

# Part C: Child and Family Outcomes Manual



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This document is for use in South Carolina’s BabyNet System.

<b>Contact Information</b>		
<b>Dr. Lesly Wilson,</b> Evaluation & Research Coordinator, Team for Early Childhood Solutions (TECS)	<b>Kristie Musick,</b> Director, Team for Early Childhood Solutions (TECS)	<b>Cheryl Waller,</b> Director & Interim Part C Coordinator Division of Children & Youth with Special Health Care Needs
USC School of Medicine, Dept. of Pediatrics Columbia, SC 29208 (803) 935-5217	USC School of Medicine, Dept. of Pediatrics Columbia, SC 29208 (803) 935-5242	SC DHEC, PO Box 101106 Columbia, SC 29211 (803) 898-0789
<a href="mailto:lwilson@cdd.sc.edu">lwilson@cdd.sc.edu</a>	<a href="mailto:kkmusic@gwm.sc.edu">kkmusic@gwm.sc.edu</a>	<a href="mailto:wallercj@dhec.sc.gov">wallercj@dhec.sc.gov</a>



*Note: TECS has been contracted by the Part C lead agency to capture and evaluate child and family outcomes data for the BabyNet early intervention system.*

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## INTRODUCTION

The purpose of this document is to provide the foundations and guidelines for collecting and reporting Part C outcomes for State Performance Plan indicators #3 and #4. This manual contains two sections. The *first section* provides the foundations, an overview of information regarding the required Part C Outcome Measures process. The *second section* provides the guidelines, an overview concerning the roles of Part C personnel during the child and family outcomes process. The guidelines section address child outcomes measurement procedures, instructions for assisting with completing the Early Childhood Outcomes Center (ECO) **Child Outcomes Summary Form (COSF)** and instructions for reporting the child outcomes ratings and information. A detailed review of the COSF use, Decision Tree, and Rating Scale as well as how to determine what assessment information to include on COSF are included in the guidelines section.

The family outcomes measurement procedures, instructions for assisting with completing the National Center for Special Education Accountability Monitoring (NCSEAM) **Family Survey** are also found in section two. The integrated guidelines cover the Part C Outcome Measure for the time period beginning August 2006.

*Note: This document will be revised to cover subsequent child and family outcome measures process updates per Office of Special Education Programs (OSEP).*

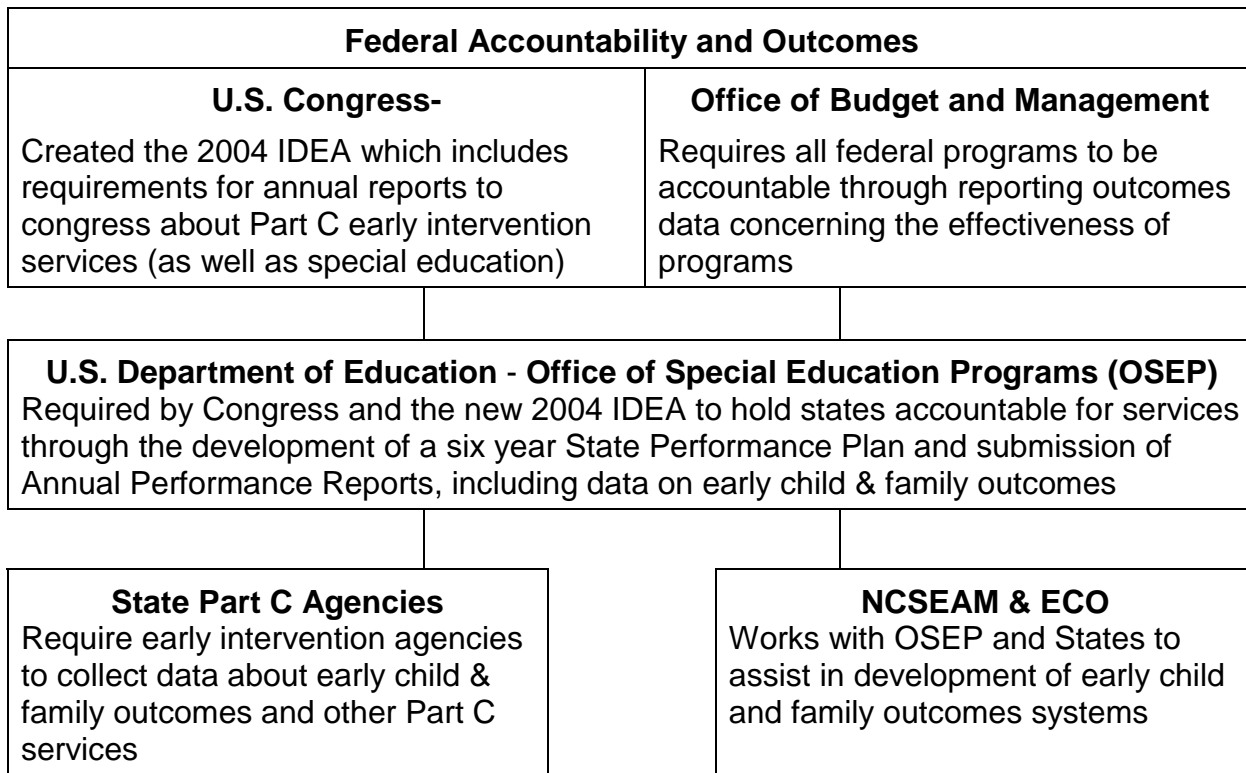
### Section 1: FOUNDATIONS FOR PART C OUTCOMES

#### 1.1 Why Do We Need To Record Part C Outcomes?

- ✦ **Age of Accountability:** Federal and State policy are continuing to require accountability for publicly funded programs. It has become increasingly important to know if and how services are achieving positive outcomes for children and families receiving early intervention services. Citizens are holding all levels of government accountable for how they are spending tax dollars. This is evident through such legislative actions as the No Child Left Behind Act (NCLB) of 2001 and the 2004 Re-authorization of Individuals with Disabilities Education Improvement Act (IDEA). These legislative pieces clearly established higher accountability requirements for early childhood services. Personnel serving infants and toddlers should be prepared to meet both the developmental specifications of the population and the legislative components of service delivery (Bruder and Dunst, 2005). Accountability is not just what services were provided and to whom, but what impact do those services have for children and families.
  
- ✦ **Data-Base Planning:** Capturing adequate and appropriate data concerning early intervention services can help individual BabyNet Service Coordinators (BNSCs), BabyNet Service Providers (BNSP), Part C agencies and the Part C lead agency direct system level enhancements. Outcome measures can provide valuable information as one component of data-based planning, tracking, and analyzing in relation to early intervention services. This data can also be used to determine training needs concerning child/family centered programs as well as to guide changes of policies/procedures within the BabyNet system. In addition, the outcomes data can be used to demonstrate to the public, South Carolina's Legislature, and Congress the results of their funding investments while creating opportunities to secure additional

funding for Part C services.

- ✦ **OSEP Part C Child and Family Outcomes for the State Performance Plan (SPP) and Annual Performance Report (APR):** Part C early intervention services in South Carolina are funded through a combination of State and Federal dollars. The Federal Part C funds are provided through the U.S. Department of Education's Office of Special Education Programs (OSEP) under the IDEA 2004 legislation. Congress requires OSEP to report the outcomes of all educational services, including Part C. In addition, the Office of Management and Budget (OMB) expects all federal programs to report outcomes data as part of justifying funding requests. As a result of increased accountability, OSEP has directed states to develop a six year State Performance Plan (SPP), and for the submission of Annual Performance Reports (APR) across 14 performance indicators. Child and Family outcomes are among those indicators. For more information on the South Carolina SPP visit: <http://www.scdhec.net/health/mch/cshcn/programs/babynet/docs/SC%202005%20SPP%20rev%2002-17-06.pdf>
- ✦ **Early Childhood Outcomes Center (ECO):** OSEP has funded the ECO center to assist states with early intervention training and technical assistance efforts. ECO has worked with Part B and Part C entities to develop a sophisticated process to track child and family outcomes. They have developed a family survey and child outcome tools (e.g. crosswalks and summary form) to assist states with capturing necessary data for APR. The ECO Child Outcomes Summary Form (COSF) provides a means by which providers can summarize information collected from multiple sources to address the child three outcomes. The COSF will be utilized by South Carolina to assist with capturing child outcomes within the BabyNet system. For more information visit: <http://www.fpg.unc.edu/~ECO/index.cfm>
- ✦ **National Special Education Accountability and Monitoring (NSEAM):** The NSEAM has developed a family survey to assist with capturing the process and impact components of perceptions of families participating in early intervention systems. NCSEAM has developed a Part C instrument that includes a scale that directly addresses the OSEP parent/family indicators as well as provides valuable information on other dimensions of families' perceptions. The NSEAM Family Survey will be utilized by South Carolina to assist with capturing the family outcomes within the BabyNet system. For more information visit: <http://monitoringcenter.lsuhs.edu/>
- ✦ **National Early Childhood Technical Assistance Center (NECTAC):** OSEP has funded the NECTAC to assist states with the development and implementation of child and family outcome processes. The NECTAC has made available numerous training tools and presentations as well as information related to the outcome measures process for individual states. For more information visit: <http://www.nectac.org/>



**1.2 Which Children are Included in Part C Child Outcome Measurements?**

- The outcome measurement process will be an ongoing process, phasing in a new cohort annually. Beginning August 2006 child outcomes data will be captured on all children completing initial IFSP process.

