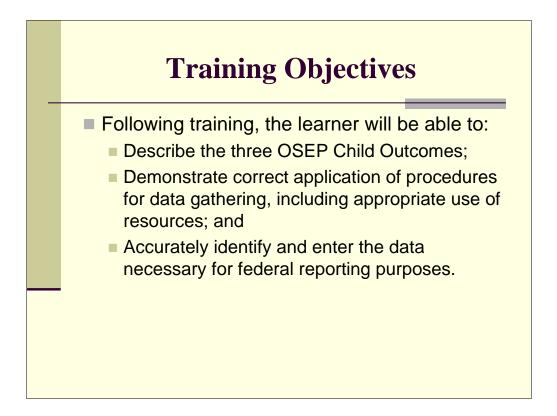


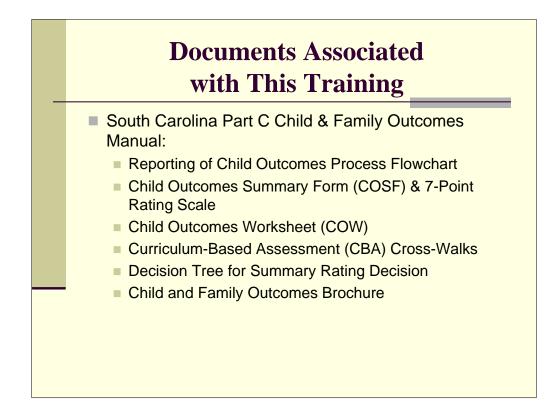
My name is Kristie Musick. As the director of TECS—Team for Early Childhood Solutions, I would like to welcome you to our online training for measuring and reporting child outcomes. BabyNet System Personnel who are responsible for review and application of this content are Intake and Ongoing Service Coordinators, Service Providers who serve as members of children's Individualized Family Service Plan (IFSP) Teams, System Point of Entry (SPOE) and Service Coordination Supervisors, BabyNet Regional Consultants, and BabyNet Program Managers.

With me today are Leslie Pyper and Lily Nalty, Technical Assistance Specialists with TECS, and Dr. Lesly Wilson, the research and evaluation coordinator for the child and family outcomes measures.

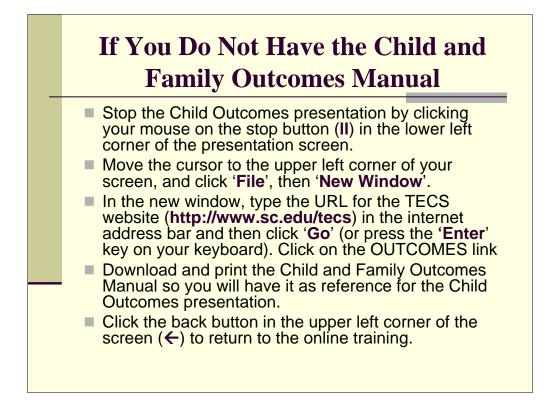


Our training objectives for this presentation are that participants will be able to:

- Describe each of the three child outcomes established under the Individuals with Disabilities Education Act of 2004;
- Understand and implement the appropriate methods for gathering and synthesizing child data for each outcome; and,
- Understand and be able to accurately report data for submission to the U.S. Department of Education, Office of Special Education Programs.
- This learning objectives represent new national requirements for all states' Part C programs. Existing BabyNet System Personnel and any new system personnel after August 1, 2006, are responsible for implementation of these requirements.



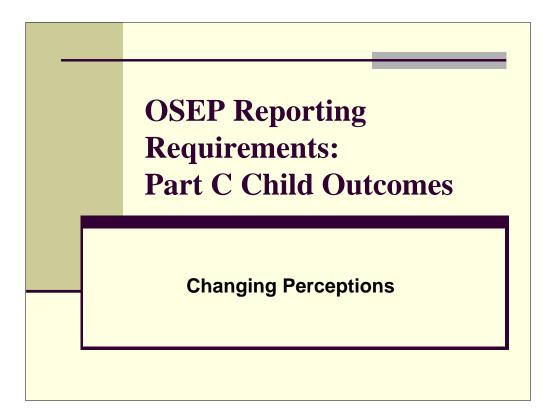
The South Carolina Part C Child and Family Outcomes Manual has additional documents supporting this training content; those documents are located in the Appendix of the manual. Within the Child and Family Outcomes manual, several sections are directly associated with this training concerning child outcomes.



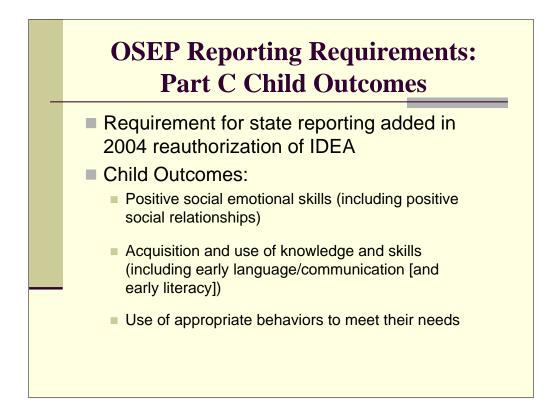
If these documents were not sent to you via email when you received your invitation to participate in the training, stop the Child Outcomes presentation by clicking your mouse on the stop button (II) in the lower left corner of the presentation screen. Next, move the cursor to the upper left corner of your screen, and click 'File', then 'New Window'. In the new window, type the URL for the TECS website (http://www.sc.edu/tecs) in the Internet address bar, then click 'Go' (or press the 'Enter' key on your keyboard). Click on the Outcomes link – this will take you to the supporting documents that are available.

Download and print the Child and Family Outcomes Manual so you will have it as reference for the Child Outcomes presentation.

Click the back button in the upper left corner of the screen () to return to the online training. You may resume the presentation on Slide number 5.



Now we will discuss the OSEP Reporting requirements for Part C Child Outcomes.

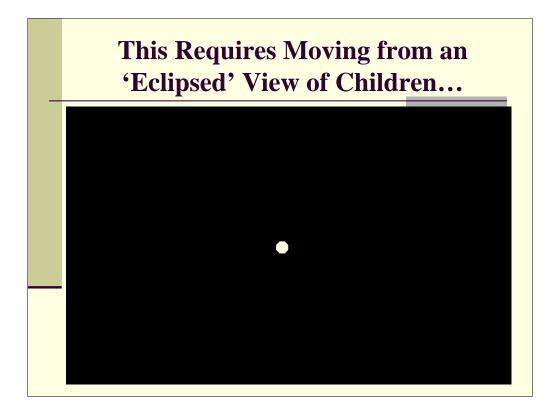


The twentieth century has been called the Age of Accountability and the 2004 Reauthorization of Individuals with Disabilities Education Improvement Act (IDEA), Part C is representative of this fact. This legislation requires that states move to a new level of accountability for early intervention service systems. The Office of Special Education Programs (OSEP) has established three child outcomes for all states to measure:

Positive social emotional skills

acquisition and use of knowledge and skills

use of appropriate behaviors to meet their needs

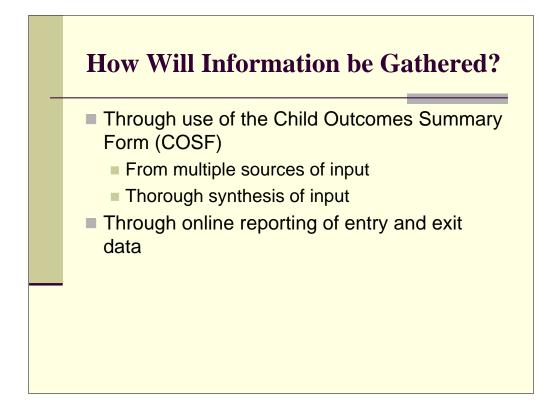


Remember how we have been told to view a solar eclipse by making a small hole in a piece of black construction paper in order to view the sun? Focusing only on progress toward IFSP goals, or on the skills acquired through Part C services to meet those goals, can be like looking at the child through a very small hole or lens of the individual professional or discipline.



Looking at child outcomes—what comes out of children's participation in Part C supports and services—requires each team member to adopt a more global view of how the child is developing relative to both same-age peers and performance of life-long skills in future situations and settings; that is, a more panoramic view of the child's function in the family's home and community routines and activities with the standard of how same-age peers would perform in those situations and settings.





