The PHDS-PLUS is a 128-item telephone/interviewer-administered survey largely derived from the mail/self-administered Promoting Healthy Development Survey (PHDS) (78% of PHDS-PLUS is in the PHDS). It takes 12–15 minutes to administer. This document provides a high-level summary of the questions asked in the survey.
## Promoting Healthy Development Survey-PLUS (PHDS-PLUS)
### Core Text of Survey

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Section 1. Child Information

This section provides descriptive information about the child.

1. The questions in this survey ask about the health care that (child) has received in the past year or since he/she was born. May I speak with the person in the household who is most often responsible for taking (child) to the doctor to get health care? 1

2. From the information that I have it looks like (child) is [#] months old. Is this correct? 1

3. How are you related to (child)? 1

4. Is it correct that (child) is [Gender listed in enrollment file]? 1

5. Is it also correct that (child) is currently enrolled in Medicaid or (state specific name for Medicaid or SCHIP)? 1

6. So I’ll know how to refer to (child) during the interview, is it alright with you that I continue to use (child’s first name)? 1

Section 2: Health Care Utilization

This section provides information about the nature and frequency of the child’s health care use.

1. In the last 12 months (not counting times [child] went to an emergency room) how many times did (he/she) go to a doctor's office or clinic? 2

2. In the last 12 months, how many times did (child) go to an emergency room? 2

3. In the last 12 months, how many times was (child) a patient in a hospital overnight or longer? 2

4. In the last 12 months, has (child) needed care right away for an illness or injury? 1
   a. When (child) needed care right away for an illness or injury, how often did (child) get this care as soon as you wanted? 4

Response Code Legend

1 Yes, No
2 Open-ended response.
3 A lot concerned, A little concerned, Not at all concerned
4 Never, Sometimes, Usually, Always
5 Not at all helpful, Somewhat helpful, Helpful, Very helpful
6 Excellent, Very Good, Good, Fair, Poor
7 Man, Woman
8 White, Black or African American, Native American, Alaska native, Asian, Native Hawaiian or other Pacific Islander, or another race
9 A lot of trouble, Some trouble, No trouble at all
10 Mother, Father, Aunt or Uncle, Older brother or sister, Grandmother or Grandfather, Guardian, Other relative
Section 3: Access Issues

This section provides information about access issues such as whether the child ever needed health care but not receive it or received health care later than the parent would have liked.

1. In the last 12 months (For children younger than 12 months, since child’s birth) was there any time that (child) needed health care but did not get it?

   a. Why did (child) need health care?
      Was it for a.....
      - Regular or routine visit?
      - A medical problem or concern?
      - A behavioral problem or concern?
      - A speech and/or language problem or concern?
      - For another reason?

   b. Why didn’t (child) receive care for [insert type of care indicated in 1a]?
      Was it because....
      - You could not afford it or had no health insurance?
      - You had no doctor to go to for (child)?
      - (Child’s) doctor did not consider it a problem?
      - (Child’s) doctor had no one to refer (child) to?
      - You had transportation/childcare problems?
      - Problems related to work?
      - Insurance did not cover the visit?
      - Doctor’s schedule was full/no free appointments?

   c. Did the lack of health care for (child’s) medical problem create concerns about (child’s) future development?
      Create problems for (child) attending day care?
      Create problems for you and/or your spouse/partner meeting work responsibilities?

2. In the last 12 months (For children younger than 12 months, since child’s birth) was there any time that (child) received care, but got the care later than you would have liked?

   a. Why did (child) need health care?
      Was it for a.....
      - Regular or routine visit?
      - A medical problem or concern?
      - A behavioral problem or concern?
      - A speech and/or language problem or concern?
      - For another reason?

   b. Why was (child’s) care for [Insert response to 2a] delayed?
      Was it because....
      - You could not afford it or had no health insurance?
      - You had no doctor to go to for (child)?
      - (Child’s) doctor did not consider it a problem?
      - (Child’s) doctor had no one to refer (child) to?
      - You had transportation/childcare problems?
      - Problems related to work?
      - Insurance did not cover the visit?
      - Doctor’s schedule was full/no free appointments?

   c. Did the delay in health care for (child’s) medical problem create concerns about (child’s) future development?
      Create problems for (child) attending day care?
      Create problems for you and/or your spouse/partner meeting work responsibilities?
Section 4: Care Coordination

This section provides information about the level of care coordination for children who get care from more than one kind of provider or use more than one kind of health care service.