**1.3 Which Children are Excluded from Part C Child Outcome Measurements?**

- *All children will be captured in the system through electronic data input however, children older than 24 months of age at time of initial/baseline data entry process, will not be included in the OSEP reporting measures. It will be difficult to capture a true picture of developmental progress, since the BabyNet system designated points of service will not be best captured.*

**1.4 When & How will Children be Measured?**

Children will be measured at *entry* and *exit* of the BabyNet system. *Entry*, defined by South Carolina, is at completion of the initial IFSP, while *exit*, defined by South Carolina, is at completion of final IFSP or discharge/transition out of BabyNet system.

The first measure is the child's initial/baseline measurement. The second measure will be compared to the initial/baseline measurement in order to determine the child's level of progress while in the BabyNet system.

## **1.5 How will Part C Child & Family Outcome Progress be Publicly Reported?**

Just as NCLB 2001 focuses on accountability of public schools, IDEA 2004 requires that South Carolina's Part C lead agency (DHEC) report to the public how well the state performs relative to the APR indicators, including child and family outcomes. The state will report how each Part C partnering agency performed as compared with the statewide APR indicators.

### ***PART I: CHILD OUTCOMES***

## **1.6 What are the Part C Child Outcomes?**

### **✚ The Three Part C Child Outcomes:**

The child's progress through the early intervention system, concerning:

- a. Positive social-emotional skills (including social relationships);
- b. Acquisition and use of knowledge and skills (including early language/communication); and
- c. Use of appropriate behaviors to meet their needs.

## **1.7 What will be Measured for Part C Child Outcomes?**

✚ **First:** OSEP is requiring states to report children status at entry of early intervention system. For each of the above child outcome areas, states will report % of children at entry are:

- a. functioning at a level **comparable** to same-aged peers.
- b. functioning at a level **below** same-aged peers.

✚ **Second:** OSEP is requiring the following items be reported for each of the above child outcome areas, the % of children who:

- a. ***Did not improve functioning***
- b. ***Improved functioning, but not sufficient to move nearer to functioning comparable to same-aged peers***
- c. ***Improved functioning to a level nearer to same-aged peers but did not reach it***
- d. ***Improved functioning to reach a level comparable to same-aged peers***
- e. ***Maintained functioning at a level comparable to same-aged peers***

## **1.8 How Will Decisions About Part C Child Outcomes Be Made?**

✚ **The Child Outcomes Worksheet (COW) and Child Outcomes Summary Form (COSF):** South Carolina will utilize the COW and COSF to capture the functional status and or ratings of children across settings and situations for each child outcome (see Appendix B).

✚ **A Team Approach:** The BabyNet system will utilize a team approach for making decisions concerning Part C child outcomes. A team approach calls for a consolidation of interventions that cross-developmental areas (Bruder, 2000). A



COW will be completed for each child. Each service provider will complete the COSF using information from COW, which will be synthesized for the determination of a consensus rating. The BabyNet Service Coordinator (BNSC) working with the child and family, will be the primary responsible person for gathering all the information (e.g. assessment and evaluation results, observations of the child performance across settings and situations by individuals, including parents and other caregivers, who regularly interact with the child) and completing a consensus rating.

The primary purpose of the team approach is to pool and integrate the expertise of team members to provide more efficient and comprehensive assessment and intervention service (Bruder and Dunst, 2005).

## ***PART II: FAMILY OUTCOMES***

### **1.9 What are the Part C Family Outcomes?**

#### **↓ The Three Family Outcomes**

The family's view of help received through the early intervention system, concerning:

- a. Knowing their rights;
- b. Effectively communicating their children's needs; and
- c. Helping their children develop and learn.

### **1.10 What Will Be Measured for Part C Family Outcomes?**

OSEP is requiring the % of respondent families participating in Part C who report that early intervention services have helped the family:

- a. ***know their rights***;
- b. effectively ***communicate their children's needs***; and
- c. ***help their children develop and learn***.

### **1.11 How Often Will Families Be Surveyed?**

Family Outcomes will be collected annually. The families will be representative of children receiving early intervention services.

### **1.12 How Will Part C Family Outcomes Be Collected?**

South Carolina will be using the NCSEAM Family Survey Tool (see Appendix F) to collect information for reporting on the OSEP Part C Family Outcomes.

## 2. GUIDELINES FOR PART C OUTCOMES

### ***PART I: CHILD OUTCOMES***

#### **2.1 The Child Outcomes Worksheet (COW)**

The COW, originally developed by the Early Child Outcome Center (ECO), address the three child outcomes identified by OSEP.

##### **⚡ Key features of the COW that it:**

- Allows service coordinator to document relevant information from family, early care educator, and curriculum based assessment, and any other involved persons such as a Parents as Teacher Consultant, Physician, etc.
- Allows service coordinator to share this information with service providers
- Information should be used by service providers when completing individual COSFs with relevant information for each of the three outcome areas

#### **2.2. The Child Outcomes Summary Form (COSF)**

The COSF, originally developed by the Early Child Outcome Center (ECO), address the three child outcomes identified by OSEP.

##### **⚡ Key features of the COSF are that it:**

- Uses information from assessments and observations to get a **global** sense of how the child is doing.
- Does not prove to be an assessment.
- Considers the child's functioning **compared to other children of the same age**, their distance from typical, based on a rating scale.
- Considers what the child **generally does** across settings and situations, based on the child's **functioning**.
- Documents the child's movement toward typical development.
- Documents the extent of the child's progress.
- Provides a rating of the **overall sense** of the child's current functioning for the three child outcomes.
- Does **not** rate or summarize:
  - a. Information on the services provided to the child,
  - b. Family satisfaction with services, or
  - c. Information for planning for the individual child.
- Supports a team process to enrich decisions made concerning the child.
- Provides a concise explanation of **why** the child is functioning at a specific level.

#### **2.3 What Information should be gathered for completion of the COW and COSF?**

The summary information for the three child outcomes is expected to take into account the child's functioning across a full range of situations and settings the child typically experiences. Natural environments, as defined by Part C, are those places where the child would be—such as home, community, and other environments with his or her same aged peers (Bruder and Dunst, 2005). Developmental information needs to be collected from individuals in routine contact with the child. These individuals may include, but are not limited to parents and family members, care-givers, child care providers, therapists, service providers, teachers, and physicians. The following are *some* sources of information that should be included on COSF to assist in determining the child's status relative to the child outcomes:

- parent information, input, and observations,
- Special instructor's and other clinical observations,
- curriculum-based assessments, norm-referenced assessments and/or evaluations,
- all service providers notes about the child's performance in different situations and settings,
- progress made on IFSP outcomes/objectives, and
- developmental status notes identified in the IFSP planning, implementation and/or evaluation processes.

Below are detailed explanations of some of the above sources of information:

- ✦ **Parent Information and Input:** Parents and other family caregivers are the key source of information for developing an IFSP that reflects the child and family priorities and concerns. Family-centered practice is crucial to the success of any endeavor in early intervention (Bruder, 2000). Likewise, parents and family caregivers have unique insights about their child's capabilities across settings and daily routines. Families have the ultimate responsibility for giving care, supporting the child's development, and enhancing the quality of the child's life (Bruder and Dunst, 2005). Gathering information about children from parents concerning early child outcomes is an important and required component of the child outcome system, but this process should be invisible to parents. Parent information and input should be infused into the information gathering process as part of the steps for child assessment and development of the child's IFSP.

