Army

Educational & Developmental Intervention Services

~EDIS~

Measuring Outcomes Initiative

Module Two

May 2008

Module Two	Army EDIS Measuring Outcomes Initiative
Slides	*Slide Notes & Background Information*

<table>
<tr>
<td>

Child Outcomes

**Completing the EDIS
Child Outcomes Summary Form (COSF)**

**Army EDIS
Measuring Outcomes Initiative**

Module Two

Army Educational and Developmental Intervention Services

1
</td>
<td>

SLIDE 1:

This is the second of three training modules for the EDIS Measuring Outcomes Initiative.

Module one provided an overview of the Measuring Outcomes Initiative, including why measuring outcomes is important. Also included was a general introduction to the child and family outcomes.

Module two covers child outcomes and module three covers family outcomes.
</td>
</tr>
<tr>
<td>

Objectives

Participants will…

1. understand assessment of functional outcomes.
2. learn how to complete the Army EDIS Child Outcomes Summary Form (COSF).
3. be familiar with the resources available to assist with completion of the Army EDIS COSF.
4. understand the team process for completing the Army EDIS COSF.
5. be able to enter child outcome data in the EDIS data system (Special Needs Program Management Information System - SNPMIS).

Army Educational and Developmental Intervention Services

2
</td>
<td>

SLIDE 2:

Module Two Objectives (review objectives).

This module specifically addresses the child outcomes, child outcome data collection, and completion of the Child Outcomes Summary From (COSF).
</td>
</tr>
</table>

Functional Outcomes

- Outcomes
  - *Results* of Early Intervention.
  - Different from IFSP outcomes.

- Functional
  - Skills used meaningfully in the *context* of day-to-day life.
  - Integrated behaviors to achieve goals.
  - Not discrete behaviors.

Army Educational and Developmental Intervention Services

3

👉 Child outcomes are being measured for all children birth to 5 years of age receiving services under IDEA. Across the Department of Defense (DOD), outcomes are being measured for children receiving early intervention services (0-3).

👉 From this point forward, outcomes referred to in this module are the three broad functional outcomes being measured not individualized IFSP outcomes.

Outcomes:
- Outcomes referred to in the Measuring Outcomes Initiative are the benefits that children and families experience as a result of early intervention support and services.
- The three child outcomes, as measured for accountability purposes, are different than IFSP outcomes as they reflect global functioning in three broad areas of development (social-emotional, knowledge and skills, getting needs met), whereas IFSP outcomes are specific to an individual child, based on his or her individual needs.

Functional:
- Each outcome is a snapshot of the whole child; the status of the child's current functioning; and the child's functioning across settings and situations.
- The three child outcomes are functional outcomes in the sense that they refer to behaviors, knowledge, and skills that are meaningful to children in their everyday lives. The outcomes refer to actions that children need to be able to carry out or to knowledge that they need to have in order to function successfully across a variety of settings and ultimately to be successful in kindergarten and later in school.

Source: What is a Functional Outcome? ECO DRAFT 4-30-07
http://www.fpg.unc.edu/~eco/pdfs/Functional_outcomes.pdf

Think Functionally *within age-expected bounds*

Not just…	But does he/she…
■ Shows a skill in a specific situation	■ Use a skill in actions across settings & situations to accomplish something meaningful to the child
■ Makes eye contact, smiles, & gives a hug	■ Initiate affectionate interaction toward caregivers & respond to others' affection
■ Points at pictures in a book	■ Engage in play with books by pointing at & naming pictures
■ Uses a spoon	■ Use spoon to scoop up food & feed self at meals

Army Educational and Developmental Intervention Services

4

Functional outcomes emphasis 'meaning.' To explore functionality ask:
♦ Can the child carry out meaningful behaviors in context?
NOT
♦ Can the child perform discrete behaviors such as knowing 10 words, smiling at mom, stacking 3 blocks, using a pincer grasp, walking backward?

Understanding children's functional abilities requires observation of the child in natural settings to learn:
♦ What does the child usually do?
♦ What is his actual performance across settings and situations?
♦ How does the child use his/her skills to accomplish tasks?

The assessment of functioning is *NOT* about:
♦ The child's capacity to function under unusual or ideal circumstances, skill by skill, domain by domain.
♦ The child's performance in a structured testing situation, in a standardized way.