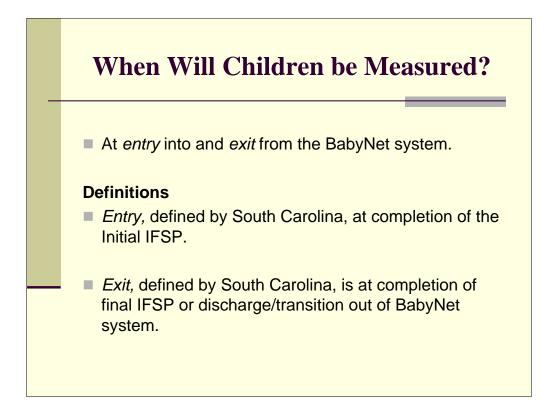
The information reported to OSEP will be gathered through:

•Using COSF

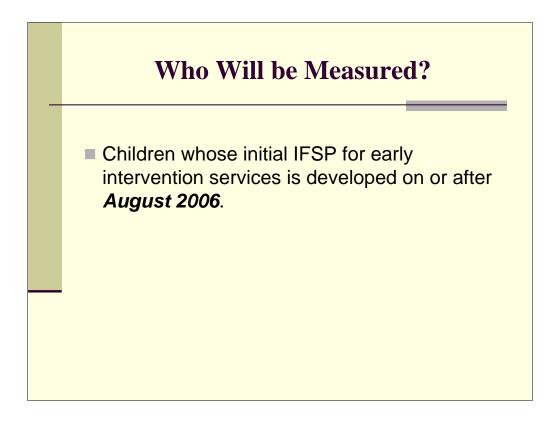
Multiple sources of input

Synthesis of input

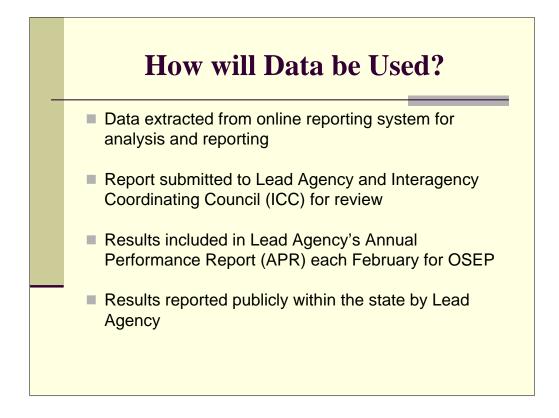
•Online reporting



It is important to know that all states are approaching this question differently. Each state has established their point in time for capturing data. These definitions of entry and exit are specific to South Carolina and provide specific uniform points in time for capturing data. South Carolina will measure children at entry into and exit from of the BabyNet system.



Starting August 1st (??? This date may change) initial/baseline data will be collected. Every child completing the initial IFSP process on or after August 1st should be included in the child outcomes measure process.

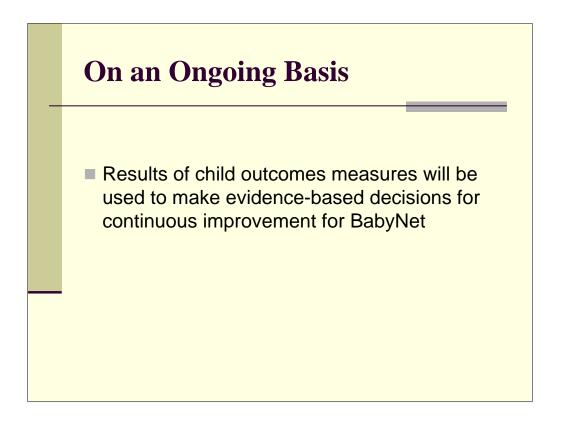


The child outcome measures represent "system" level monitoring for accountability. TECS has been contracted by DHEC, the Part C Lead Agency, to coordinate the child outcome measures process. As a part of that role TECS will be responsible for:

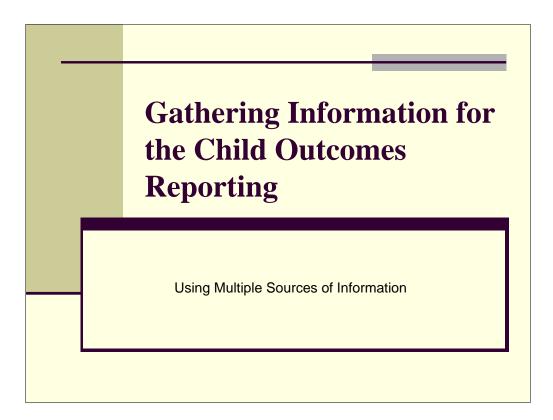
Extracting data from the online reporting system

Submitting a report to DHEC and the ICC for review

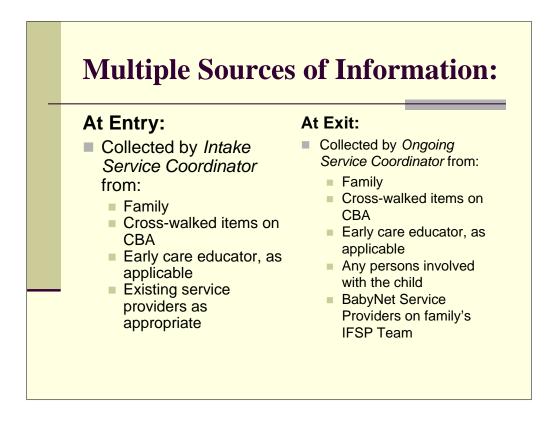
Providing information to be included in the state's APR to OSEP and the public report



Child Outcomes will be collected and tracked on a systems level on an ongoing basis. Results will be used by our state to make decisions about improvement. And OSEP will use this information as well.



In order to report on the child outcomes, data needs to be collected statewide on the status and progress of children, relative to the three identified outcomes. In this next section we will begin to talk about how we will do that in South Carolina.



Multiple sources of information are used to collect data at both entry and exit. At both entry and exit, the service coordinator plays a major role in coordinating the input.

For example at entry, information is collected by the intake service coordinator who collects information from the:

Family

Cross-walked items on the CBA

Early care educator - if there is one, and

Existing service providers as appropriate – that is if the child is presently receiving services from providers.

At Exit the ongoing service coordinator collects information from:

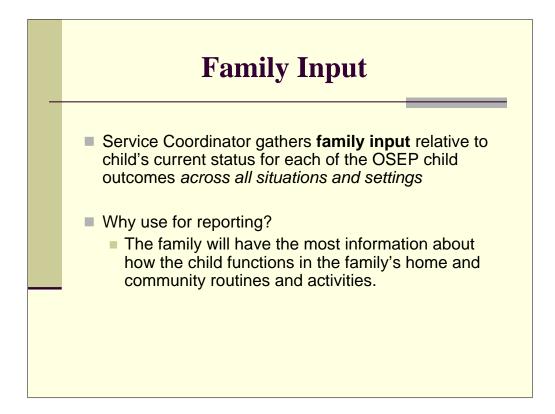
The family

Cross-walked items on the CBA

Early care educator – if there is one,

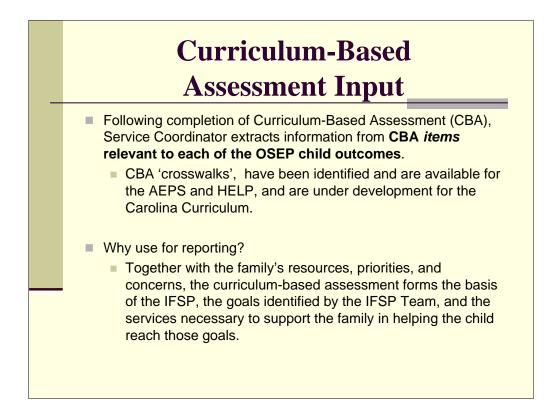
Any persons involved with the child such as the physician, an occupational therapist not contracted with BabyNet, etc., and

BabyNet service providers on the family's IFSP team through the COSF.



We will now take a closer look at the sources of information beginning with family input. The service coordinator gathers family input relative to the child's current status for each of the OSEP child outcomes across all situations and settings. For example at entry, the service coordinator addresses this information during the orientation and intake visit. At exit, family input may be extracted from service notes. Service providers include family information as well.

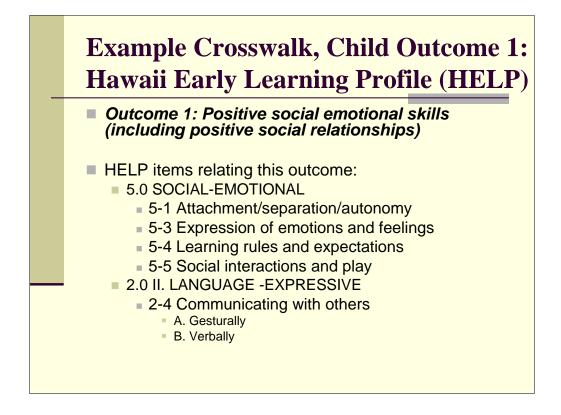
There are several reasons why we want to use information from the family. Most importantly, the family will naturally have the most information about how their child takes part in everyday routines and activities in their home and usual settings.