1 In the last 12 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?  
   a. In the last 12 months, did anyone from your child’s doctor’s office or clinic help coordinate your child’s care among these different providers or services?  

Section 5: Other Health Services

This section provides information about the child’s enrollment in WIC and parenting classes the respondent may have taken.

1. Has (child) ever received WIC?
   a. (Question only for children older than 12 months) In the last 12 months, has (child) received WIC?  

2. In the last 12 months did (child’s) doctors or other health providers refer you to any programs or classes?
   a. What kinds of program(s) / class(es) was that?  

3. Did you attend a parenting class after the birth of (child)?
   a. Was this parenting class paid for or covered by (child’s) health insurance plan or Medicaid?  

4. Do you have other children besides (child)?
   a. Did you attend a parenting class after the birth of your other (CHILD/CHILDREN)?  

Response Code Legend

1 Yes, No
2 Open-ended response.
3 A lot concerned, A little concerned, Not at all concerned
4 Never, Sometimes, Usually, Always
5 Not at all helpful, Somewhat helpful, Helpful, Very helpful
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Section 6: Anticipatory Guidance and Education

This section provides information about whether key anticipatory guidance and parental education recommended in the Maternal and Child Health Bureau Bright Futures Guidelines and the American Academy of Pediatrics Guidelines for Health Supervision is provided by the doctor or other health provider.

For Parents Responding About Children 3-9 months old.

**Section Note:**
In the anticipatory guidance and education section, parents answer a core question about whether a topic was discussed in the last 12 months. Parents who answer the core question “No” are asked a follow-up question that asks whether the parent wished he/she had talked about this topic with the doctor or other health provider. Parents who answer this follow-up question “No” are then asked a second follow-up question, which asks the parent to explain why he/she did not wish to discuss the topic.

1. In the last 12 months, did (child’s) doctors or other health providers talk with you about things you can do to help (child) grow and learn?  
2. In the last 12 months, did (child’s) doctors or other health providers talk with you about the kinds of behaviors you can expect to see as (child) gets older?  
3. In the last 12 months, did (child’s) doctors or other health provider talk with you about breastfeeding?  
4. In the last 12 months, did (child’s) doctors or other health providers talk with you about issues related to food and feeding of (child) such as the introduction of solid foods?  
5. In the last 12 months, did (child’s) doctors or other health providers talk with you about the importance of placing (child) on (his or her) back when going to sleep?  
6. In the last 12 months, did (child’s) doctors or other health providers talk with you about night waking and fussing?  
7. In the last 12 months, did (child’s) doctors or other health providers talk with you about how (child) communicates (his or her) needs?  
8. In the last 12 months, did (child’s) doctors or other health providers talk with you about what (child) is able to understand?  
9. In the last 12 months, did (child’s) doctors or other health providers talk with you about how (child) responds to you, other adults, and caregivers?  
10. In the last 12 months, did (child’s) doctors or other health providers talk with you about how to avoid burns to (child), such as changing the hot water temperature in your home?  
11. In the last 12 months, did (child’s) doctors or other health providers talk with you about using a car-seat?  
12. In the last 12 months, did (child’s) doctors or other health providers talk with you about how to make your house safe?  
13. In the last 12 months, did (child’s) doctors or other health providers talk with you about the importance of showing a picture book to or reading with (child)?  
14. In the last 12 months, did (child’s) doctors or other health providers talk with you about the issues related to childcare?  
15. In the last 12 months, did (child’s) doctors or other health providers talk with you about WIC?
For parents responding about children 10-18 months.

Section Note:
In the anticipatory guidance and education section, parents answer a core question about whether a topic was discussed in the last 12 months. Parents who answer the core question “No” are asked a follow-up question that asks whether the parent wished he/she had talked about this topic with the doctor or other health provider. Parents who answer this follow-up question “No” are then asked a second follow-up question, which asks the parent to explain why he/she did not wish to discuss the topic.