The left column of this slide represents discrete behaviors. Discrete behaviors (e.g., those described by some items on assessment instruments) may or may not be important to the child's functioning on the outcome. Individually, they are not especially informative. Summed, they may or may not be useful, depending on the functionality of the behaviors/items.

Think about isolated behaviors and what observing them tells you about the child.

For example, suppose an assessment instrument asks you to observe whether or not a child can point:

♦ If you know that a child can point, do you know that the child *can* communicate her wants and needs?
♦ If you know that a child can't point, do you know that the she *can't* communicate her wants and needs?
♦ How does knowing about pointing help you understand how the child takes action to meet needs? What is the intent of the child's point – how is the child using pointing?

The right column of this slide represents functional behaviors – behaviors that are meaningful in context. Functional outcomes refer to behaviors that integrate skills across domains. Accordingly, functionality can involve multiple domains.

Source: What is a Functional Outcome? ECO DRAFT 4-30-07
http://www.fpg.unc.edu/~eco/pdfs/Functional_outcomes.pdf

Isolated or Functional?

1. Knows how to imitate a gesture when prompted by others.
2. Uses finger in pointing motion.
3. Uses 2 word utterances
4. Watches what a peer does and incorporates it into his play.
5. Points to indicate wants or needs.
6. Engages in back and forth verbal play exchanges with caregivers using 2-word utterances.

Army Educational and Developmental Intervention Services

5

Measuring Child Outcomes

COSF – Key Features

- It is **not** an assessment tool.

- It uses information from assessments & observations to get a global sense of how the child is functioning across settings/situations at one point in time.

- 7-point rating scale.

- Ratings are based on the child's functioning compared with what is expected given the child's age.

Army Educational and Developmental Intervention Services

6

Five Reporting Categories:
   a) % who did not improve functioning.
   b) % who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers.
   c) % who improved functioning to a level nearer to same-aged peers but did not reach it.
   d) % who improved functioning to reach a level comparable to same-aged peers.
   e) % who maintained functioning at a level comparable to same-aged peers.

SLIDE 5:

👥 *Think About*
Look at the list of skills. Which are examples of isolated skills? Which are examples of functional skills?

1=isolated, 2=isolated, 3=isolated,
4=functional, 5=functional, 6=functional

Source: What is a Functional Outcome. ECO DRAFT 4-30-07
http://www.fpg.unc.edu/~eco/pdfs/Functional_outcomes.pdf

SLIDE 6:

Measurement refers to the method or tool used to collect the data. For the Army EDIS Measuring Outcomes initiative, we will be using an adapted version of the Child Outcomes Summary Form (COSF) developed originally by the Early Childhood Outcomes (ECO) Center.

The COSF is not an assessment tool. Rather, it is a process that provides a common metric for describing children's functioning compared to age expectations in each of the three outcome areas. The COSF provides a way for a team to summarize the child's level of functioning using information from many sources including assessment tools and parent and provider reports. (Outcomes 101: ECO Q&A)

The data collected for each outcome are condensed into a rating on a 7-point scale. The data from the 7-point scale are then converted into data used to report the information per the five reporting categories:

These progress categories are calculated from the COSF rating plus the progress (yes/no questions).

Check out the COSF to OSEP calculator to learn more:
http://www.fpg.unc.edu/~eco/pdfs/COSF_to_OSEP_Calculator_TUTOR%2010-24-06.xls

Progress of children with special needs is being compared to expectations for same age peers because typical developmental has a general progression that can serve as an age-anchored scale. To merely record that children made progress between entry and exit, would not provide strong evidence for the effectiveness of the program. It is recognized that not all children will be able to function comparable to same age peers at the end of early intervention services, but the system will now be tracking how many have achieved or moved closer to functioning at an age expected level. (Outcomes 101: ECO Q&A)

Measuring Child Outcomes

Key Points

- Children can be described with regard to how close they are to age expected behavior for each of the three outcomes.

- Most children in the general population demonstrate the outcomes in an age-expected way.

- By providing services and supports, early intervention is trying to move children closer to age-expected behavior.

- Some children will never achieve this.

Army Educational and Developmental Intervention Services

7

These key points reflect beliefs about young children and programs for young children. In addition, these points highlight the foundational thinking that went into the development of the COSF.

Describing children with regard to age expected behavior for each of the 3 outcomes provides an age anchored scale conveying the child's standing relative to typical development. In addition, the COSF includes questions about progress so that incremental progress is recognized.

