges. On the day of the assessment, the professionals talk with Jacy to learn about the words Jahwan uses, the kinds of activities that seem to encourage his talking, how he lets others know what he wants, and what he does in interactions with other people. Together, they observe Jahwan playing with some of his favorite toys, eating lunch with Jacy, and interacting with his grandma. They also work with Jacy to complete a developmental checklist of Jahwan’s abilities. At the assessment team briefing, the team members discuss the information that was gathered and point out Jahwan’s strengths and challenges in everyday activities. They note that although Jahwan’s assessment scores do not show a 30% delay in his development, his skills in everyday activities and communication are not typical for a 20-month-old toddler and agree that he is eligible for early intervention services based on his atypical developmental pattern.