1. In the last 12 months, did (child’s) doctors or other health providers talk with you about things you can do to help (child) grow and learn? 
2. In the last 12 months, did (child’s) doctors or other health providers talk with you about the kinds of behaviors you can expect to see in (child) as he/she gets older? 
3. In the last 12 months, did (child’s) doctors or other health providers talk with you about vitamins and foods (child) should eat? 
4. In the last 12 months, did (child’s) doctors or other health providers talk with you about (child) bed and naptime routines? 
5. In the last 12 months, did (child’s) doctors or other health providers talk with you about words and phrases (child) uses and understands? 
6. In the last 12 months, did (child’s) doctors or other health providers talk with you about night waking and fussing? 
7. In the last 12 months, did (child’s) doctors or other health providers talk with you about (child’s) sleeping with a bottle? 
8. In the last 12 months, did (child’s) doctors or other health providers talk with you about weaning (child) from a bottle? 
9. In the last 12 months, did (child’s) doctors or other health providers talk with you about weaning (child) from breastfeeding? 
10. In the last 12 months, did (child’s) doctors or other health providers talk with you about how (child) may start to explore away from you? 
11. In the last 12 months, did (child’s) doctors or other health providers talk with you about guidance and discipline techniques to use with (child)? 
12. In the last 12 months, did (child’s) doctors or other health providers talk with you about toilet training? 
13. In the last 12 months, did (child’s) doctors or other health providers talk with you about what you should do if (child) swallows certain kinds of poison? 
14. In the last 12 months, did (child’s) doctors or other health providers talk with you about using a car-seat? 
15. In the last 12 months, did (child’s) doctors or other health providers talk with you about how to make your house safe? 
16. In the last 12 months, did (child’s) doctors or other health providers talk with you about the importance of reading with (child)? 
17. In the last 12 months, did (child’s) doctors or other health providers talk with you about issues related to childcare? 
18. In the last 12 months, did (child’s) doctors or other health providers talk with you about WIC?
For parents responding about children 19-48 months.

Section Note:
In the anticipatory guidance and education section, parents answer a core question about whether a topic was discussed in the last 12 months. Parents who answer the core question "No" are asked a follow-up question that asks whether the parent wished he/she had talked about this topic with the doctor or other health provider. Parents who answer this follow-up question "No" are then asked a second follow-up question, which asks the parent to explain why he/she did not wish to discuss the topic.

1. In the last 12 months, did (child’s) doctors or other health providers talk with you about things you can do to help (child) grow and learn?  
2. In the last 12 months, did (child’s) doctors or other health providers talk with you about the kinds of behaviors you can expect to see as (child) gets older?  
3. In the last 12 months, did (child’s) doctors or other health providers talk with you about issues related to food and feeding (child)?  
4. In the last 12 months, did (child’s) doctors or other health providers talk with you about (child’s) bedtime routines and how many hours of sleep (child) needs?  
5. In the last 12 months, did (child’s) doctors or other health providers talk with you about toilet training?  
6. In the last 12 months, did (child’s) doctors or other health providers talk with you about the words and phrases (child) uses and understands?  
7. In the last 12 months, did (child’s) doctors or other health providers talk with you about how (child) is learning to get along with other children?  
8. In the last 12 months, did (child’s) doctors or other health providers talk with you about guidance and discipline techniques to use with (child)?  
9. In the last 12 months, did (child’s) doctors or other health providers talk with you about ways to teach (child) about dangerous situations, places, and objects [examples include electrical sockets, the stove, climbing on things, running into the street]?  
10. In the last 12 months, did (child’s) doctors or other health providers talk with you about using a car-seat?  
11. In the last 12 months, did (child’s) doctors or other health providers talk with you about how to make your house safe?  
12. In the last 12 months, did (child’s) doctors or other health providers talk with you about what you should do if (child) swallows certain kinds of poisons?  
13. In the last 12 months, did (child’s) doctors or other health providers talk with you about the importance of reading with (child)?  
14. In the last 12 months, did (child’s) doctors or other health providers talk with you about the issues related to childcare?  
15. In the last 12 months, did (child’s) doctors or other health providers talk with you about WIC? 

Response Code Legend

Yes, No
Open-ended response.
A lot concerned, A little concerned, Not at all concerned
Never, Sometimes, Usually, Always
Not at all helpful, Somewhat helpful, Helpful, Very helpful
Excellent, Very Good, Good, Fair, Poor
Man, Woman
White, Black or African American, Native American, Alaska native, Asian, Native Hawaiian or other Pacific Islander, or another race
A lot of trouble, Some trouble, No trouble at all
Mother, Father, Aunt or Uncle, Older brother or sister, Grandmother or Grandfather, Guardian, Other relative
Section 7: Developmental Assessment

This section provides information about whether a developmental assessment may have occurred, whether parents have concerns about their child’s learning, development, and/or behavior, and whether doctors or other health care providers ask about and/or address parents concerns.

1. Did (child’s) doctors or other health providers ever tell you that they were doing what doctors call a “developmental assessment” or test of (child’s) development?

