



The Pediatric Symptom Checklist (PSC-17)

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This presentation was designed for Health Home Care Coordinators for the Washington State Integration Project with The Health Care Authority and The Department of Social and Health Services. It was presented as a live webinar by Dr. Michelle Terry, MD on September 11, 2014.

This topic is not required and provides Care Coordinators with information about the Pediatric Symptom Checklist -17 which is a required screening beginning on October 1, 2014.

Overview: Pediatric Symptom Checklist

- ❖ Emotional and physical health are completely interrelated, particularly in children, especially in children who are in foster care.
- ❖ The Pediatric Symptom Checklist (PSC) is a brief questionnaire that is used by pediatricians and other health professionals to improve the recognition and treatment of psychosocial problems in children.
- ❖ The Pediatric Symptom Checklist helps screen for potential mental health problems in children so the children can be referred for appropriate evaluation and specialized services in communication with the child's primary care provider.

Pediatric System Checklist History

- ❖ The checklist was created in 1982 by Michael Jellinek, MD, the former chief of child psychiatry at Massachusetts General Hospital, and has been validated over the last 30 years.
- ❖ The checklist is endorsed by the American Academy of Pediatrics and many other health entities
- ❖ The PSC and its variations are available free for download from multiple website sources.

Definition: Pediatric Symptom Checklist

- ❖ In addition to the original 35-item parent report form of the PSC, there are now many other validated forms including translations of the original form into more than a dozen other languages,
- ❖ A youth self report, (PSC-Y)
- ❖ A pictorial version
- ❖ A shorter 17-item version, (PSC-17) for both the parent and youth forms.

PSC - Pediatric Symptom Checklist PSC-Y - Pediatric Symptom Checklist-Youth

- ❖ The PSC is completed by parents of children 4 to 16 years old.
- ❖ The PSC-Y is completed by youths from 11 to 18+ years of age.
- ❖ Both versions are 35-item questionnaires that can be completed in about five to 10 minutes, and take a brief time for staff to score.

What the PSC-17 Is:

The Pediatric Symptom Checklist is a research validated psychosocial screen designed to facilitate the recognition of childhood problems in the domains of:

- ❖ **Cognitive Symptoms**
- ❖ **Emotional Symptoms**
- ❖ **Behavioral Symptoms**

When symptoms are recognized, appropriate interventions can be initiated as early as possible.

What the PSC-17 Is Not:

- ❖ It is important to keep in mind that the goal of the PSC 17 is **not** to serve as a rapid mental health diagnosis tool.
- ❖ The PSC 17 is a brief assessment or “snapshot” of dysfunction in significant areas of a child’s daily life.
- ❖ As a clinical measure, it is the first step in what should be a multistage assessment procedure by trained clinicians.

PSC-17 Test's Characteristics

- ❖ **Target Population:** Children between the ages of 4 -16 years.
- ❖ **Intended Users:** Clinicians or Case Coordinators
- ❖ **Time to Administer:** 17 items, administration time approximately 3 minutes.
- ❖ **Completed By:** Parents.
- ❖ **Modalities Available:** Paper and pencil.

Brevity of test encourages frequent screening at regular intervals, at least once per trimester.



Pediatric Symptom Checklist

Pediatric Symptom Checklist (PSC-17)

Please mark under the heading that best describes your child:

	(0)	(1)	(2)
	NEVER	SOMETIMES	OFTEN
1. Feels sad, unhappy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Feels hopeless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Is down on self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Worries a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Seems to be having less fun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Fidgety, unable to sit still	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Daydreams too much	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Distracted easily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Has trouble concentrating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Acts as if driven by a motor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Fights with other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Does not listen to rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Does not understand other people's feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Teases others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Blames others for his/her troubles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Refuses to share	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Takes things that do not belong to him/her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does your child have any emotional or behavioral problems for which she/he needs help? __No __Yes

This is an example of the PSC-17 posted on the Massachusetts General Website.

Scoring Questions

❖ The PSC-17 consists of 17 items that are rated as:

Never = 0

Sometimes = 1

Often = 2

❖ The total score is calculated by adding together the score for each of the 17 items.

❖ Items that are left blank are simply ignored (i.e., score equals 0).

❖ If four or more items are left blank, the questionnaire is considered invalid.