The service coordinator will also gather information from the Curriculum Based Assessment items that are 'cross-walked,' that is, related to each of the three child outcomes. Following completion of the CBA, the service coordinator will extract information from the CBA items that are relevant to each of the OSEP child outcomes. This information is contained in the document entitled 'CBA Cross-Walks', meaning these are assessment items that have been analyzed and determined by the authors of the CBA tool to correlate to the OSEP child outcomes.

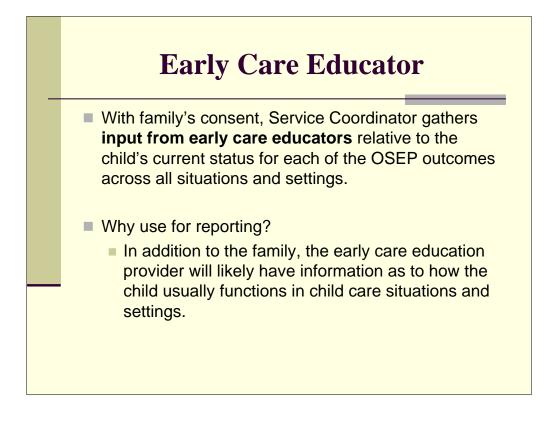
At this time cross-walks are available for the Assessment, Evaluation, and Programming System (AEPS) and the Hawaii Early Learning Profile (HELP); crosswalks are currently under development for other CBA tools and will be available for use in the near future as other CBA tools are approved by the state. In the next slide, we will see an example of cross-walked items for the HELP.

Why should we use information from the CBA? Together with the family's resources, priorities, and concerns, the Curriculum Based Assessment forms the basis of the IFSP, the basis for goals identified by the IFSP team and the services necessary to support the family in achieving these goals.

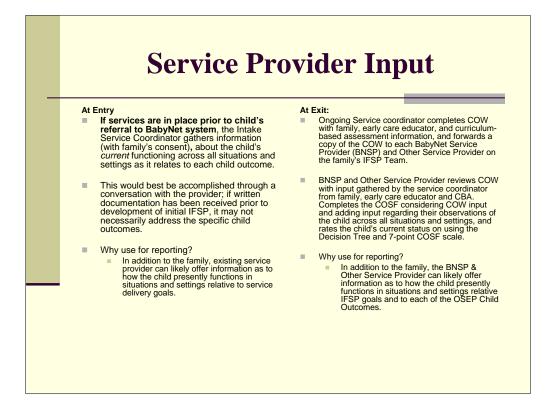


The following is an example Cross-walk for child outcome #1: Positive social emotional skills. It's taken from the Hawaii Early Learning Profile (HELP).

It is apparent by looking at these assessment items that a child's functioning on these items relate directly to that child's status in development of positive social emotional skills.



The service coordinator also gathers input from the early care educator if the child attends a daycare/child care setting. Early care educators are providers of child care and child development services. With the family's consent, the Service Coordinator obtains input from the early care educator related to the child's current status on each of the OSEP outcomes. Input from early care educators is important because they likely have information about how the child functions during a large part of the day, specifically about how the child functions in everyday child care situations and settings.

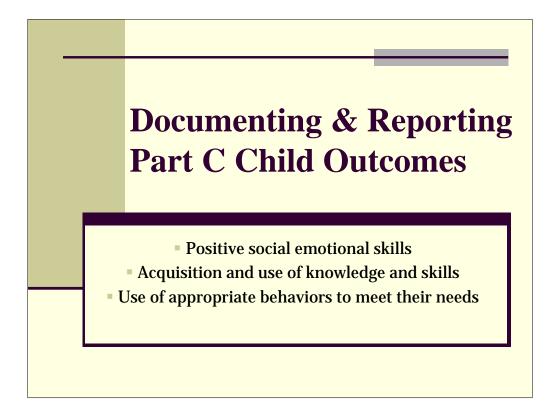


Finally, input is also obtained from service providers. Prior to entry into the BabyNet system, children may already be receiving services or they may have received a provider assessment. If so, the Intake Service Coordinator gathers this information, with family's consent, from the providers providing those services. Collection of information from service providers would best be accomplished at entry through a conversation with the provider, particularly if records are not received in time and/or if notes do not address child outcomes. It is likely at this point, since child outcomes are a new area to measure, that existing notes would not reflect status in all of these child outcome areas.

At exit, the ongoing Service Coordinator completes a COW with information from family, early care educator, and curriculum based assessment, and any other involved persons such as a Parents as Teacher Consultant, Physician, etc. A copy of the COW is forwarded to each BabyNet service provider on the family's IFSP team. Each service provider reviews the COW input gathered by the service coordinator. This is similar to reviewing and considering case history information in assessing the functional status of the child. The service provider then considers COW input and enters her/his input on the COSF; input must be based on the reviewed information as well as such documents as treatment notes, assessments, etc., relative to the three child outcomes across situations and settings. Documents may include observations or input from the family. The provider then uses all recorded data to rate the child's current status using the Decision Tree and 7 point scale. Further information in the next slides will review how a rating is determined using the decision tree.

Information from service providers contributes additional information as to how the child functions across situations and settings that relate to IFSP goals and the OSEP child outcomes.

Leslie Pyper will now tell us how all of the input, related to child outcomes, is to be documented.



LP - You have now heard about various sources of information which will be used to develop a picture of a child's functional status in relation to the three identified OSEP child outcomes.

The evaluation of this data will determine if our early intervention system (BabyNet) is helping children make progress in terms of:

Positive social emotional skills

Acquisition and use of knowledge and skills

Use of appropriate behaviors to meet their needs

Keep in mind that these identified outcomes are broad and cover a wide range of skills and behaviors. Many of your IFSP goals will address skills and behaviors that contribute to these OSEP outcomes. And hopefully, even if a child has not achieved one or more of his IFSP goals, he has made progress in these OSEP identified areas.

For example, maybe a child has IFSP goals relative to feeding himself, making choices of food and play activities, and riding in a carseat without great distress. Perhaps he has made progress on some of the skills necessary to feed himself – maybe he tolerates sitting for longer periods of time in the high chair, he touches some of the food in front of him, but he hasn't yet brought the food to his mouth. In terms of choices, he does choose foods and toys by touching them or pointing to them. And his resistance to riding in the carseat (screaming, kicking, arching his back...) has lessened and mom is usually successful in getting him buckled in within a couple of minutes. Other caregivers, however, have a more difficult time getting him into the carseat.

Since he has been engaged to a greater degree by his caregivers in communicating--- we see that he is able to make choices -

In looking at the broader child outcomes - many of these skills and behaviors reflect progress in the area of social - emotional development.

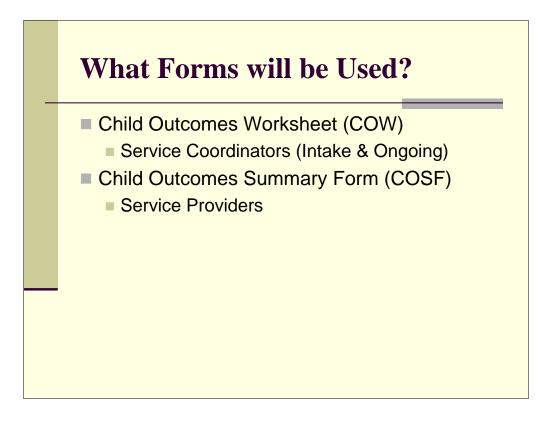
He also is demonstrating the acquisition and use of knowledge and skills (making choices, pointing, sitting independently for a longer period of time)

and he's using appropriate behaviors to meet needs (he's choosing the toys/foods that he wants).

So, we see progress on all three outcomes even though he may not have achieved his IFSP goals.

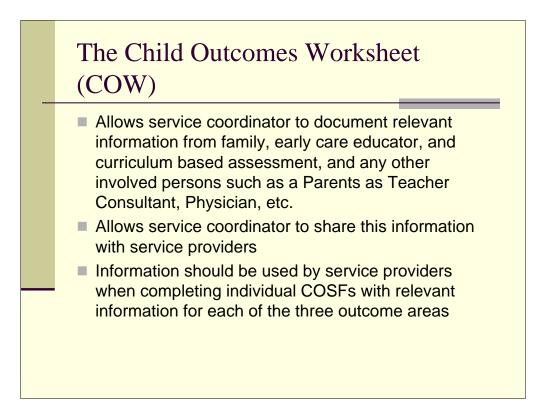
Many of the IFSP goals that you continue to work on with children will contribute to these OSEP identified outcomes. But many sources of information – in addition to the IFSP – are used in this process of determining the child's functional status with regard to these three OSEP outcomes.

We are now going to look at how to put together the information that has been gathered in order to document and report on the child's functional status.



There are two forms that will be used to assist with documenting and reporting child outcome data. The Child Outcomes Worksheet - COW - and the Child Outcomes Summary Form - COSF.