Parents should be informed that child outcome information is being collected as part of required systems accountability process. A brochure entitled, "*Helping Children and Families: The Part C Outcomes Partnership*" (See Appendix G), is to be shared and/or discussed with parents. It is important to share that the focus of outcomes is to evaluate the BabyNet system, not to focus on any one child, family, or provider.

- ✦ **Service Providers Information and Input:** This information should come from reports or assessments completed by BabyNet Service Providers (e.g. special instructor, CBA provider, occupational/physical therapist and speech/language pathologist), documentation concerning observations by others of the child, and documentation of conversations with service providers and the BSNC concerning the child. The Decision Tree (Appendix C) is to be used to assist providers with making individual rating decisions. Research suggests that family-centered care supports families in their caregiving role which promote the functional development of the child (Hanft, 1988).

Early child outcomes data should be a part of the routine information gathering and reporting that BabyNet Service Providers (BNSP) and BNSC already conduct when developing, implementing, and re-evaluating a child's IFSP process.

⚡ **Assessments.** Assessments are a useful source of information for reaching a summary rating decision, but assessment information alone should not be used to determine an ECO summary rating. Many assessments are domain-based and have not been designed to provide information about the child's functional behaviors or function across a variety of situations. Assessment findings should be placed in context with other information available about a child to determine the ECO summary rating decision for each child outcome area. Knowing that a child has or has not mastered assessment items that are related to the child's outcomes provides helpful information but this information should be used in conjunction with all other information and input concerning the child. "Crosswalk" tools have been developed by the ECO Center for commonly used early intervention assessments (e.g. HELP and AEPS) to assist team members, particularly CBA providers, with determining if child is demonstrating progress.

- **Understanding Usefulness of Crosswalks.** Crosswalks are tools used to identify specific assessment items that directly relate to child outcomes. These specific assessment items are categorized by child outcome and when repeated annually, can be used to help determine progress of outcomes. Service providers should reference related crosswalk items (see *Appendixes E & F*).
- **State Approved Assessments.** The approved and most commonly used instruments in South Carolina include: Hawaii Early Learning Profile (HELP); Assessment Evaluation & Programming System (AEPS); Insight Developmental Checklist; Oregon Project. Additional assessments will be considered as crosswalks are developed on a national level.
- **Across Settings and Activities of Daily Living.** Information about outcomes should reflect the child's current functioning across the typical settings and situations, which are a part of child routine activities of daily living. Answers about outcomes should convey the child's *typical* functioning across typical settings, not the child's capacity to function under ideal circumstances.

⚡ **NOTE: Assistive technology and typical accommodations.** If assistive technology or special accommodations are available in the child's everyday environments, then the outcome information should describe the child's functioning using those adaptations. As the number of assistive technology options increase, appropriate and comprehensive assessment of consumer needs and preferences become more critical (Scherer, 2005). However, if technology is only provided in some environments or is not available for the child, rate the child's functioning with the most common level of assistance that is commonly present. Answers are to reflect the child's *actual* functioning across a range of settings, not the child's capacity to function under ideal circumstances.

## **2.4 What Process will be used to Determine Part C Child Outcomes and Who will be Involved?**

The BabyNet System will use a team approach to complete the COSF. The BNSC, intake and or ongoing, will serve as the team leader. The team leader will be responsible for all information gathering, synthesis, and reporting functions. The team is defined as all providers of services for children and families, who have a thorough understanding of the child's development and or assessments.

### **✚ Child Outcomes Summary Form (COSF).**

*It is the responsibility of the BNSP to:*

- 1) gather all child status input relevant to service area and child outcome areas,
- 2) use the Decision Tree to determine rating,
- 3) record 7 point rating on COSF, and
- 4) forward copy of COSF to ongoing service coordinator.

#### **At Entry:**

Intake Service coordinator completes COW with family, early care educator, and curriculum-based assessment information. The Decision Tree and 7 point rating scale should be used to determine an entry rating from gathered information during initial IFSP process. The Entry Rating should be recorded in online database system. A copy of COW and online database system page is placed in child's record.

**\*\*If services are in place prior to child's referral to BabyNet system,** the Intake Service Coordinator gathers information (with family's consent) from existing provider(s), about the child's *current* functioning across all situations and settings as it relates to each child outcome. A conversation with the existing provider may be necessary to clarify information to specifically address the child outcomes.

#### **At Exit:**

Ongoing Service coordinator completes COW with family, early care educator, and curriculum-based assessment information, and forwards a copy of the COW to each BabyNet Service Provider (BNSP).

BNSP reviews COW with input from family, early care educator and CBA, provides input regarding their observations of the child across all situations and settings when completing the COSF and determines the child's current functional status using the Decision Tree and 7-point scale.

The child's BabyTrac "ID" is the child's ID number and should be included in online data input during Entry and Exit process. The team members' names, stated sources of information, and individual rating should be written legibly on COSF, as information will need to be readable for BNSC when used to determine the overall child outcome consensus rating.

- ✚ **Child Record Review.** At time of exit process, team members should review the child's record and all the information gathered related to the three early child outcomes for the child. The team members should use the COSF to submit relevant information and sources of information that support their individual rating

submitted to BNSC to assist with determining consensus rating.

- ✦ **Outcome Ratings Review.** The team should review the COSF rating definitions developed by ECO Center. The individual team member ratings and Decision Tree should guide the final rating decision reported by BNSC.

**2.4 What Should the BNSC Monitor?** The BNSC (intake/ongoing) is responsible for ensuring the completion of the child outcomes data process and entering rating decision data into the online data system. The BNSC should consider the following:

✦ **Does the information collected about child outcomes include:**

- Assessment information about the child's development,
- Assessment information reported in ways that reflect the child's development according to what children of a particular age are expected to do within their culture,
- Information about the child's functioning in different settings, situations, and across typical routines,
- If appropriate for the child, information about any assistive technology and/or accommodations available across settings that assist the child's functioning,
- Parent information related to outcomes about their child's abilities and progress,
- Professionals and other service provider's information and input related to the outcomes about the child's abilities and progress,
- Progress made on IFSP outcomes/objective,
- Developmental status notes identified in the IFSP planning, implementation and/or evaluation processes, and/or
- Information about the child's functioning related to the child outcomes from any other observations, notes, etc.

✦ **Team participation should include:**

- Reviewing the COW information provided by the BNSC about the child,
- Deciding if further information is needed or not for any child outcome,
- Entering an individual 7 point rating, using Decision Tree, for each child outcome, and
- Entering the information to the "Supporting evidence for answer to Question" for each child outcome. This includes:
  - Source(s) of the evidence,
  - Dates the evidence was collected (e.g., date of the assessment, last observation date, date of conversation with professional about child outcomes), and
  - Summaries of relevant results (e.g., the items most relevant to the specific outcome).

- ✦ **Future Collection.** Exit ratings, status categories, and acquisition of any skills/behaviors should only be completed during **Exit** process.

- ✦ **Definitions.** Use the **Definitions for Outcome Ratings Table** to make the rating for each child objective (see Appendix B).

- ✦ **Infants born prematurely.** For infants born prematurely, *do not adjust the child's chronological age* when reporting assessment scores for the purpose of measuring early child outcomes and comparison of the child's development with typical

development. The actual birth date of the child is compared to assessment date to determine the actual age of the child. This will better reflect the positive impact of early intervention services. It is acceptable to adjust for the child's age for IFSP planning and sharing assessment results with the parents and family members, if the assessment allows for age adjustment.

## **2.5 Where will the Child Outcomes Worksheet (COW) & Child Outcomes Summary Form (COSF) be Stored?**

- ✦ The COW and COSF for each child should be stored in each child's file.
  
- ✦ There will be a specific section just for these forms in each child's file.
  
- ✦ Consensus rating data will be stored in child's file and in online database system. Storing a copy of the online data entry and exit rating decisions in the child's file will ensure that the information is readily accessible. In order to complete exit process after the baseline, the BNSC and team should refer to the previously completed COW and other relevant information while completing the present rating form. This information should be readily available for accountability/monitor processes conducted by DHEC BabyNet system personnel.

