HEALTH BASICS

Developmental milestones record - 12 months

A 12-month developmental milestones record documents skills a child shows around their first birthday.

WHAT IT IS
A snapshot of skills commonly seen around twelve months

WHERE IT COMES UP
One-year health reviews and developmental screening

WHY IT MATTERS
Helps identify children who may benefit from further assessment

WHAT IT IS NOT
Not a diagnosis or pass-fail test

WHO TO ASK
Your child's primary care clinician or child development service

HOW IT IS CHECKED
Caregiver report, observation, and a developmental screening questionnaire

Overview

A developmental milestones record notes what a child can do around 12 months of age. It may be part of a health record, screening questionnaire, childcare review, or one-year health visit.

Developmental milestones are skills that most children can do by a certain age. They cover several areas, including movement, communication, learning, play, and interaction with other people.

A 12-month record might note whether a child:

This is not a complete list. Different records may use different wording or group skills in different ways.

The record is not a test that a child passes or fails. Development does not happen on an exact timetable, and one unchecked box does not establish that anything is wrong. Independent walking, for example, may develop later than supported standing or walking along furniture.

- Waves goodbye or plays a simple social game
- Uses a special name such as "mama" or "dada"

- Understands a brief instruction such as "no"
- Looks for an object that has been hidden
- Places an object into a container
- Pulls up to stand or walks while holding furniture
- Picks up small items between a finger and thumb
- Drinks from an open cup when an adult holds it

How it works

A milestone record combines what you have noticed at home with what a clinician observes. Children may not demonstrate a familiar skill during a short appointment, especially if they are tired, hungry, unwell, or uncomfortable in a new setting.

The clinician may ask for specific examples. Rather than asking only whether a child "communicates," they may ask whether the child waves, points, responds to their name, makes different sounds, or tries to get an adult's attention.

Some appointments include a standardized developmental screening questionnaire. This is a structured set of questions scored in the same way for each child. Screening identifies children who may need a closer assessment; it does not make a diagnosis.

Development is usually considered across several areas:

The record should also consider the child's health and background. For a child born early, the care team may use a corrected age. Corrected age is based on the expected due date rather than the actual birth date. This can give a fairer picture of early development.

Hearing, vision, movement, and opportunities to practise skills can also affect what is observed. Growth measurements, feeding, sleep, and vaccinations may be discussed at the same appointment, but they are not developmental milestones.

- Social and emotional development: interacting, copying actions, or joining simple games
- Communication: understanding words, using sounds or words, and communicating with gestures
- Thinking and learning: searching for objects, exploring cause and effect, and using objects purposefully
- Movement: sitting, standing, moving around, and using the hands and fingers

Why it matters for your health

A milestone record helps create a picture of development over time. Repeated observations are often more informative than a single appointment.

The record can show areas in which a child is progressing as expected. It can also identify a pattern that deserves closer attention, such as difficulty across several developmental areas or a skill that has been lost.

Recognizing a concern allows the family and care team to decide whether further assessment would be useful. This might include hearing or vision testing, a physical examination, another developmental questionnaire, or assessment by a child development service.

Support does not always require a diagnosis. Depending on the concern and local services, a child may be offered help with communication, movement, feeding, or play while an assessment is taking place.

The record can also improve communication between families, primary care services, childcare staff, therapists, and specialists. It gives everyone concrete examples to discuss rather than relying on broad descriptions such as "a little behind."

What can go wrong

A milestone record can be incomplete or misleading if it is treated as a rigid checklist. A child may perform differently at home and in a clinic. Records may also use different milestone definitions, making direct comparisons difficult.

Not meeting one listed milestone can reflect normal differences in timing. It can also be related to temporary illness, premature birth, limited opportunities to practise a skill, or difficulty hearing or seeing.

When delays form a consistent pattern, clinicians may consider named conditions or situations such as:

A milestone record alone cannot confirm any of these. Assessment uses the child's history, observation, examination, and appropriate tests.

Developmental concerns are usually handled through routine or prompt outpatient assessment. Arrange an earlier review if a child stops making progress, uses one side of the body much more than the other, seems unusually stiff or floppy, or is not responding to sounds.

Loss of previously established skills needs prompt medical assessment, particularly if the change is sudden.

Call emergency services for an immediate problem such as a seizure lasting several minutes,

severe breathing difficulty, sudden unresponsiveness, or sudden weakness. These are emergencies because of the acute symptoms, not because of the milestone record.

- Developmental delay: skills are developing later than expected in one or more areas
- Hearing loss: reduced hearing can affect responses to sound and spoken language
- Vision impairment: reduced vision can affect reaching, movement, and shared attention
- Motor disorders: conditions such as cerebral palsy or neuromuscular disorders can affect posture and movement
- Developmental differences: autism and other developmental conditions can affect communication, play, or social interaction

What you can do

Keep examples of what your child does in everyday settings. Dates, short notes, or brief videos can help if a skill does not appear during an appointment. Record the skill itself rather than an interpretation. For example, write "pulled to standing twice using the sofa" instead of "movement is normal."

Bring any existing health, childcare, or screening records to the review. Mention if your child was born early, has had serious illnesses, or has known hearing, vision, feeding, or movement concerns.

Useful questions include:

You can support development through ordinary, supervised activities. Talk and sing during daily routines, share picture books, respond to gestures and sounds, and provide safe floor space for movement. Let the child practise picking up suitable foods or objects while closely supervised.

Do not use small items that could cause choking to test finger skills. There is no home test that can diagnose a developmental condition.

If the record shows age-appropriate skills and neither you nor the clinician has concerns, there may be nothing extra to do beyond routine health follow-up.

- Which skills are you reviewing at this age?
- Is a standardized developmental screen needed?
- Should hearing or vision be checked?
- When should this skill be reviewed again?

- Would a child development or early support referral help?

Common questions

Does a child need to walk independently by 12 months?

No. Some children walk independently around their first birthday, while others are still pulling to stand or moving along furniture. Movement should be considered as a pattern, not judged from independent walking alone.

Does one missing milestone mean developmental delay?

Not by itself. The importance depends on which skill is missing, the child's age and history, other areas of development, and whether progress is continuing.

What if my child does the skill at home but not during the appointment?

Tell the clinician what you have seen and give a specific example. A video may help if it can be recorded safely and without delaying care.

Is a milestones checklist the same as developmental screening?

No. A checklist provides examples of expected skills. A standardized screen uses a validated questionnaire or process with set scoring. Neither is the same as a full developmental assessment.

Should corrected age be used after premature birth?

It may be used when interpreting early milestones. Ask the child's clinician which age they are using and how long corrected age should remain relevant for your child.

What if I am concerned despite a reassuring checklist?

Raise the concern. A checklist cannot cover every aspect of development, hearing, vision, movement, or behaviour. Your observations can be a reason for further review even when many boxes are checked.

Sources

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