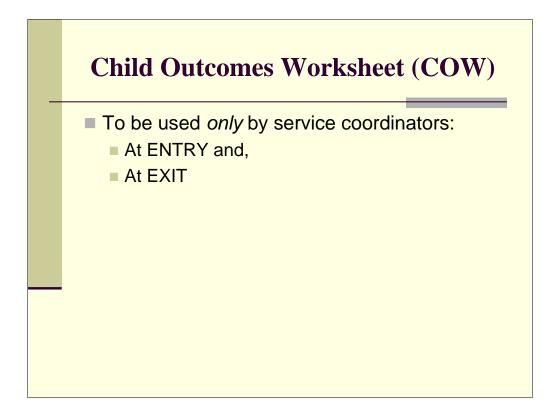
The COW should be completed ONLY by the SC; the COSF should be completed ONLY by BN service providers.



The COW provides a record of relevant information captured from the family, early care educator, CBA, and any other involved persons. These other persons could be a physician, a Parents As Teachers consultant, an "other" service provider, - basically, any person who has knowledge of the child's functional status.

This form provides a means of documenting pertinent information for the Entry Rating, and it provides a means of both documenting and sharing information for the Exit Rating process.

This form is to be completed only by SC's but it becomes a necessary resource for all BN service providers in completing the COSF for any child exiting the BN system.



The COW will be used for both Entry and Exit Ratings.

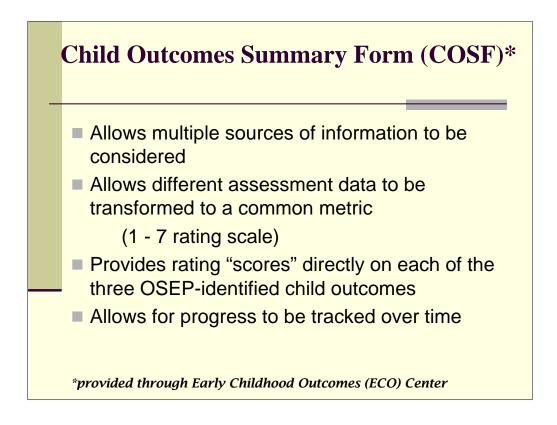
At Entry, the Intake Coordinator will complete the COw with information gathered from all relevant sources and will determine an Entry Rating.

At Exit, the On-going Service Coordinator will complete the COW with information from all relevant sources - again, these are, at a minimum, the family and crosswalked CBA items, but should include an early care educator if there is one, and ANY other providers or persons who have knowledge of the child's functional status.

This COW will be forwarded to each BNSP so that s/he can consider this information along with their own in determining a rating for each outcome.

	Examp	ole of COW
		Part C: Child Outcomes Worksheet (COW)
	Teacher Consultant, Physician, etc. AT	DRB only. This form should provide information from tank and ongoing documentation and carbound based assessment, and any other involved persons such as a Parents as ENTRY, mis form should be completed by the BNIC. AT EXIT, a copy of this form should be forwarded to all BabyNet Service Providers for the completing the COSP. If is laving with other supporting informations resulted documents.
	77	te BNSP should consider COW input when entering relevant input on the child outcomes summary form (COSF).
	Child Name:	DOB: ID:
	1. SOCIO-EMOTIONAL SKILLS To what extent does this child sh	; (INCLUDING SOCIAL RELATIONSHIPS) ow behaviors/skills related to this outcome appropriate for his or her age across a variety of settings and situations?
	Date: Sources: CBA	Summary of Reievant Information:
	Family Input	
	2. ACQUIRING AND USING KN To what extent does this child sh	INVLEDGE AND SKILLS we behaviors and skills related to this outcome appropriate for his or her age across a variety of settings and situations?
_	Date: Sources: CBA	Summary of Relevant Information:
	Family Input	
		1

This is an example of a COW filled out by a service coordinator. This information must be considered by BN service providers when completing the COSF and determining a rating for each child outcome.



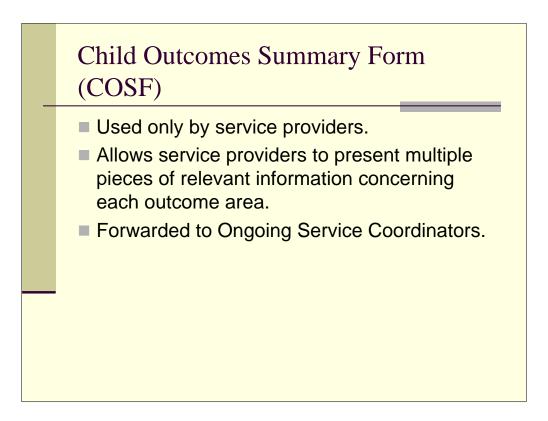
We are using the COSF (Child Outcome Summary Form) created by the Early Childhood Outcomes Center.

We call this the ECO Center.

We chose to use this form because it allows for multiple sources of information to be considered in measuring the outcomes. We take all the different sources of information that we have and synthesize them into one rating for each OSEP child outcome, using a common metric ( the 7 pt rating scale ). In the end, this provides us with one rating score for each OSEP identified outcome –

Another benefit of the COSF is that it allows us to track progress over time.

We do this by comparing the child's functional status rating at entry and at exit to see how much progress has been made in those three outcome areas.



The COSF is only used by service providers. The information captured on this form should reflect information shared on COW along with specific service provider relevant sources of information concerning each outcome area.

	<b>COSF Example for Outcome 3</b>					
 •						
Rating	Source of information	Date	Summary of Relevant Results			
	Candace's mom, per service notes	8/7/06	Mom reports that when Candace eats by herself she makes a big mess. She eats finger foods but does not use a fork or spoon. She uses a "sippy" cup with two hands. Mom reports that she has not begun to toilet train Candace. Candace does not let mom know when she has wet or soiled diaper. She pulls off her socks when getting ready for bed.			
	Candace's early care educator care provider, per service notes	8/8/06	Child care provider said that Candace is learning to use a spoon, but usually uses her fingers to feed herself. Candace uses diapers and tugs on diaper after it is wet or soiled.			
	Hawaii Early Learning Profile, per CBA provider and CBA cross-walk	Updated 8/11/06	Self-Help: Eating – 12-15 months Self-Help: Dressing – 15-18 months Self-Help: Grooming – 18-21 months Self-Help: Toileting <15-18 months			
	Service Provider (OT) per service notes	Service delivery weekly in child care over 9-week period	She clapped and jumped during a group song. During free play Candace tended to sit quietly unless engaged in a play activity by her caregiver. Candace did not object to having hands washed by caregiver but needed assistance.			

Here we have an example of the COSF filled out by a BNSP.

In completing this COSF, the provider has considered the following information from the COW:

information from the child's mother

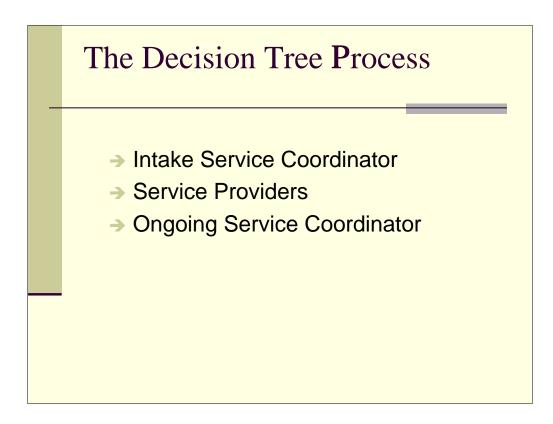
information from the child's early care educator

information from the CBA items relevant to this outcome, and

information from an "other" service provider (in this case, an OT) who has been providing services to the child (This could have been a PAT consultant, a physician, another provider not under contract with BabyNet, or any other person with relevant knowledge of the child's functional status.)

These pieces of information must be considered by the BNSP in their process of completing the COSF.

Next, you will see how the information is synthesized to determine a rating from 1-7.



A resource created by the ECO Center has been made available to you for the synthesizing process.

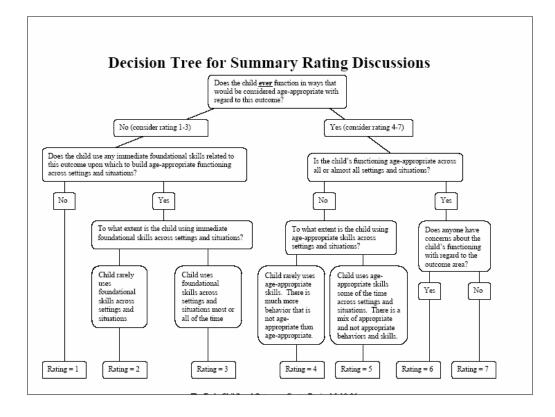
The Decision Tree is to be used:

by the intake SC in reviewing the COW information and determining an Entry Rating,

by BN service providers in completing the COSF, and

by the ongoing SC in synthesizing the provider COSFs and determining an exit rating score.