Scoring Totals

- ❖ A PSC-17 score of **15 or higher** suggests the presence of significant behavioral or emotional problems.
- ❖ To determine what kinds of mental health problems are present, determine:
Three (3) factor subscale scores on the PSC-17:

The PSC-17 **Internalizing** Subscale (Cutoff Score: **5** or more)

“Internalizing” diagnoses can include: any anxiety or mood disorder

- ❖ Feels sad, unhappy: 0/1/2
- ❖ Feels hopeless: 0/1/2
- ❖ Is down on self: 0/1/2
- ❖ Seems to be having less fun: 0/1/2
- ❖ Worries a lot: 0/1/2

The PSC-17 **Attention** Subscale (Cutoff Score: **7** or more)

“Attention” diagnoses can include: Attention Deficit Hyperactivity Disorder (ADHD/ADD)

- ❖ Fidgety, unable to sit still: 0/1/2
- ❖ Daydreams too much: 0/1/2
- ❖ Has trouble concentrating: 0/1/2
- ❖ Acts as if driven by a motor: 0/1/2
- ❖ Distracted easily: 0/1/2

The PSC-17 **Externalizing** Subscale (Cutoff Score: **7** or more)

“Externalizing” diagnoses can include: **Conduct Disorder, Oppositional Defiant Disorder**

- ❖ Fights with other children: 0/1/2
- ❖ Does not listen to rules: 0/1/2
- ❖ Does not understand other’s feelings: 0/1/2
- ❖ Teases others: 0/1/2
- ❖ Blames others for his/her troubles 0/1/2
- ❖ Refuses to share: 0/1/2
- ❖ Takes things that do not belong to him/her: 0/1/2

Reporting Scores

- ❖ Tally the responses of the 17 questions to achieve a total score and a subset score

Never = 0

Sometimes = 1

Often = 2

- ❖ Care coordinators must report the child's PSC-17 total score on the child's Health Action Plan or note the reason that the checklist was not completed.

How to Share Results with Parents and Children:

- A positive PSC-17 score indicates care coordinator or provider should spend part of the visit with the child and family to assess psychosocial functioning, in order to confirm the positive screening.
- Providers may simply ask for the parent's perception of whether or not the child has an emotional issue for which they would like help.

Next Steps After Scoring the PSC-17

- ❖ Care coordinators may ask open ended questions about the child's daily functioning:
 - ❖ Family
 - ❖ School
 - ❖ Friends
 - ❖ Activities
 - ❖ Mood
- ❖ Follow up evaluation by child's primary care provider is indicated. The child's primary care provider may then refer the child to a mental health professional, or make a connection with the child's teacher.

Validation and Cautions

- ❖ The PSC-17 subscales have obtained reasonable agreement with validated and accepted parent-report instruments for internalizing, externalizing, and attention problems.
- ❖ Both false positives and false negatives occur, and only an experienced health professional should interpret a positive PSC / PSC-Y/ PSC-17 health score as anything other than a suggestion that further evaluation may be helpful.

Medical Home/Health Home

- ❖ Personal physician
- ❖ Whole person orientation
- ❖ Care is coordinated and/or integrated
- ❖ Quality and safety are hallmarks of the medical home
- ❖ Enhanced access to care

Symptoms of Anxiety (Internalization)

- ❖ Worries about routine parts of every day life
- ❖ Physical complaints, like stomachache or headache
- ❖ Trouble concentrating
- ❖ Trouble sleeping
- ❖ Fear of social situations
- ❖ Fear of leaving home
- ❖ Fear of separation from a loved one
- ❖ Refusing to go to school

Symptoms of Depression (Internalization)

- ❖ Sadness
- ❖ Irritability
- ❖ Change in appetite
- ❖ Change in sleeping patterns
- ❖ Loss of interest in activities
- ❖ Loss of energy
- ❖ Fatigue
- ❖ Inability to concentrate
- ❖ Indecisiveness
- ❖ Feelings of hopelessness and helplessness
- ❖ Recurring thoughts of death and suicide
- ❖ Physical complaints (Stomachaches, Headaches)
- ❖ Conflicts with family and friends
- ❖ Decline in school performance
- ❖ Inappropriate sexual activity
- ❖ Use of alcohol or drugs

Attention Deficit Disorder (Inattention)

- ❖ Often fails to give close attention to details or makes careless mistakes in schoolwork, at work, or with other activities.
- ❖ Often has trouble holding attention on tasks or play activities.
- ❖ Often does not seem to listen when spoken to directly.
- ❖ Often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (e.g., loses focus, side-tracked).
- ❖ Often avoids, dislikes, or is reluctant to do tasks that require mental effort over a long period of time (such as schoolwork or homework).
- ❖ Often has trouble organizing tasks and activities.
- ❖ Often loses things necessary for tasks and activities (e.g. school materials, pencils, books, tools, wallets, keys, paperwork, eyeglasses, mobile telephones).
- ❖ Is often easily distracted
- ❖ Is often forgetful in daily activities.