## **2.6 How will the Child Outcome Data be Reported to BabyNet System for the Annual Program Report (APR)?**

The child outcome rating decision will be recorded on the original hard copies of COW and COSF, which will be located in the child's record. The overall rating decision (at ENTRY and EXIT) will be entered into the online database system by the BNSC at time of completion of IFSP process.

## **PART II: FAMILY OUTCOMES**

### **2.7 What is the Role of the BNSC and BabyNet Service Provider (BNSP) in the Family Outcomes Survey Process?**

The BNSC and BNSP will not have an active role in the data collection process for Family Outcomes. The Family Survey will be conducted ongoing using paper, online, and proxy methods to collect data. It is important that families complete Family Surveys in an objective manner, without biasing from BNSC or BNSP input. The BNSC and BNSP should be aware of the family outcomes data collection process and local contact persons who can assist families with the completion of the Family Survey (see Appendix F). The BNSC and BNSP **should not** assist families with any portion of the completion of the Family Survey. It is acceptable for BNSC or BNSP to refer all concerns or questions regarding the Family Survey to TECS at 803-935-5227 (contact-Leah Perry).

**References:**

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## APPENDIX A: Child Outcomes Worksheet (snapshot)

### Part C: Child Outcomes Worksheet (COW)

For Intake and Ongoing Coordinators

This form is for SERVICE COORDINATORS only. This form should provide information from family, early care educator, and curriculum based assessment, and any other involved persons such as a Parents or Teacher Consultant, Physician, etc. AT ENTRY, this 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 COSF. Note: This COW should be placed in child's file along with other supporting child outcomes related documents.

The BNSP should consider COW input when entering relevant input on the child outcomes summary form (COSF).

Child Name: \_\_\_\_\_ DOB: \_\_\_\_\_ ID: \_\_\_\_\_

#### 1. SOCIO-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS)

To what extent does this *child* show behaviors/skills related to this outcome appropriate for his or her age across a variety of settings and situations?

Date:	Sources:	Summary of Relevant Information:
	CBA	
	Family Input	

#### 2. ACQUIRING AND USING KNOWLEDGE AND SKILLS

To what extent does this *child* show behaviors and skills related to this outcome appropriate for his or her age across a variety of settings and situations?

Date:	Sources:	Summary of Relevant Information:
	CBA	

## **APPENDIX B: Instructions for Completing the Child Outcomes Summary Form**

This outcomes summary asks you to consider and report on what is known about how this child behaves across a variety of settings and situations. Children are with different people (for example, mother, big brother, babysitter) and in different settings (for example, home, grocery store, playground). The purpose of the summary is to get an overall picture of how the child behaves across the variety of people and settings in his or her life. For each of the three summary questions, you need to decide the **extent to which the child displays behaviors and skills expected for his or her age** related to each outcome area. Use the information on the following pages to help you answer the questions.

### **Directions:**

- Provide only **one** number for each outcome. Definitions for scale points 7, 5, 3, and 1 are provided on back of COSF. If the child's functioning falls between two of the defined points, select the number in between (e.g., 4).
- Children rated as 6 or 7 are considered as showing functioning typical for their age.
- If this form has been completed previously for the child, answer the question in the right column by checking yes or no.

### **To Help You Decide on the Summary Answer:**

- Answers are expected to take into account the child's functioning across a full range of situations and settings. Therefore, information from many individuals in contact with the child could be considered in deciding on an answer. These may include (but not be limited to): parents and family members, caregivers or child care providers, therapists, service providers, case managers, teachers, and physicians.
- Many types of information could be considered in selecting an answer. These may include (but are not be limited to): parent and clinical observation, curriculum-based assessments, norm-referenced assessments, service provider notes about performance in different situations, and progress and issues identified in the IFSP/IEP or individualized planning process.

- Depending on the assessment, assessments can be a useful source of information for reaching a summary rating decision but assessment information should be placed in context with other information available about a child. Many assessments are domain-based and were not designed to provide information about functional behaviors and functioning across a variety of situations. Knowing that a child has or has not mastered assessment items that are related to the outcome provides helpful information but the information should be used in conjunction with what else is known about the child. A high score on a set of items in a domain related to the outcome might not mean the child has achieved the outcome and, conversely, a low score might not mean the child has not achieved it.
- Answers should reflect the child's current functioning across the typical setting and situations that make up his/her day. Answers should convey the child's **typical** functioning across typical settings, *not* his/her capacity to function under ideal circumstances.
- If assistive technology or special accommodations are available in the child's everyday environments, then the answer should describe the child's functioning using those adaptations. However, if technology is only available in some environments or is not available for the child, rate the child's functioning with whatever assistance is commonly present. Answers are to reflect the child's **actual** functioning across a range of settings, *not* his/her capacity to function under ideal circumstances

### **Additional Information**

The outcomes reflects several beliefs about young children:

- It is important that all children be successful participants in a variety of settings both now and in the future. Achieving the outcomes is key to being successful participants.
- Programs for young children and their families are working to ensure that all children will have the best possible chance of succeeding in kindergarten and later in school – even though school might be several years off for some children. Children who have achieved the outcomes prior to kindergarten entry have a high probability of being successful in kindergarten.
- Learning and development occur continuously in the years preceding kindergarten. There is much variation in how children develop but children whose development is consistently below what is expected for their age are at risk of not being successful in kindergarten and later school years.
- For many children, the Summary questions will be answered more than once. The hope is that, with time, many children will show good progress and achieve a higher rating. The goal of high quality early childhood services is to help children develop and learn to the best of their abilities.

Note: The outcomes summary was not designed to determine eligibility for services. It would be inappropriate to use it in this way.



# APPENDIX C: COSF & 7 Point Rating Scale

## Part C: Child Outcomes Summary Form (COSF) For BabyNet Service Providers

This form is for BabyNet SERVICE PROVIDERS. This form should be used in conjunction with the COW to provide sources and a summary of relevant information within your service area concerning each of the three child outcomes. **AFTER COMPLETION**, this form should be forwarded back to the BabyNet Ongoing Coordinator. *Note: This COSF should be placed in child's file along with other supporting child outcomes related documents.*

Child Name: \_\_\_\_\_ DOB: \_\_\_\_\_ ID: \_\_\_\_\_

### 1. SOCIO-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS)

To what extent does this *child* show behaviors/skills related to this outcome appropriate for his or her age across a variety of settings and situations? Indicate by checking yes or no if any skills/behaviors are new since the last outcomes summary.

Rating (give only one rating using 7pt scale):	Sources:	Summary of Relevant Information:

Yes
No

### 2. ACQUIRING AND USING KNOWLEDGE AND SKILLS

To what extent does this *child* show behaviors and skills related to this outcome appropriate for his or her age across a variety of settings and situations? Indicate by checking yes or no if any skills/behaviors are new since the last outcomes summary.

Rating (give only one rating using 7pt scale):	Sources:	Summary of Relevant Information:

Yes
No

### 3. TAKING APPROPRIATE ACTION TO MEET NEEDS

To what extent does this *child* show behaviors/skills related to this outcome appropriate for his or her age across a variety of settings and situations? Indicate by checking yes or no if any skills/behaviors are new since the last outcomes summary.