The Decision Tree enables you to easily come up with a rating score that matches the child's functional status. All you have to do is answer questions considering all of the pertinent information. Let's take a look at the Decision Tree.



Once you have all of the pertinent information in front of you (this information would vary according to your role ) you will answer questions as you move through this "tree".

For instance, a BNSP will consider all information from the family and the cross-walked CBA items, and potentially from an early care provider, including information concerning their own service area. S/he will read through the information and then answer the first question.

"Does the child ever function in ways that would be considered age-appropriate with regard to this outcome? So, let's say that we're looking at Outcome #1 – positive social emotional skills – and this child is 18 mos old.

Let's say the answer at entry is "NO".

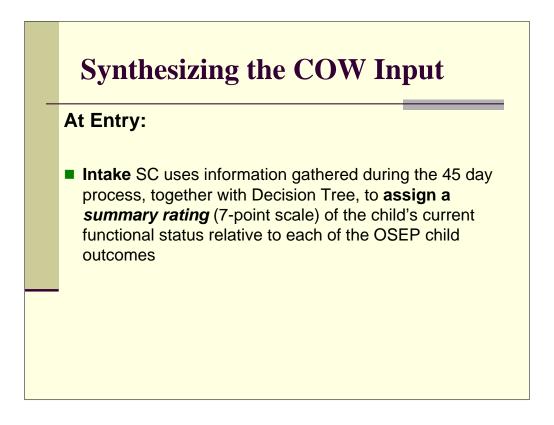
The next question to consider is "Does the child use any immediate foundational skills related to this outcome upon which to build age-appropriate functioning across settings and situations?"

Let's say the answer is "YES"

(Because the child makes eye contact with caregivers and smiles at familiar people...)

"To what extent is the child using immediate foundational skills across settings and situations?"

Our answer here is "Child uses foundational skills across settings and situations most or all of the time" – because these skills are seen by the family, the early care education staff, and the existing provider, as well as being noted on the CBA --- so our rating is #3.



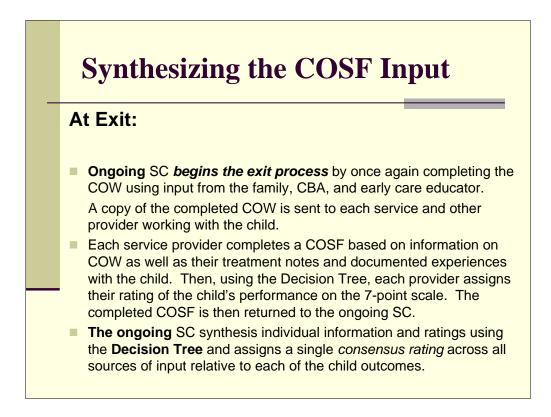
The synthesizing process is really a very simple one. What you are doing is considering information from all relevant sources – those who have some knowledge of the how the child functions – and you are using that information to answer the questions in the Decision Tree.

So, here is snapshot of the process at Entry ----

ENTRY: The Intake Coordinator has documented his/her conversations with the family, early care education staff (daycare providers), and the existing provider relevant to the three child outcomes.

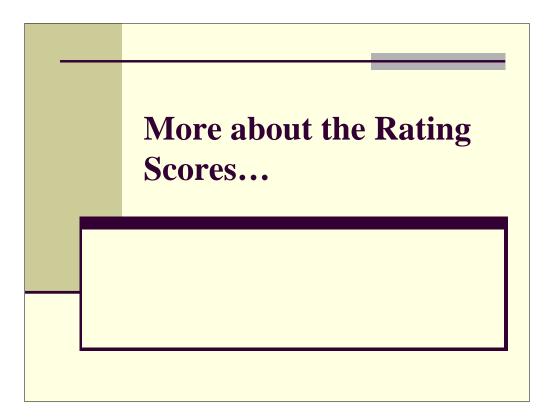
The Intake Coordinator has also completed, or arranged for the completion of, a CBA on this child, has highlighted the cross-walked items, and has gathered a wide variety of other information from various sources during this 45-day process.

The Intake Coordinator reviews all of the information together and uses the Decision Tree to synthesize. So, in essence, the Intake Coordinator is using all of this information to answer the questions in the Decision Tree relative to each of the three identified OSEP outcomes.

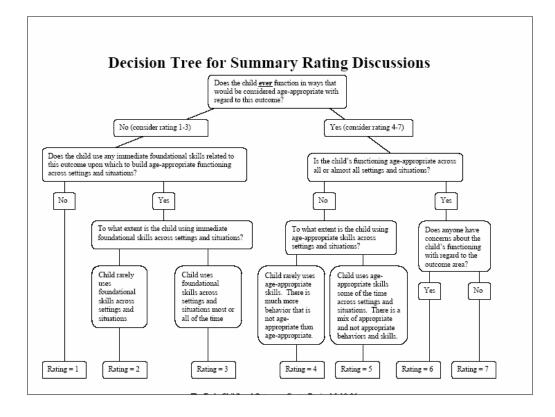


And here is the snapshot of the EXIT process ---

EXIT: The ongoing SC begins the process by completing a COW with information once again from the family, CBA, early care educator, and any other involved persons with knowledge of the child's functional status. NOTE that the SC does not include BN service providers' information. This is because the SC will send the COW s/he has just completed to all existing BN providers. The service providers will then use information from the COW along with their own treatment notes and documented experiences with the child to complete the COSF, and assign a rating. The COSF will be returned to the SC, who will then use the DECISION TREE to synthesize all of the COSFs received from BN providers and determine a consensus rating.



Using the Decision Tree you will arrive at a rating score based on the information you have available to you. You should have a copy of the Rating Scale that you printed out before beginning this training. This handout describes each rating score.



Again, here is the Decision Tree which basically leads you to a rating score based on the information that you have collected. Here's another example:

"Does the child ever function in ways that would be considered age-appropriate with regard to this outcome? So, let's say that we're looking at Outcome #1 – positive social emotional skills –

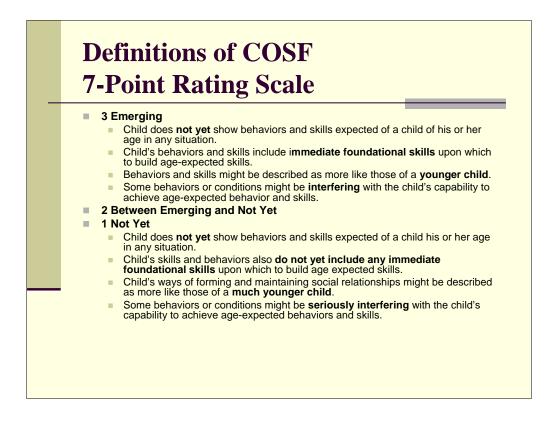
Let's say the answer at entry is "YES".

The next question to consider is "Is the child's functioning age-appropriate across all or almost all settings and situations?"

Let's say the answer is "YES"

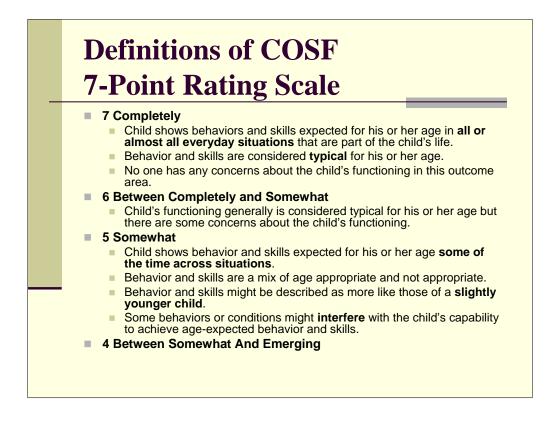
"To what extent is the child using age-appropriate skills across settings and situations?"

Our answer here is "Child uses age-appropriate skills some of the time across settings and situations. There is a mix of appropriate and not appropriate behaviors and skills. – --- so the rating is #5.

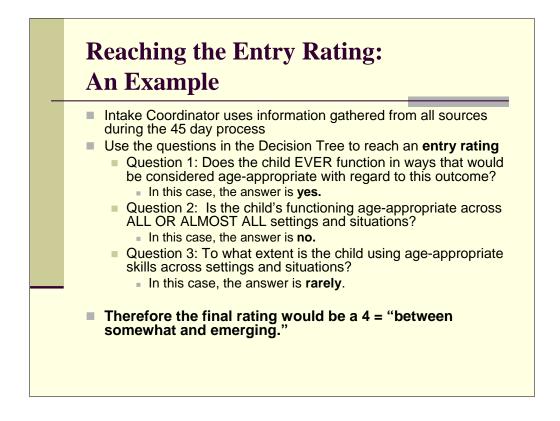


Here are definitions for the Rating Scale Scores.