2. Did (child’s) doctors or other health providers ever have (child) roll-over, pick up small objects, stack blocks, throw a ball, or recognize different colors?

3. In the last 12 months, did (child’s) doctors or other health providers have you fill out a survey or checklist about concerns you may have had about (child’s) learning, development, or behavior?

4. In the last 12 months, did (child’s) doctor or other health care providers have you fill out a survey or checklist about activities that (child) may be able to do such as certain physical tasks, whether (child) can draw certain objects, or ways (child) can communicate with you?

5. The next section asks about specific concerns some parents (if grandparent: grandparents) may have. Please tell me if you are currently a lot, a little, or not at all concerned about the following:

   How your child talks and makes speech sounds?
   How your child sees?
   How your child hears?
   How your child understands what you say?
   How your child uses his or her hands and fingers to do things?
   How your child uses his or her arms and legs?
   How your child behaves?
   How your child gets along with others?
   How your child is learning to do things for himself/herself?
   How your child is learning preschool or school skills?
   How your child is behind others or can’t do what other kids can?

6. In the last 12 months, did (child’s) doctors or other health providers ask if you have concerns about (child’s) learning, development, or behavior?

7. In the last 12 months, did you have any concerns about (child’s) learning, development, or behavior?
   a. In the last 12 months, did (child’s) doctors or other health providers give you specific information to address these concerns?

Section 8: Follow-Up for Children at Risk for Developmental/Behavioral Delays

This section provides information about follow-up services the child may have received.

1. In the last 12 months did (child’s) doctors or other health providers do any of the following...
   - Refer (child) to another doctor or other health provider?
   - Test (child’s) learning and behavior?
   - Note a concern about (child) that should be watched carefully?
   - Refer (child) for speech-language or hearing testing?
Section 9: Family Centered Care

This section provides information about communication and the respondent’s experience of care.

1. In the last 12 months, how often did (child’s) doctors or other health providers take time to understand the specific needs of (child). Would you say never, sometimes, usually, or always? ④

2. In the last 12 months, how often did (child’s) doctors or other health providers respect you as an expert about (child)? ④

3. In the last 12 months, how often did (child’s) doctors or other health providers build your confidence as a parent (if grandparent: grandparent)? ①

4. In the last 12 months, how often did (child’s) doctors or other health providers help you feel like a partner in your child’s care? ④

5. In the last 12 months, how often did (child’s) doctors or other health providers explain things in a way you can understand? ④

6. In the last 12 months, how often did (child’s) doctors or other health providers show respect for your family’s values, customs, and how you prefer to raise your child? ④

Section 10: Health Provider Assessment of Risks in the Family

This next section provides information about whether the doctor or other health provider screens families for risk factors to the child’s health.

1. In the last 12 months, did (child’s) doctors or other health providers ask you if you or someone in your household smokes? ①

2. In the last 12 months, did (child’s) doctors or other health providers ask you if you or someone in your household drinks alcohol or uses other substances? ①

3. In the last 12 months, did (child’s) doctors or other health providers ask you if you ever feel depressed, sad, or have crying spells? ①

4. In the last 12 months, did (child’s) doctors or other health providers ask you if you have someone to turn to for emotional support? ①

5. In the last 12 months, did (child’s) doctors or other health providers ask you if you have any firearms in your home? ①

Response Code Legend

① Yes, No
② Open-ended response.
③ A lot concerned, A little concerned, Not at all concerned
④ Never, Sometimes, Usually, Always
⑤ Not at all helpful, Somewhat helpful, Helpful, Very helpful
⑥ Excellent, Very Good, Good, Fair, Poor
⑦ Man, Woman
⑧ White, Black or African American, Native American, Alaska native, Asian, Native Hawaiian or other Pacific Islander, or another race
⑨ A lot of trouble, Some trouble, No trouble at all
⑩ Mother, Father, Aunt or Uncle, Older brother or sister, Grandmother or Grandfather, Guardian, Other relative
Section 11: Health Information

This section captures information about whether the respondent has read or seen specific kinds of health information.

In the last 12 months did you see or hear any information about the following:

1. Safety information, such as how to make your house and car safe for (child).

2. Health care information, such as when and how often (child) should see the doctor or reminders about immunizations.

3. Developmental information, such as things you can do with (child) to help (him/her) grow and learn.

Section 12: Helpfulness of Care Provided

This section provides information about how helpful the care provided is in specific aspects of parenting.