The focus of early intervention programs is:
- "to enhance the development of infants and toddlers with disabilities,
- to minimize their potential for developmental delay, and
- to recognize the significant brain development that occurs during a child's first 3 years of life" IDEA 2004.

Early intervention programs are intended to produce better developmental outcomes than would have been attained without such services.

One of the greatest challenges to measuring outcomes is the fact that early intervention serves children with many different kinds of delays and disabilities, including those with short-term difficulties to those with extremely serious, long-term health and developmental consequences. For children with very serious conditions, the best possible outcome might be retaining whatever skills and capabilities the children have or even preventing or lessening regression of skills. For some children, intervention will help them acquire new skills at a faster rate so that they will move closer to or even achieve the kind of functioning displayed by their same age peers. Other children may acquire new skills but will still display some degree of developmental delay. In fact, some of these children, such as children with Down syndrome or other established conditions associated with a high probability of delay, will gain skills but at an increasingly slower rate. Even with good quality intervention, these children may fall farther behind their age peers each year. Intervention will lessen the extent of delay that would be expected to emerge, as these children get older. (Comments from the Early Childhood Outcomes Center on Proposed Indicators for Child and Family Outcomes, ECO 5/9/05).

It is acknowledged that there will be children who do not make progress or even regress. This is anticipated to be a small percentage of the children in early intervention. However, until these data are collected the percentage is impossible to know. These will be the children in reporting category "a."

Essential Knowledge
for Completing COSF

Between them, team members must:

I. **Understand general age expectations for child development.**

II. **Understand the content of the three child outcomes.**

III. **Know how to use the COSF rating scale.**

Specific to the child being rated:

IV. **Know about the child's functioning across settings and situations.**

V. **Understand age expectations for the child's functioning within the his/her culture.**

Army Educational and Developmental Intervention Services

8

The remainder of this module addresses each of these five key knowledge points.

I.   Understand Age-Expected Development

Army Educational and Developmental Intervention Services

9

Key point number I Understanding general age-expectations for child development.

Age-Expected Development

- Generating a COSF rating requires thinking about a child's functioning in relationship to age-expected development.

- Refer to resources that describe sequences and age expectations in child development.

- Use of these resources can be helpful…
  - for teams as they consider the appropriate rating to describe a specific child's functioning.
  - as professionals communicate with family members about ratings.

Army Educational and Developmental Intervention Services

10

Teams are encouraged to make use of resources that describe sequences in child development, including the skills and behaviors that are expected to be observed at various ages.

ECO developed a list of links to resources that provide information about age-expected skills and behaviors observed in children. This information may be helpful in discussions about COSF ratings.
See: http://www.fpg.unc.edu/~eco/pdfs/Age-expected_child_dev_9-5-07.pdf

Think About
Generate a list of resources that you know of/use.

The Concept of Foundational Skills

- In predictable ways, children's earlier skills & behaviors serve as a foundation for the next higher level of functioning developmentally.
- Foundational Skills
  - Earlier skills serve as the base & are conceptually linked to later skills.
  - Children play along side one another before they interact in play.
  - Skills become more complex as children get older.
- Immediate Foundational Skills
  - Just prior to age-expected functioning.

Army Educational and Developmental Intervention Services

11

Illustration 1
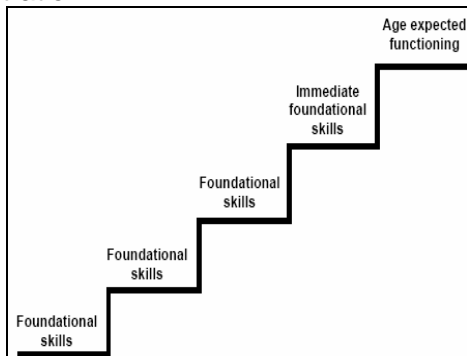
The number of steps and the length of the time frame for each step can vary for different kinds of developmental accomplishments. The equal stairs are shown only for illustration.

An important developmental concept for understanding how to use the COSF scale is the concept of foundational skills. Some of the skills and behaviors that develop early serve as the foundation for later skills and behavior, or expressed another way, later skills build on earlier skills in predictable ways. Providers can use the earlier skills to help children move to the next higher level of functioning developmentally. We refer to these earlier skills that serve as the base and are conceptually linked to the later skills, as "**foundational skills**." Consider these skills like a staircase (see illustration 1).