Note that the scores from 1-3 correspond to the left side of the tree --- so if you answered the first question "Does the child EVER function in age-appropriate ways...?" and the answer is "NO" – then their score will always be a 1, 2, or 3.

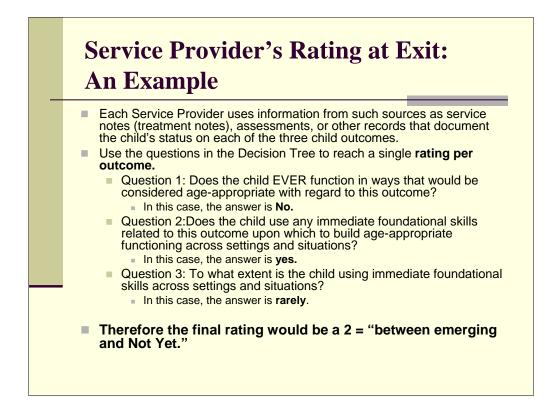


Note that the scores from 4 - 7 correspond to the right side of the Decision Tree --- so if that same question is answered with a "YES" (that the child does at times function in age appropriate ways) --- then the score will always be between 4 and 7.



Again, this shows the process of reaching an Entry Rating using all the information gathered and the Decision Tree.

Read through slide.



At exit, service providers complete the COSF, including information from the COW provided from the service coordinator for each child. The COSF documents the child's status on each of the three child outcomes.

In this example, the provider adds her/his information on the COSF about the child that relates to the child outcome, and documents the source of the information. The provider then reviews the information for that outcome and uses the Decision Tree to reach an outcome rating. The first question is: Does the child EVER function in ways that would be considered age-appropriate with regard to this outcome?

In this example, the answer is No.

Question 2:Does the child use any immediate foundational skills related to this outcome upon which to build age-appropriate functioning across settings and situations?

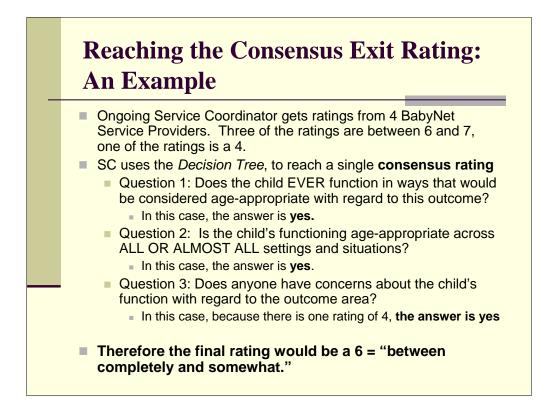
In this example, the answer is yes.

Question 3: To what extent is the child using immediate foundational skills across settings and situations?

In this example, the answer is rarely.

The rating is therefore a 2, or between emerging and not yet.

Leslie Pyper will now continue with an example of how the Ongoing Service Coordinator could reach a consensus exit rating.

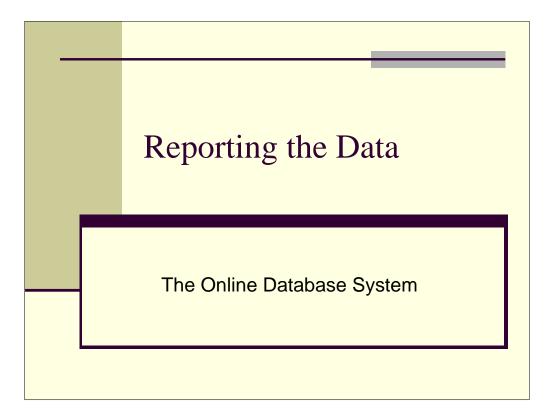


When a child is exiting BabyNet, information about his functional status must be collected. This is CRITICAL. Being able to use exit data to compare to entry data is the method used to measure our success as a system. This is then reported to the federal government. This information will help us make adjustments to our system over the coming years to improve services to children and families.

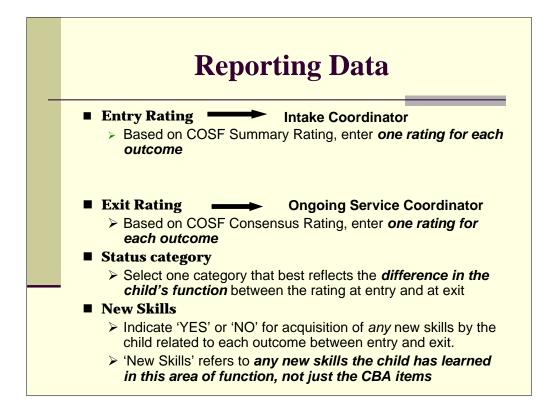
So, the child is about to exit the system. The SC has gotten multiple COSFs from providers. In this example, the SC has 4 COSFs, 3 of which show ratings between 6 & 7, and one that shows a rating of 4.

The SC will use the Decision Tree to synthesize all of this information into a consensus rating.

For this child, the answer to the first question about age-appropriate functioning is "yes" – so we're on the right side of the "tree" if you're looking at your handout. Question 2 is "Is the child's functioning age-appropriate across all or almost all settings and situations?" Again, looking at the information the SC has from the provider COSFs, the answer is "yes". This leads us to the next question – "Does anyone have concerns about the child's function with regard to this outcome area?" Clearly, because one of the providers rated the child a "4" which – looking at your Decision Tree -- corresponds to "rarely uses age-appropriate skills" there are concerns in this area --- so the final consensus rating would be a "6" because there are concerns.



Now we will discuss how the Intake and Ongoing BNSC will report the synthesized information from the Child Outcome Summary Worksheet into the online database system.



BNIC documents the team ENTRY rating during the development of the initial IFSP. The ENTRY rating is the only piece of information that the BNIC should submit into the online data system.

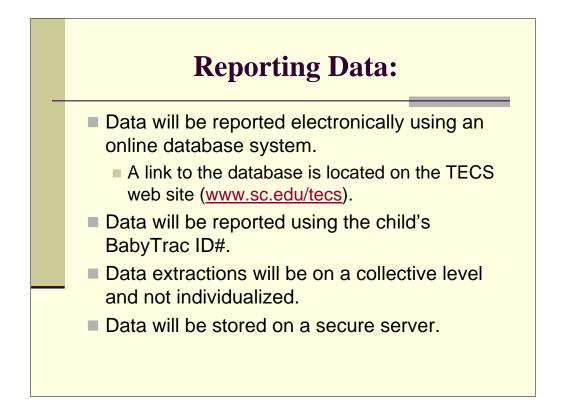
While,

The Ongoing SC will enter three pieces of information into the online data system: EXIT rating,

STATUS category at time of exit, (progress made between entry and exit) and

YES/NO to whether the child acquired any NEW SKILLS OR BEHAVIORS related to each of the three child outcomes at time of exit.

It is important to remember that all ratings entered into the online data system should be based on team input, however the BNSC is responsible for coordination and reporting during the rating process.



At EXIT, The consensus COSF rating will be reported into our online database system, located through a link on the TECS website. The online database will allow for electronic collection of data while supporting time efficiency for BSNCs. You will need to access the TECS website and click on the DATA link button. To access database you will need to enter the child's BabyTrac ID#, once the system recognizes ID# access will be granted and the submission process can begin. Be sure to print a copy of the page, then click submit at the bottom of the page.

If the child's BabyTrac ID # is not valid, access will not be granted to the online database system.

Any challenges with accessing the online database system can be addressed to Dr Wilson at lwilson@cdd.sc.edu with the subject line stating "Data Question". Be sure to specifically state issue and include proper contact information (i.e. your name, title, agency, and phone number). These responses will be addressed in a timely manner.

\*\*Note that the online database system is an interim step, as BabyTrac is being prepared to support the data reporting and recording efforts for child outcomes in the near future.

for Reporting Data:
During Database System Snapphot     Explore Child Outcomes     Targenzes befor we based on intral PSP of the child.     1: Unreaded and the stand of the concore # (n) limed on COSP.     Outcome 1: SOCIO-EMOTIONAL SELLES (SYCLUDENO SOCIAL PELATIONSHIPS) To what extent before the child store based on think outcome appropriate fick has of the store test age for on a variety of the stand on think outcome appropriate fick has on the store test age for on a variety of the stand and the file outcome appropriate fick has on the store test age for on a variety of the stand and the store come appropriate fick has on the store test age for on a variety of the stand and the store come appropriate fick has on the store test age for on a variety of the store test age for
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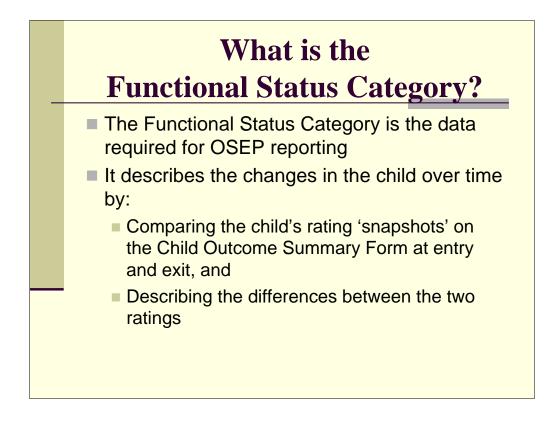
This is an example of how the online database system will appear once accessed. The entry data should be submitted by the BNIC while the exit data, status data, and skills/behavior data should be submitted by the BNOSC. Again the use of the online database submission is intended to foster greater levels of accuracy, efficiency, and ease for reporting child outcomes.