Rating (give only one rating using 7pt scale):	Sources:	Summary of Relevant Information:

Yes
No

Provider signature (TYPE/PRINT): \_\_\_\_\_  
(Typed name signifies an official signature)

Date: \_\_\_\_\_

ECO Rating	Definition
7 Completely	<p>Child shows behaviors and skills expected for his or her age in <b>all or almost all everyday situations</b> that are part of the child's life.</p> <p>-Behavior and skills are considered <b>typical</b> for his or her age.</p> <p>No one has any concerns about the child's functioning in this outcome area.</p>
6 Between Completely and Somewhat	<p>Between Completely and Somewhat.</p> <p>Child's functioning generally is considered typical for his or her age but there are some concerns about the child's functioning.</p>
5 Somewhat	<p>Child shows behavior and skills expected for his or her age <b>some of the time across situations</b>.</p> <p>-Behavior and skills are a mix of age appropriate and not appropriate.</p> <p>-Behavior and skills might be described as more like those of a <b>slightly younger child</b>.</p> <p>Some behaviors or conditions might be <b>interfering</b> with the child's capability to achieve age-expected behavior and skills.</p>
4 Between Somewhat And Emerging	<p>Between Somewhat and Emerging</p>
3 Emerging	<p>Child does <b>not yet</b> show behaviors and skills expected of a child of his or her age in any situation. Child's behaviors and skills include <b>immediate foundational skills</b> upon which to build age expected skills.</p> <p>-Behaviors and skills might be described as more like those of a <b>younger child</b>.</p> <p>Some behaviors or conditions might be <b>interfering</b> with the child's capability to achieve age-expected behavior and skills.</p>
2 Between Emerging and Not Yet	<p>Between Emerging and Not Yet</p>
1 Not Yet	<p>Child does <b>not yet</b> show behaviors and skills expected of a child his or her age in any situation. Child's skills and behaviors also <b>do not yet include any immediate foundational skills</b> upon which to build age expected skills.</p> <p>-Child's ways of forming and maintaining social relationships might be described as more like those of a <b>much younger child</b>.</p> <p>-Some behaviors or conditions might be <b>seriously interfering</b> with the child's capability to achieve age-expected behaviors and skills.</p>



### 1. POSITIVE SOCIO-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS)

To answer the questions below, think about the child's functioning in these and closely related areas (as indicated by assessments and based on observations from individuals in close contact with the child):

- *Relating with adults*
- *Relating with other children*
- *Following rules related to groups or interacting with others (if older than 18 months.)*

### 2. ACQUIRING AND USING KNOWLEDGE AND SKILLS

To answer the questions below, think about the child's functioning in these and closely related areas (as indicated by assessments and based on observations from individuals in close contact with the child):

- *Thinking, reasoning, remembering, and problem solving*
- *Understanding symbols*
- *Understanding the physical and social worlds*

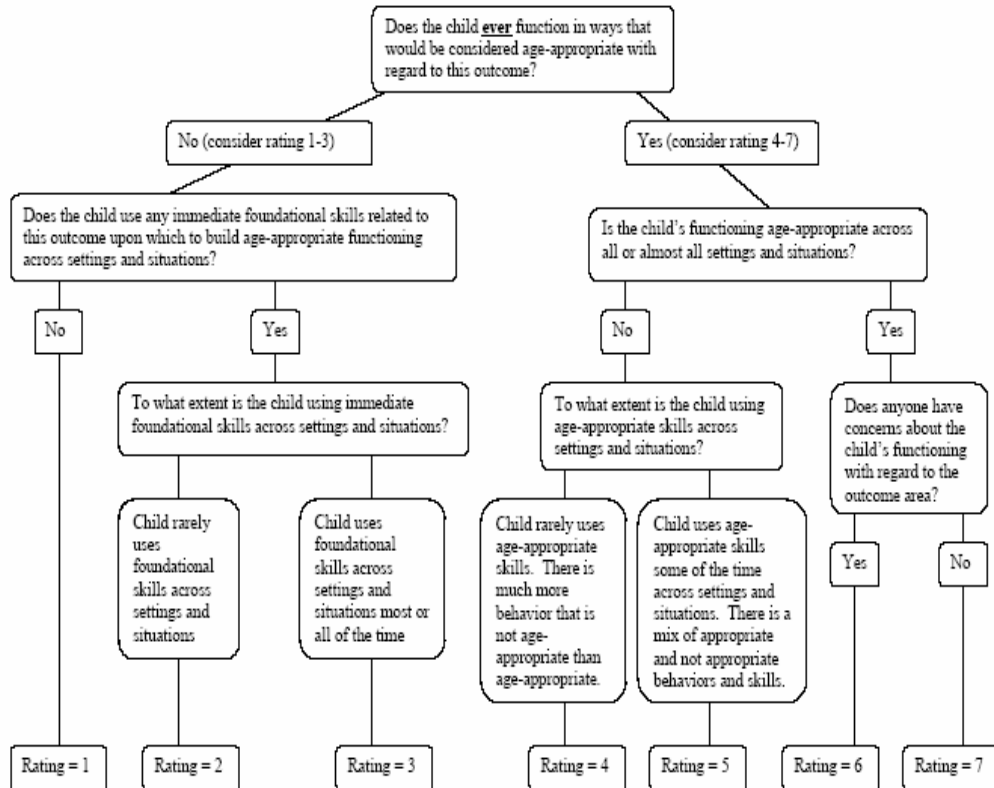
### 3. TAKING APPROPRIATE ACTION TO MEET NEEDS

To answer the questions below, think about the child's functioning in these and closely related areas (as indicated by assessments and based on observations from individuals in close contact with the child):

- *Taking care of basic needs (e.g., showing hunger, dressing, feeding, toileting, etc.)*
- *Contributing to own health and safety (e.g., follows rules, assists with hand washing, avoids inedible objects) (if older than 24 months)*
- *Getting from place to place (mobility) and using tools (e.g., forks, pencils, strings attached to objects)*

## APPENDIX D: Decision Tree Diagram

### Decision Tree for Summary Rating Discussions



The Early Childhood Outcomes Center Revised 5-10-06

## APPENDIX E: “Crosswalk”- AEPS

### Crosswalk for the Assessment, Evaluation, and Programming System (AEPS®) for Infants and Children, *Second Edition*

<b>Name</b>	Assessment, Evaluation, and Programming System (AEPS®) for Infants and Children, <i>Second Edition</i>
<b>Publisher</b>	Brookes Publishing
<b>Website Information</b>	<a href="http://www.brookespublishing.com/store/books/bricker-AEPS@/index.htm">http://www.brookespublishing.com/store/books/bricker-AEPS@/index.htm</a>
<b>Cost</b>	Volume 1: Administration Guide - \$55.00 Volume 2: Test Criteria for Birth to Three and Three to Six - \$70.00 Volume 3: Curriculum for Birth to Three - \$65.00 Volume 4: Curriculum for Three to Six - \$65.00
<b>Age range:</b>	Divided into two levels: Birth to 36 months and 36 to 72 months
<b>Purpose:</b>	To identify children’s strengths across developmental areas To identify functional goals and objectives for IFSPs/IEPs or other individualized plans To assist in planning and guiding intervention To monitor children’s progress  <i>NOTE:</i> The AEPS® can also be used during the eligibility process and can produce accountability data (e.g., for OSEP child outcome mandates)
<b>Areas included</b>	Fine Motor Gross Motor Adaptive Cognitive Social-Communication Social  <i>NOTE:</i> Addresses critical skills from content areas (e.g., Reading, Math, Science, Social Studies)
<b>Time to administer</b>	30 – 120 minutes  <i>NOTE:</i> Gathering information should be done across time and settings. The actual time to score the AEPS® varies depending upon familiarity with the AEPS®, the child being assessed, how many other team members are participating, and knowledge of typical development.
<b>Scored</b>	Teams score whether a child can independently meet the stated criteria, if the child needs assistance or can meet part of the stated criteria, or if the child can not yet perform or meet the stated criteria.
<b>Scores provided for</b>	Corroborating eligibility decisions, making IFSP/IEP and intervention decisions, monitoring child progress, and meeting accountability mandates

For more information contact Kristie Pretti-Frontczak ([kpretti@kent.edu](mailto:kpretti@kent.edu)) or David Allen ([dallen@moregon.edu](mailto:dallen@moregon.edu)) Version dated 11-15-05



<b>Age norms</b>	No  <i>NOTE:</i> While the AEPS® does not produce standard scores or percentage delays, through the use of Item Response Analysis, teams can use the AEPS® to corroborate eligibility decisions and meet accountability mandates.
<b>Age range given for items</b>	No  <i>NOTE:</i> The focus of the AEPS® is on what is individually and developmentally appropriate for a given child within the context of his/her family/community.
<b>How frequently can it be given</b>	Optimally 4 times a year  <i>NOTE:</i> Assessment should be seen as ongoing versus a point in time.
<b>Standardized tasks</b>	No  <i>NOTE:</i> Planned/scripted authentic assessment activities have been developed for use during the eligibility process and to assist with assessing groups of children during daily activities and routines.
<b>Based on observation in natural settings</b>	Yes
<b>Based on information requested from parents and providers</b>	Yes
<b>Data provided on reliability</b>	Interrater (both researchers and providers) and test-re-test
<b>Data provided on validity</b>	Concurrent validity, treatment validity, and social validity
<b>Web-based data entry</b>	Yes (test version)
<b>Electronic scoring</b>	Yes (test version)
<b>Other languages</b>	Spanish, French, and Korean
<b>Who administers</b>	Teachers, home visitors, specialists, educational assistants, caregivers
<b>Training</b>	Not required, but encouraged given the many aspects and features of the System. On-site consultation or national workshops lasting 1-2 days are routinely provided. See Brookes on Location for more information ( <a href="http://www.brookespublishing.com/onlocation/topics/AEPS®.htm">http://www.brookespublishing.com/onlocation/topics/AEPS®.htm</a> ).