In thinking about all of the care provided from (child’s) doctors or other health providers in the last 12 months, how helpful has it been in the following areas:

1. Understanding (child’s) behavior?
2. Learning how to protect (child) from injuries?
3. Giving you the information you needed when you needed it?
4. Learning how to meet your own needs while caring for (child)?

Section 13: Child’s Health: Overall Health Status

1. Overall, how would you rate (child’s) health in the last 12 months?
Section 14: Children with Special Health Care Needs

This section identifies children who have a special health care need.

1. Does (child) currently need or use medicine, other than vitamins, prescribed by a doctor?  
   a. Is this because of ANY medical, behavioral, or other health condition? 
   b. Is this a condition that has lasted or is expected to last for at least 12 months?

2. Does (child) need or use more medical care, mental health, or educational services than is usual for most children of the same age?  
   a. Is this because of ANY medical, behavioral, or other health condition? 
   b. Is this a condition that has lasted or is expected to last for at least 12 months?

3. Is (child) limited or prevented in any way in his or her ability to do the things most children of the same age can do?  
   a. Is this because of ANY medical, behavioral, or other health condition? 
   b. Is this a condition that has lasted or is expected to last for at least 12 months?

4. Does (child) need or get special therapy, such as physical, occupational, or speech therapy?  
   a. Is this because of ANY medical, behavioral, or other health condition? 
   b. Is this a condition that has lasted or is expected to last for at least 12 months?

5. Does (child) have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?  
   a. Has this problem lasted or is it expected to last for at least 12 months?

Section 15: Child Health Characteristics

This section provides information about the child’s health characteristics.

1. Was (child) born prematurely, that is, more than 4 weeks early?  
2. What was the birth weight of (child)?  
3. Was (child) breastfed for any length of time?  
   a. For how many months was (child) breastfed?
Section 16: Personal Doctor or other Health Provider

This section provides information about whether the child has a personal doctor or health provider.

1. A personal doctor or nurse is the health provider who knows your child best. This can be a general doctor, a specialist doctor, a nurse practitioner, or a physician assistant. Do you have one person you think of as (child’s) personal doctor or nurse?  
   a. What kind of health provider is this person?  
   b. And is this person a man or woman? 

Section 17: Respondent Health

The next section provides information about the respondent’s health.

1. Overall, in the last 12 months, how would you rate your health? Would you say....
2. For how many days, during the past 30 days, would you say your physical health was not good?
3. For how many days, during the past 30 days, would you say your mental health was not good?
4. How many days in the last week have you felt depressed?
5. In the past year, have you had two weeks or more during which you felt sad, blue, depressed, or lost pleasure in things that you usually cared about or enjoyed?
6. Have you had two or more years in your life when you felt depressed or sad most days, even if you felt okay sometimes?
Section 18: Parenting Behaviors

This section provides information about family activities.

1. For each of the following, tell me if you have ever done this in your home.
   - Put locks on cabinets where things such as cleaning agents or medicines are kept.
   - Put padding around hard surfaces or sharp edges.
   - Put stoppers or plugs in electrical outlets.
   - Turned down the hot water thermostat setting.
   - Kept the Poison Control Center phone number on or near your phone.
   - Kept Syrup of Ipecac in your home.

2. How many days in a typical week do you or other family members read stories to (child)?

3. How many days in a typical week do you or other family members play music or sing songs with (child)?

4. How many days in a typical week does (child) have a set or regular routine?

Section 19: Socio-Demographic Items

This section provides descriptive information about respondent and family of the child.

1. Including (child) how many children and or young adults under the age of 18 live in your household?

2. Is (child) your first child?

3. Is (child) of Hispanic or Latino origin or descent?

4. Now I am going to read a list of categories. Please choose one or more of the following categories to describe (child’s) race. Is (child) White, Black or African American, Native American, Alaska native, Asian, Native Hawaiian or other Pacific Islander, or another race?
   a. Which of these groups would you say best represents (child’s) race?

5. The next questions ask how much trouble you have had paying for particular kinds of expenses. For each of the items in the list, please tell me if you had a lot of trouble, some trouble, or no trouble at all paying for that item.
   - Prenatal care during pregnancy?
   - How about the medical expenses for (child’s) birth?
   - How about (child’s) health and medical expenses?
   - How about supplies like formula, food, diapers, clothes, and shoes?
   - How about healthcare for yourself?

6. What is your age now?

7. How long have you lived in the United States?

8. Which language do you speak most comfortably?

9. What is the highest grade or level of school that you have completed?

10. Are you/is (child’s) mother now married, divorced, separated, or have you/has she never been married?