Note that FOUR pieces of information should be present prior to clicking the "SUBMIT" button at bottom right of screen.

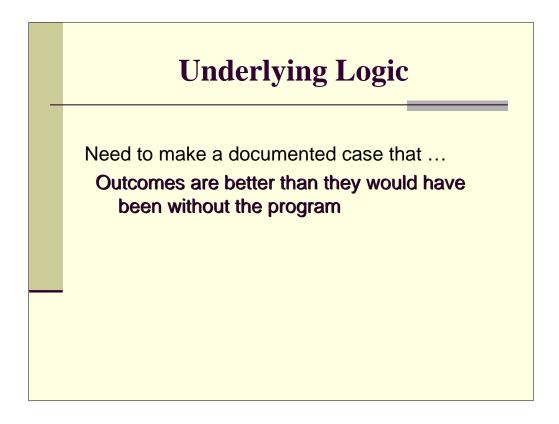
ENTRY DATA EXIT DATA STATUS CATEGORY NEW SKILLS/BEHAVIORS

Remember to enter the number of months enrolled in the BabyNet system.

Always remember to print the page prior to clicking submit.

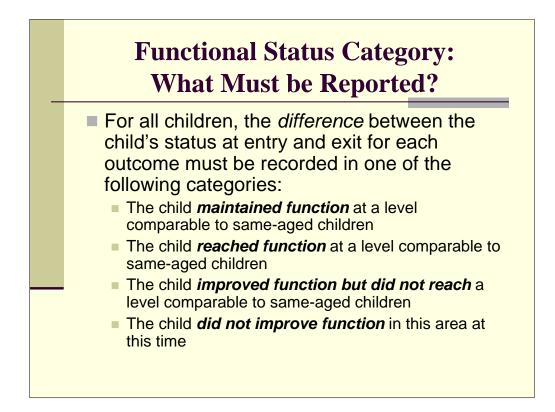


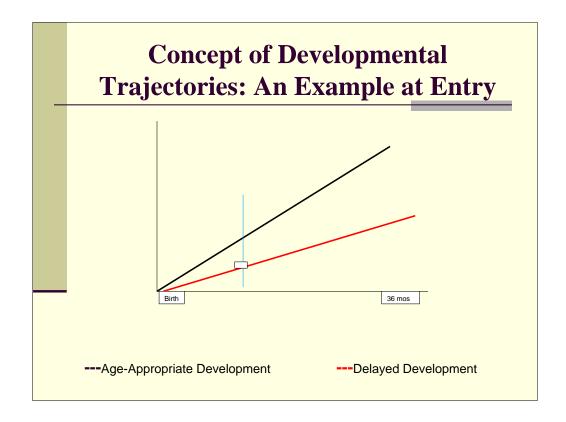
The functional status category is part of the exit data reported to the Office of Special Education Programs in Washington, and is shared with Congress on an annual basis. By comparing the entry and exit snapshots of the child relative to each of the child outcomes, the functional status category allows for reporting a description of the difference in the child's function over time; that is, how much and what kind of progress has been made by the child between entry and exit



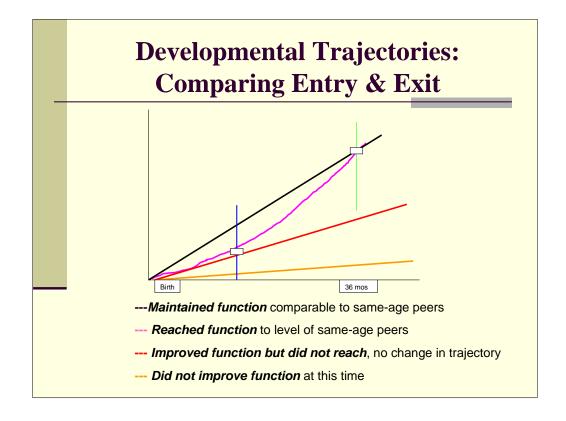
The logic of collecting and reporting the change in children's functional status is that this will establish ongoing documentation of the effects of participating in Part C services, relative to these three broad outcomes, are better than they would have been without participation.

We know that children will make developmental progress without intervention. The challenge is documenting that progress can be attributed to participation in Part C. The functional status categories allow us to report not just that children made progress, but also the nature of that progress, reflecting the benefit of participating in Part C.

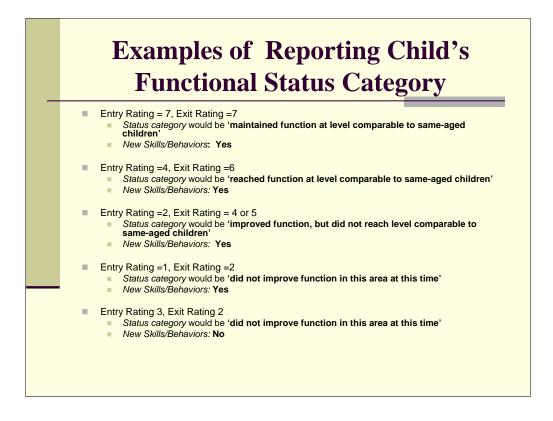




What is a developmental trajectory? This graph illustrates typical and atypical trajectories. Developmental trajectory assumes development occurs through a progress of milestones and timetables. Children with disabilities and/or delays in development are on a developmental trajectory that is outside of norms from infancy onward. They reach recognized milestones of development on a schedule that is unique to them, putting them out of sync with developmental expectations. In addition, they may be out of sync internally, with cognitive, language, and social-emotional development on separate and sometimes quite different timetables.

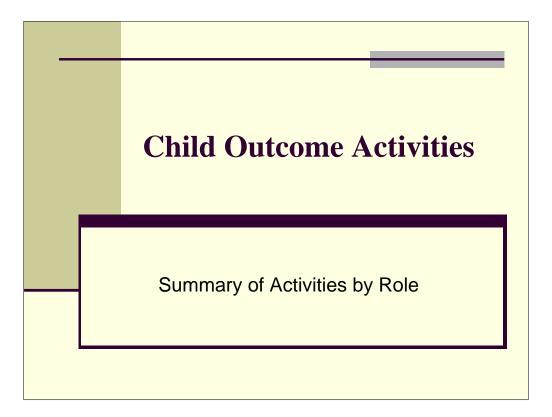


By comparing the Child Outcome Summary Form snapshot ratings at children's entry and exit from Part C, the effect of participation—what comes out of participation—in Part C supports and services can be described and documented. This graph illustrates each of the developmental trajectories required for reporting. The vertical lines represent the two snapshots of the child at entry and at exit. In this example, the child's Functional Status Category at exit would be reported as 'achieved functioning comparable to same age peers.' In other words, the if the child continued their development at the same rate they were before entering the program, they would have stayed on the the red line.

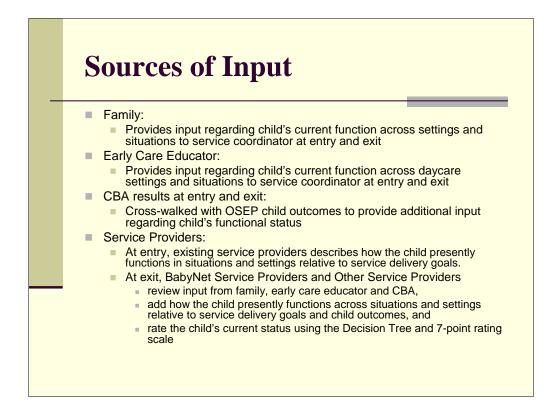


Here are some additional examples of how a child's functional status category might be reported at exit.

The examples highlight the ENTRY, EXIT, FUNCTIONAL STATUS, AND NEW SKILLS/BEHAVIORS DATA PORTS. These are the four pieces of information that should be included in electronic report prior to clicking SUBMIT at bottom of screen. It is also suggested that you print the final rating page prior to clicking "SUBMIT" button and include this hardcopy of page with rest of information concerning rating in the child's file.



We will now summarize all of the activities discussed so far. This review will include a breakdown of activities BY ROLE.