For more information contact Kristie Pretti-Frontczak ([kpretif@kent.edu](mailto:kpretif@kent.edu)) or David Allen ([dallen@moreau.edu](mailto:dallen@moreau.edu)) Version dated 11-15-05

Crosswalk between OSEP Child Outcomes and the AEPS® Birth to Three (Level I)

Outcome 1: Positive social-emotional skills	Outcome 2: Acquisition and use of knowledge and skills	Outcome 3: Appropriate behaviors to meet needs
<p><u>Cognitive</u></p> <ul style="list-style-type: none"> <li>Solves common problems</li> </ul> <p><u>Social-Communication</u></p> <ul style="list-style-type: none"> <li>Turns and looks toward person speaking</li> <li>Follows person's gaze to establish joint attention</li> <li>Engages in vocal exchanges by babbling</li> <li>Gains person's attention and refers to an object, person, and/or event</li> <li>Vocalizes to express affective states</li> <li>Recognizes own name</li> <li>Quiets to familiar voice</li> <li>Carries out two-step direction without contextual cues</li> </ul> <p><u>Social</u></p> <ul style="list-style-type: none"> <li>Responds appropriately to familiar adult's affect</li> <li>Initiates and maintains interaction with familiar adult</li> <li>Initiates and maintains communicative exchange with familiar adult</li> <li>Uses appropriate strategies to self-soothe</li> <li>Participates in established social routines</li> <li>Initiates and maintains interaction with peer*</li> <li>Initiates and maintains communicative exchange with peer</li> </ul>	<p><u>Fine Motor</u></p> <ul style="list-style-type: none"> <li>Orients picture book correctly and turns pages one by one</li> <li>Copies simple written shapes after demonstration</li> </ul> <p><u>Cognitive</u></p> <ul style="list-style-type: none"> <li>Orients to auditory, visual, and tactile events</li> <li>Imitates words not frequently used</li> <li>Retains objects when new object is obtained</li> <li>Uses an object to obtain another object</li> <li>Navigates large object around barriers</li> <li>Solves common problems</li> <li>Uses imaginary objects in play</li> <li>Categorizes like objects</li> <li>Demonstrates functional use of one-to-one correspondence</li> <li>Recognizes environment symbols (signs, logos, labels)</li> <li>Demonstrates functional use of reading materials</li> <li>Demonstrates use of common opposite concepts</li> <li>Repeats simple nursery rhymes</li> </ul> <p><u>Social-Communication</u></p> <ul style="list-style-type: none"> <li>Uses consistent word approximations</li> <li>Carries out two-step direction without contextual cues</li> <li>Uses 50 single words</li> <li>Uses two-word utterances</li> <li>Uses three-word utterances</li> </ul>	<p><u>Adaptive</u></p> <ul style="list-style-type: none"> <li>Uses tongue and lips to take in and swallow solid foods and liquids</li> <li>Bites and chews hard and chewy foods</li> <li>Drinks from cup and/or glass</li> <li>Eats with fork and/or spoon</li> <li>Transfers food and liquid between containers</li> <li>Initiates toileting</li> <li>Washes and dries hands</li> <li>Brushes teeth</li> <li>Undresses self</li> </ul> <p><u>Cognitive</u></p> <ul style="list-style-type: none"> <li>Correctly activates mechanical toy**</li> <li>Reproduces part of interactive game and/or action in order to continue game and/or action</li> <li>Retains objects when new object is obtained</li> </ul> <p><u>Social-Communication</u></p> <ul style="list-style-type: none"> <li>Engages in vocal exchanges by babbling</li> <li>Gains person's attention and refers to an object, person, and/or event</li> <li>Uses consistent word approximations</li> <li>Uses 50 single words</li> <li>Uses two-word utterances</li> <li>Uses three-word utterances</li> </ul> <p><u>Social</u></p> <ul style="list-style-type: none"> <li>Meets observable physical needs in socially appropriate ways</li> <li>Participates in established social routines</li> </ul>

\*Excluded Objective 1.5 Entertains self by playing appropriately with toys

\*\* Excluded Objective 1.1 Correctly activates simple toy and Objective 1.2 Acts on mechanical and/or simple toy in some way

## APPENDIX F: “Crosswalk”- HELP

HELP® (Birth to 3) - 1-27-06

### Summary Information: Hawaii Early Learning Profile (HELP® Birth to 3, ©2004)

Publisher	VORT Corporation
Website for information	<a href="http://www.vort.com/products/help_overview.html">www.vort.com/products/help_overview.html</a>
Cost	\$50.05 administration and reference manual; \$3.25 each HELP® Strands booklet
Age range	Birth – 3 years (A product for 3-6 years is also available, see future posting of that crosswalk for more information)
Purpose	"HELP® (0-3) is a widely-used, family-centered, curriculum-based assessment for use by professionals working with infants, toddlers, and young children, and their families: As a curriculum-based assessment, HELP is not standardized; it is used for identifying needs, tracking growth and development, and determining 'next steps' (target objectives)."
Areas included	<ul style="list-style-type: none"> <li>• Regulatory/Sensory Organization</li> <li>• Cognitive</li> <li>• Language</li> <li>• Gross Motor</li> <li>• Fine Motor</li> <li>• Social</li> <li>• Self-Help</li> </ul>
Time to administer	Ongoing observation summarized periodically
Scored	Yes. Manual suggests approximate age-based levels of development in each strand or area based on the pattern of credit received on individual items in all areas except for regulatory/sensory organization. Number of atypical responses in the regulatory/sensory organization area can be used to cluster children into 3 groups (typical, over-reactive, or under-reactive), rather than associating skills with a specific developmental age range
Age norms	No
Age ranges given for items	Yes, based on normative data in research and literature
How frequently it can be given	Flexible

Note: Draft developed by the Early Childhood Outcomes (ECO) Center and revised based on preliminary feedback from users and the tool publisher and/or developers. The draft may be subject to further changes. We welcome your feedback to [staff@the-eco-center.org](mailto:staff@the-eco-center.org).

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## Summary Information (Continued): Hawaii Early Learning Profile (HELP® Birth to 3, ©2004)

Standardized tasks	No. Assessment guidelines include example observation opportunities provided for each skill and general assessment procedures given for each strand. Each skill/behavior has notes with criteria for assigning credit based on the child's behaviors with materials that are typically available within the child's natural environments. Examples of adaptations for children with specific kinds of disabilities or other special needs are included
Based on observation in natural settings	Yes. Observation in multiple settings preferred
Instructions related to parent role	Yes. Parent report and/or parent facilitation in eliciting skills are encouraged to most effectively see the child's capabilities
Data provided on reliability	Not available
Data provided on validity	Not available
Web-based data entry	No (under development)
Electronic scoring	No
Other languages	Spanish
Who administers	One or more interdisciplinary pediatric/early childhood specialists (e.g., teacher, nurse, occupational therapist, physical therapist)
Training available through the publisher	Yes

Note: Draft developed by the Early Childhood Outcomes (ECO) Center and revised based on preliminary feedback from users and the tool publisher and/or developers. The draft may be subject to further changes. We welcome your feedback to [staff@the-eco-center.org](mailto:staff@the-eco-center.org).