Attention Deficit Disorder (Hyperactivity)

- ❖ Often fidgets with or taps hands or feet, or squirms in seat.
- ❖ Often leaves seat in situations when remaining seated is expected.
- ❖ Often runs about or climbs in situations where it is not appropriate (adolescents or adults may be limited to feeling restless).
- ❖ Often unable to play or take part in leisure activities quietly.
- ❖ Often talks excessively.
- ❖ Often blurts out an answer before a question has been completed.
- ❖ Often has trouble waiting his/her turn.
- ❖ Often interrupts or intrudes on others (e.g., butts into conversations or games)
- ❖ Often unable to play or take part in leisure activities quietly.
- ❖ Is often "on the go" acting as if "driven by a motor".
- ❖ Often blurts out an answer before a question has been completed.
- ❖ Often has trouble waiting his/her turn.
- ❖ Often interrupts or intrudes on others

Conduct Disorder Oppositional Defiant Disorder (Externalization)

- ❖ Aggression to people and animals
- ❖ Destruction of property
- ❖ Deceitfulness or theft
- ❖ Serious violations of rules
- ❖ Is often truant from school, beginning before age 13 years
- ❖ The disturbance in behavior causes clinically significant impairment in social, academic, or occupational functioning.
- ❖ Is argumentative with adults
- ❖ Refuse to comply with adult requests or rules
- ❖ Annoy other people deliberately
- ❖ Blames others for mistakes or misbehavior
- ❖ Acts touchy and is easily annoyed
- ❖ Feel anger and resentment
- ❖ Is spiteful or vindictive
- ❖ Have difficulty maintaining friendships
- ❖ Have academic problems
- ❖ Feel a lack of self-esteem

Pediatric Symptom Checklist

Pediatric Symptom Checklist (PSC-17)

Name of Person Completing the Form: Date:

Child's Name: Sex:

Child's Date of Birth:

Please check the box under the heading that best describes your child or you.

	(0) Never	(1) Sometimes	(2) Often	For Clinic Use Only
1. Feels sad, unhappy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Feels hopeless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Is afraid on own	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Worryes a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interfering Time
5. Seems to be having less fun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Feels lonely, unable to sit still	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Outbursts too much	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Distracted easily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9. Has trouble concentrating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Admission Time
10. Acts out if given by a minor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Fights with other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Does not listen to rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Does not understand other people's feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Teases others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Blames others for his/her troubles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Refuses to share	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Admission Time
17. Feels things that do not belong to him/her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Total Score:

A score of 13 or higher may indicate the need for an assessment by a palliative medicine or mental health professional.

PSC-17
DSH 17-000 (02/2016)

DSHS developed a PSC-17 form which was designed for ease in completing and scoring. The questions are the same as the Massachusetts General form and appear in the same order. The three subscales are also identified. It can be located at the HCA Website and the DSHS forms Website. The form number is 10-509. Care coordinators are not required to use the DSHS form, most Lead Organizations will provide an electronic version of the questionnaire. The DSHS paper form may be completed by parents during face-to-face visits. Youth ages 13 to 17 years old may complete the tool. If the child completes the form enter the score and note in the comments field that it was completed by the child.

Top of the DSHS PSC-17

Name of Person Completing this Form First Name Last Name		Child's Name First Name Last Name		Date
			Please check the box under the heading that best describes your child or you.	
			(0) Never	(1) Sometimes
			(2) Often	For Office Use Only
1. Feels sad, unhappy			<input type="checkbox"/>	<input type="checkbox"/>
2. Feels hopeless			<input type="checkbox"/>	<input type="checkbox"/>
3. Is down on self			<input type="checkbox"/>	<input type="checkbox"/>
4. Worries a lot			<input type="checkbox"/>	<input type="checkbox"/>
5. Seems to be having less fun			<input type="checkbox"/>	<input type="checkbox"/>
			Internalizing Total	
6. Fidgety, unable to sit still			<input type="checkbox"/>	<input type="checkbox"/>
7. Daydreams too much			<input type="checkbox"/>	<input type="checkbox"/>
8. Distracted easily			<input type="checkbox"/>	<input type="checkbox"/>
9. Has trouble concentrating			<input type="checkbox"/>	<input type="checkbox"/>
10. Acts as if driven by a motor			<input type="checkbox"/>	<input type="checkbox"/>
			Attention Total	

Bottom of the DSHS PSC-17

6. Fidgety, unable to sit still	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attention Total	
7. Daydreams too much	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
8. Distracted easily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
9. Has trouble concentrating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
10. Acts as if driven by a motor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<hr/>					
11. Fights with other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Externalizing Total	
12. Does not listen to rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13. Does not understand other people's feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
14. Teases others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
15. Blames others for his/her troubles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
16. Refuses to share	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
17. Takes things that do not belong to him/her	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
				Total Score	<input type="text"/>

A score of 15 or higher may indicate the need for an assessment by a qualified medical or mental health professional.

Summary

- The PSC-17 is:

The Pediatric Symptom Checklist -17 is a research validated psychosocial screen designed to facilitate the recognition of childhood symptoms of emotional and behavioral dysfunction.

- The PSC-17 is not:

The PSC 17 is not designed to make mental health diagnoses in children.

References

- ❖ American Academy of Pediatrics
- ❖ Centers for Disease Control
- ❖ Massachusetts General Hospital, Department of Psychiatry

Translations of the Tool

Visit the Massachusetts General Hospital
Website located at:

http://www.massgeneral.org/psychiatry/services/psc_home.aspx



Certificate of Completion

The Pediatric Symptom Checklist – 17 (PSC-17)

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for Health Home Care Coordinators*

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