First we will begin with an overview of the persons or sources who will be supplying information to the service coordinator. The Service Coordinator is responsible for obtaining information regarding child outcomes from the family, early care educator, CBA, and service providers.

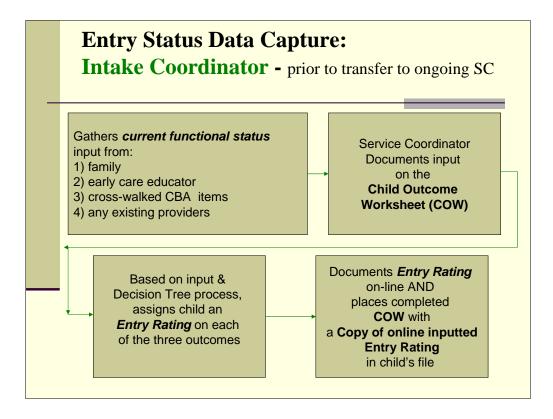
The family provides input to the service coordinator regarding the child's current function at entry and exit (remember that all service providers also obtain and report information from the family and include that in their COSF entries, as we will see in the last section below).

The early care educator provides input to the service coordinator regarding the child's current function in daycare settings at entry and exit

The service coordinator extracts information from the CBA, or receives it from the CBA provider, at entry and exit, regarding the child's function based on assessment items cross-walked with the OSEP child outcomes.

All other service providers submit information to the service coordinator at entry, and they use the COSF to provide input at exit. At entry, existing service providers describe how the child presently functions relative to service delivery goals. This is best conveyed with a conversation between the Intake Service Coordinator and existing service providers as mentioned earlier. At exit, service providers review all input sent by the Service Coordinator and complete the COSF with their input related to the child outcomes across situations and settings. Using the COSF, providers also rate the child's current status using the Decision Tree and 7-point scale.

Leslie will take a closer look at the Intake Service Coordinator's activities.



The Intake Coordinator:

Gathers all necessary information from all sources of input during 45-day SPOE process

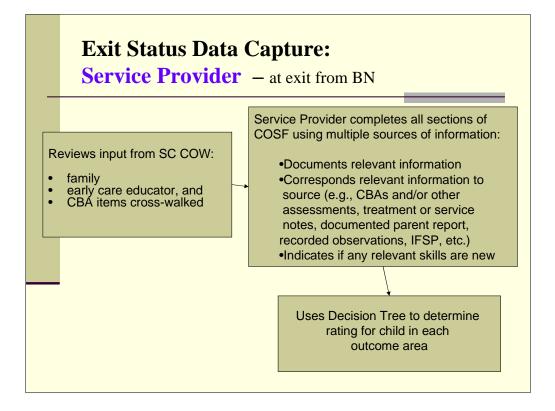
Completes the Child Outcome Worksheet (COW) on all three child outcomes

Uses the Decision Tree to determine a Summary Entry Rating for child in each outcome area

Documents Entry Rating in data system, prints on-line page, and

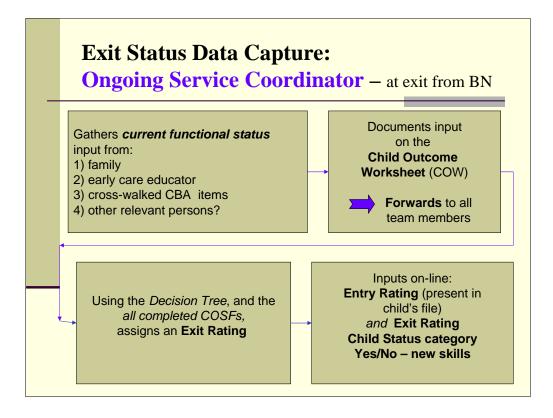
Files all supporting evidence as a part of child's BabyNet Educational Record

Now, you're going to hear from Lily once again as she describes the process for Service Providers...



The On-going Service Coordinator sends providers a COW containing input from each child's family, early care educator, and CBA, relevant to each child outcome. The provider reviews this information and completes all sections of the COSF for each child outcome. This includes documenting relevant information, documenting corresponding sources of information, and indicating if the child presents any new skills related to the child outcomes. The sources of information can include treatment notes, assessments, treatment notes that document parent report or observation, etc. The provider then uses the Decision Tree to determine a rating for the child in each outcome area.

Leslie will now continue with a summary of the Ongoing Service Coordinator's role.



Okay, so the child is about to exit the system. It could be that it's time to transition b/c he's nearing the age of 3, or it could be for other reasons that he's exiting the system. It doesn't make a difference in terms of collecting child outcome data. The process remains the same.

The Ongoing Service Coordinator:

Gathers input from the family, early care educator, cross-walked CBA items, "other" relevant persons and providers, and transfers this information to the COW. This document is sent to the existing BN Service Providers. They, in turn, use this information along with their tx notes and experiences with the child and family, to complete the COSF. They will determine a rating score.

These COSF documents will come back to the SC so that s/he can synthesize ratings & information from all providers.

The SC will use the Decision Tree to determine a Consensus Exit Rating for the child in each outcome area.

The last step of the process is critical.

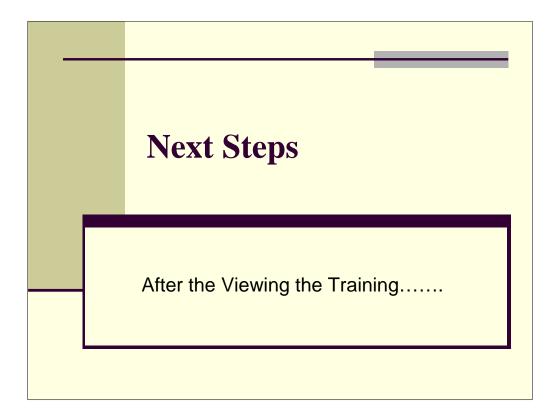
In the on-line database, the SC documents:

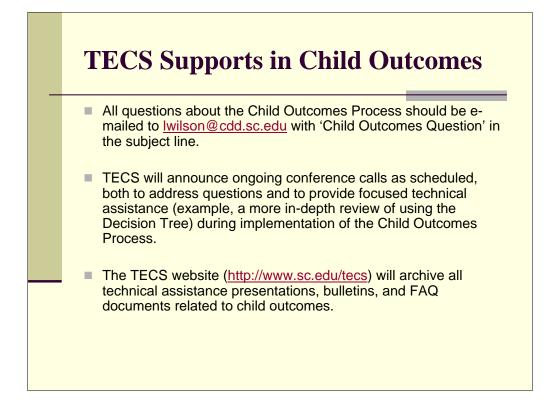
both the Entry Rating and the Exit Rating,

determines a current Functional Status Category for the child on each outcome, and

documents whether New Skills have been acquired by the child.

Earlier in the presentation you heard about functional status - that is, choosing whether the child maintained function, reached function, improved function, or did not improve function relative to same-age children. This is based on the comparison of the Entry and Exit ratings.



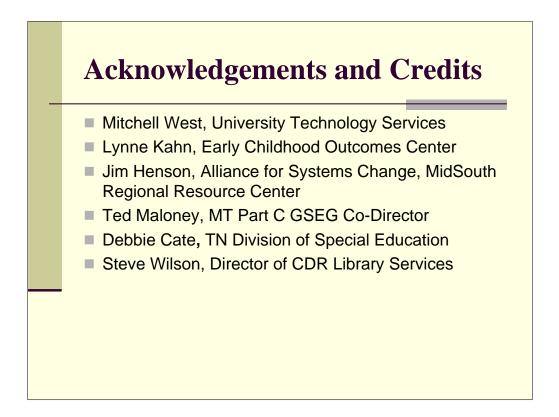


Add Q and A slides

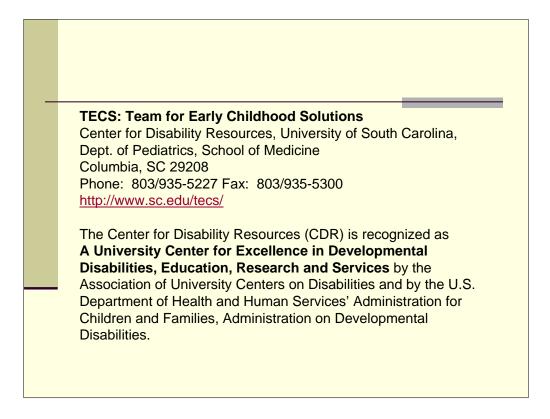
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To receive Credential credit for completion of this training, you must complete the evaluation form.

- The evaluation is located online. Click the link below to log in:
  - <u>http://CTLSilhouette.wsu.edu/surveys/ZS52</u> <u>265</u>



Special thanks is offered to the following individuals who have assisted TECS' staff in development of this training.



The following contact information is included for technical assistance following completion of this training.

(read statement regarding CDR)