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**Hawaii Early Learning Profile (HELP® Birth to 3, ©2004):  
Crosswalk to Child Outcomes**

Outcome 1 Has positive social relationships	Outcome 2 Acquires and uses skills and knowledge	Outcome 3 Takes appropriate action to meet needs
<p><b>5.0 SOCIAL-EMOTIONAL</b> 5-1 Attachment/separation/autonomy 5-3 Expression of emotions and feelings 5-4 Learning rules and expectations 5-5 Social interactions and play</p> <p><b>2.0 II. LANGUAGE -EXPRESSIVE</b> 2-4 Communicating with others A. Gesturally B. Verbally</p>	<p><b>1.0 COGNITIVE DEVELOPMENT</b> 1-1 Development of symbolic play 1-2 Gestural imitation 1-3 Sound awareness and localization* 1-4 Problem solving A. Object permanence C. Cause and effect 1-5 Spatial relationships 1-6 Concepts A. Pictures B. Numbers 1-7 Discrimination/classification A. Matching and sorting B. Size C. Associative</p> <p><b>2.0 I. LANGUAGE - RECEPTIVE</b> 2-1 Understanding the meaning of words A. Objects, events, and relationships B. Body parts 2-2 Understanding and following directions</p> <p><b>2.0 II. LANGUAGE - EXPRESSIVE</b> 2-3 Expressive vocabulary 2-4 Communicating with others A. Gesturally B. Verbally 2-5 Learning grammar and sentence structure 2-6 Development of sounds and intelligibility 2-7 Communicating through rhythm</p>	<p><b>1.0 COGNITIVE DEVELOPMENT</b> 1-4 Problem solving B. Means-ends</p> <p><b>3.0 GROSS MOTOR DEVELOPMENT*</b> 3-1 Prone 3-2 Supine 3-3 Sitting 3-4 Weight-bearing in standing 3-5 Mobility and transitional movements 3-6. Reflexes/reactions/responses A. Reflexes/reactions B. Anti-gravity responses 3-7 Advancing postural control A. Standing B. Walking/running D. Climbing E. Stairs</p> <p><b>4.0 I. FINE MOTOR DEVELOPMENT- FOUNDATIONS*</b> 4-2 Grasp and prehension 4-3 Reach/approach 4-4 Development of voluntary release 4-5 Bilateral and midline skills</p>

Note: Draft developed by the Early Childhood Outcomes (ECO) Center and revised based on preliminary feedback from users and the tool publisher and/or developers. The draft may be subject to further changes. We welcome your feedback to [staff@the-eco-center.org](mailto:staff@the-eco-center.org).

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Outcome 1 Has positive social relationships	Outcome 2 Acquires and uses skills and knowledge	Outcome 3 Takes appropriate action to meet needs
	<p><b>4.0 I. FINE MOTOR DEVELOPMENT-FOUNDATIONS*</b> 4-1 Visual responses and tracking</p> <p><b>4.0 II. FINE MOTOR DEVELOPMENT-PERCEPTUAL-MOTOR INTEGRATION*</b> 4-6 Spatial perception and planning A. Pre-writing 4-7 Manipulative prehension A. Pages</p> <p><b>5.0 SOCIAL-EMOTIONAL</b> 5-2 Development of self</p>	<p><b>4.0 II. FINE MOTOR DEVELOPMENT-PERCEPTUAL-MOTOR INTEGRATION*</b> 4-6 Spatial perception and planning A. Pre-writing 4-7 Manipulative prehension B. Pages D. Scissors</p> <p><b>5.0 SOCIAL-EMOTIONAL</b> 5-2 Development of self</p> <p><b>6.0 SELF HELP</b> 6-1 Oral-motor development* 6-2 Dressing 6-3 Independent feeding 6-5 Grooming and hygiene 6-6 Toileting 6-7 Household independence/responsibility</p>

\* Precursor skills for functional behaviors. These skills may not be appropriate or expected for some children, including those with sensory, motor, or other impairments.

Note: Areas or strands that are not precursor to or components of any of the three outcomes, and therefore not included in the crosswalk, were:

0.0 Regulatory/Sensory Organization  
3.0 Gross Motor Development  
3-7 Advancing postural control  
C. Jumping  
F. Catching/throwing  
G. Riding a tricycle  
H. Balance beam

4.0 Fine Motor Development  
4-6 Spatial perception and planning  
B. Block construction  
C. Fomboard  
D. Paper activities

4.0 Fine Motor Development  
4-7 Manipulative prehension  
B. Pegboard  
C. Stringing beads  
6.0 Self-help  
6-4 Sleep patterns and behaviors

Note: Draft developed by the Early Childhood Outcomes (ECO) Center and revised based on preliminary feedback from users and the tool publisher and/or developers. The draft may be subject to further changes. We welcome your feedback to [staff@the-eco-center.org](mailto:staff@the-eco-center.org).

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## APPENDIX G: Online Database System Snapshots

### ENTRY PROCESS: BabyNet Child Outcomes

INTAKE SERVICE COORDINATORS ONLY, input the BabyTrac identification # and child outcomes ENTRY RATING (for each outcome area below). The responses should be based on the initial IFSP of the child.

1. List BabyTrac identification # (as listed on COW).

	▲
	▼
◀ ▶	▶ ◀

Outcome 1: SOCIO-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS) To what extent does this child show behaviors/skills related to this outcome appropriate for his or her age across a variety of settings and situations?

Data Points								
		1	2	3	4	5	6	7
2.	Entry Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Outcome 2: ACQUIRING AND USING KNOWLEDGE AND SKILLS To what extent does this child show behaviors and skills related to this outcome appropriate for his or her age across a variety of settings and situations?

Data Points								
		1	2	3	4	5	6	7
3.	Entry Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Outcome 3: TAKING APPROPRIATE ACTION TO MEET NEEDS To what extent does this child show behaviors/skills related to this outcome appropriate for his or her age across a variety of settings and situations? Indicate by checking yes or no if any skills/behaviors are new since the last outcomes summary.

Data Points								
		1	2	3	4	5	6	7
4.	Entry Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# EXIT PROCESS: BabyNet Child Outcomes

ONGOING SERVICE COORDINATORS ONLY, input the ENTRY AND EXIT child outcomes rating and information (for each outcome area below). The responses should be based on the initial IFSP and the final IFSP of the child.

1. List BabyTrac identification # (as listed on COSF).

Outcome 1: SOCIO-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS) To what extent does this child show behaviors/skills related to this outcome appropriate for his or her age across a variety of settings and situations?								
Data Points								
		1	2	3	4	5	6	7
2.	Entry Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Exit Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Outcome 1: Status Category, to be reported only at EXIT. Select one:

- maintained function at level comparable to same-aged children
- reached function at level comparable to same-aged children
- improved function but did not reach level comparable to same-aged children
- did not improve function in this area at this time

5. Outcome 1: Any new skills or behaviors related to taking appropriate action to meet needs since the last outcomes summary? To be reported only at EXIT. Select one:

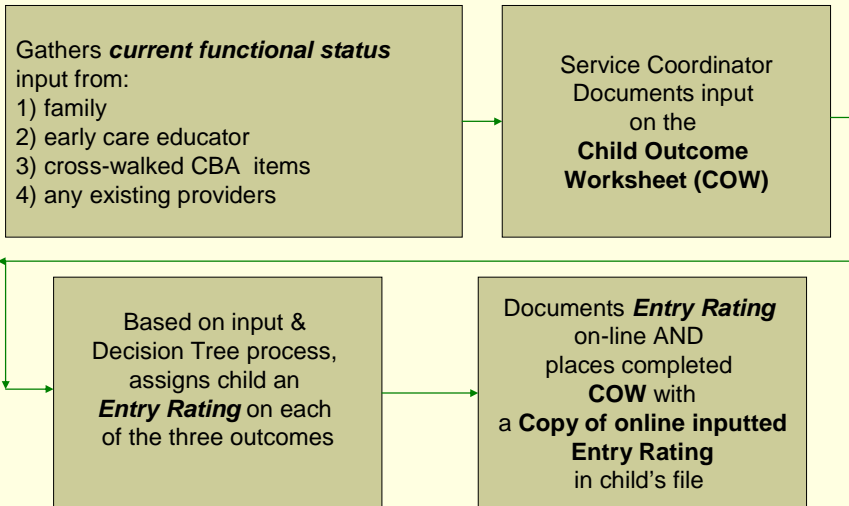
- Yes
- No



## APPENDIX H: Child Outcomes Process Diagram

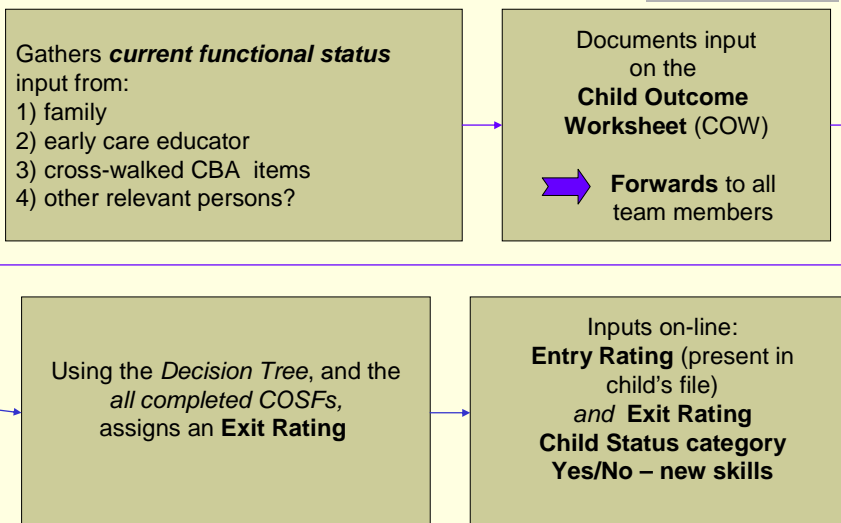
### Entry Status Data Capture:

**Intake Coordinator** - prior to transfer to ongoing SC



### Exit Status Data Capture:

**Ongoing Service Coordinator** – at exit from BN



# APPENDIX I: NCSEAM Family Survey

(SC will only use the Impact portion of NCSEAM survey, questions 26-51, to capture family perceptions)

		Very Strongly Disagree	Strongly Disagree	Disagree	Strongly Agree	Very Strongly Agree
<b>Impact of Early Intervention Services on Your Family</b>						
<i>Over the past year, Early Intervention services have helped me and/or my family:</i>						
26. - participate in typical activities for children and families in my community.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. - know about services in the community.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. - improve my family's quality of life.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
29. - know where to go for support to meet my child's needs.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
30. - know where to go for support to meet my family's needs.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
31. - get the services that my child and family need.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
32. - feel more confident in my skills as a parent.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
33. - keep up friendships for my child and family.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
34. - make changes in family routines that will benefit my child with special needs.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
35. - be more effective in managing my child's behavior.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
36. - do activities that are good for my child even in times of stress.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. - feel that I can get the services and supports that my child and family need.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. - understand how the Early Intervention system works.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. - be able to evaluate how much progress my child is making.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. - feel that my child will be accepted and welcomed in the community.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41. - feel that my family will be accepted and welcomed in the community.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42. - communicate more effectively with the people who work with my child and family.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. - understand the roles of the people who work with my child and family.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. - know about my child's and family's rights concerning Early Intervention services.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45. - do things with and for my child that are good for my child's development.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46. - understand my child's special needs.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47. - feel that my efforts are helping my child.		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48. State of Residence <input type="text"/>		51. Child's Race / Ethnicity				
49. Child's Age at Time of Survey Completion		1 <input type="radio"/> White				
1 <input type="radio"/> Birth to 1 year		2 <input type="radio"/> Black or African-American				
2 <input type="radio"/> 1 - 2 years		3 <input type="radio"/> Hispanic or Latino				
3 <input type="radio"/> 2 - 3 years		4 <input type="radio"/> Asian or Pacific Islander				
4 <input type="radio"/> Over 3 years		5 <input type="radio"/> American Indian or Alaskan Native				
50. Child's Age When First Referred to Early Intervention		6 <input type="radio"/> Multi-racial				
1 <input type="radio"/> Birth to 1 year		<i>For Office Use Only</i>				
2 <input type="radio"/> 1 - 2 years		<input type="text"/>				
3 <input type="radio"/> 2 - 3 years		<input type="text"/>				
--Thank you for your participation.--						



***Helping Children and Families:  
The Part C Outcomes Partnership***



**South Carolina Department of Health and Environmental Control**

***IDEA, Part C Lead Agency— BABYNET***

### **Purpose of Part C Outcomes:**

Part C outcomes will help measure benefits of the BabyNet system. This information will help BabyNet provide the best possible services to children and families. It will also allow South Carolina to meet federal reporting needs.

### **The Part C Outcomes:**

The Office of Special Education Programs (OSEP) has set up child and family outcomes for all states. There are three Part C child outcomes, which match children's development to that of children their same age. The following **outcomes** are focused on children:

- having positive social relationships,
- acquiring and using knowledge and skills, and
- taking appropriate action to meet their needs.

There are three Part C family outcomes, which measure the family's view of help received through the early intervention system. The following **outcomes** are focused on families:

- knowing their rights,
- effectively communicating their children's needs, and
- helping their children develop and learn.

### **The Part C Outcome Measurement:**

The outcome measures process will begin in August 2006 and will be ongoing. The first outcome measurements will set up child and family baseline measures for South Carolina. The baseline/initial collection cycle includes: *Children who complete the Individual Family Service Plan (IFSP) process after August 2006.*

Information from the parents, service coordinators, service providers, etc. is gained with the Child Outcomes Worksheet and Child Outcomes Summary Form (COSF)-- developed by the Early Childhood Outcomes Center (ECO).

The National Special Education Accountability Monitoring (NSEAM) Family Survey is the tool being used to capture the perceptions of the impact that BabyNet services related to outcome areas. Surveys are available in paper, online, or by proxy. The Part C Outcome Measurement process is to evaluate the BabyNet system, without focusing on any one child, family, or provider.

### **Public Reporting:**

The 2004 Individuals with Disabilities Education Act (IDEA) requires that South Carolina's Department of Health and Environmental Control (DHEC) publicly report how well the state performs relative to all Annual Program Report (APR) indicators, including the child and family outcomes. DHEC will also report how each Part C partnering agency performed as compared with the statewide APR indicators. This information will be made available through multiple forms of media for public review.

## **BabyNet System Partners**

- SC Department of Health and Environmental Control (DHEC)
- SC Department of Disabilities and Special Needs (DDSN)
- SC Department of Education (DOE)
- SC School for the Deaf and Blind (SCSDB)
- SC Health and Human Services (HHS)
- SC Department of Insurance
- SC Department of Mental Health (DMH)
- SC Department of Social Services (DSS)
- Head Start
- Office of First Steps
- PRO-Parents
- Family Connections

## **Team for Early Childhood Solutions (TECS) is.....**

- Located at the University of South Carolina, School of Medicine, Center for Disability Resources.
- The statewide training and technical assistance support for all BabyNet system personal.
- The administrator of the Early Intervention Credential.
- The administrator of the eHealth Network support for allied health service providers.
- The leader of research activities concerning best practices in early intervention service delivery for BabyNet.

**TECS OFFICE # 803-935-5227**



## **TECS SUPPORTS FOR OUTCOMES PROCESS:**

- All questions about the Child Outcomes Process should be e-mailed to [lwilson@cdd.sc.edu](mailto:lwilson@cdd.sc.edu) with 'Child Outcomes Question' in the subject line.
- All questions about the Family Outcomes Process should be e-mailed to [lwilson@cdd.sc.edu](mailto:lwilson@cdd.sc.edu) with 'Family Outcomes Question' in the subject line.
- TECS will announce ongoing conference calls as scheduled, both to address questions and to provide focused technical assistance (example, a more in-depth review of using the Decision Tree) during implementation of the Child Outcomes Process.
- The TECS website (<http://www.sc.edu/tecs>) will archive all technical assistance presentations, bulletins, and FAQ documents related to child outcomes.

## **ACKNOWLEDGEMENTS & CREDITS:**

- **TECS STAFF**
  - Lily Nalty, M. A., CCC-SLP, Allied Health Network Technical Assistant Specialist
  - Leslie Pyper, M. S., Technical Assistance Specialist
  - Suzan Albright, M. Ed., Technical Assistance Specialist
  - Libby Horton, Special Projects Manager
  - Leah Perry, BS, Administrative Assistant
  - Glynda York, Database Management Support BabyNet Credential
- Mitchell West, University of South Carolina, University Technology Services
- Lynne Kahn, Early Childhood Outcomes Center
- Jim Henson, Alliance for Systems Change, MidSouth Regional Resource Center
- Ted Maloney, MT Part C GSEG Co-Director
- Debbie Cate, TN Division of Special Education
- Steve Wilson, Director of CDR Library Services