For example, children play along side one another before they interact in play. Development in the early childhood years proceeds through several levels of foundational skills with skills and behavior becoming more complex and more proficient as children get older. All skills that lead to higher levels of functional are foundational skills, however, the set of skills and behavior that occur developmentally *just prior* to age-expected functioning can be described as the **immediate foundational skills** in that they are the most recent set of foundational skills that children master and move beyond.

A child whose functioning is like that of a slightly younger child is probably showing **immediate foundational skills.** Her functioning does not meet age expectations, but she demonstrates skills and behaviors that occur developmentally just prior to age expected functioning and are the basis *on which to build* age-expected functioning.

A child whose functioning might be described as like that of a MUCH younger child does not meet age expectations, nor does she demonstrate skills and behaviors that immediately precede age-expected functioning. She has foundational skills, but not yet at an **immediate foundational** level.

It is important to note that some foundational skills get replaced by newer skills whereas others continue in children's (and adult's) repertoires throughout life. The nature of interacting with other children changes fundamentally as children get older. On the other hand, skills like making eye contact, turn taking, and eating with a fork get incorporated into more sophisticated routines but never disappear. To identify whether functioning that continues throughout life constitutes an immediate foundational skill, ask yourself at what age one would first expect to see this functioning and how close it is to the child's current age. For instance, being able to make eye contact is not an **immediate** foundational skill for a three year old.

Source: Age-Expected and Immediate Foundational Skills and the Child Outcome Summary Form (COSF) 7-Point Rating Scale ECO DRAFT 12-19-07
http://www.fpg.unc.edu/~eco/pdfs/Immediate_foundational_skills.pdf

Justin

- Justin is 24 months old.
- Justin uses a spoon, but often spills the food before it gets to his mouth. Without his mom's help, he wouldn't get much to eat at mealtime.
- How would you describe his skills and behaviors based upon what you see?
  - Are they age-expected?
  - Immediate foundational?
  - Or not yet?

Army Educational and Developmental Intervention Services   12

Team Observation

Army Educational and Developmental Intervention Services   13

SLIDE 12:

Work through the following example:
Example: Justin is 24 months old. He uses a spoon, but often spills the food before it gets to his mouth. Without his mom's help, he wouldn't get much to eat at mealtime.

- *A child who is 2 should be able to meet his feeding needs without much help, using various kinds of tools, including his fingers. The younger child (toddler) experiments with tool use, but with limited success. The much younger child (infant) participates in feeding by opening his mouth, but does not attempt to feed himself.*

Think About
How would you describe Justin's skills and behaviors?
- Are they age-expected?
- Immediate foundational?
- Or not yet?

What if Justin were 12 months old? How would you describe his skills and behaviors?
What if he were 36 months old?

Because it is a continuum, developmental expectations vary by age. This is hard because child development does not progress in a neat and tidy sequence. Children spend various amounts of time in any one stage of development. Areas of development may overlap with one another. It's impossible to pin down the exact age at which every child will have achieved a specific milestone. Children manifest developmental expectations in different ways. All children follow general sequences but each child will develop in unique ways, depending upon the child's personality, context, and experiences. In determining the extent to which a child's functioning meets age expectations, the team must look at an overall pattern, rather than specific fragments, of development.

SLIDE 13:

As a team, spend some time observing a child. If you like, choose a clip from YouTube.com to view as a team.

Observation Instructions:
Observe the child and think about the developmental patterns you see. Remember to focus on what the child is doing functionally rather than just isolated skills.

Think About
Generate a list of descriptors: How would you describe child's skills and behaviors?
- Age-expected?
- Immediate foundational?
- Or not yet?

What if the child was much younger? What if the child was much older?

Key Point Number II Understanding the content of the three child outcomes.

SLIDE 15:

Each outcome includes notable breadth and depth, which must be considered within the progression of development.

Outcome 1: Within outcome 1, the progression of development stems from a positive caring relationship between parent and child. As the child grows, he develops a sense of self, relationships with family members, other caregivers, and peers. As relationships expand to include making friends the child learns to get along with others and follow social rules and expectations. Embedded in these stages are hosts of behaviors that will be important for the child to build and maintain positive social relationships in age-expected ways.

Outcome 2: The same is true for outcome two. As children grow, they demonstrate tremendous changes in their ability and capacity to construct knowledge. Children progress through stages of visually exploring toys to mouthing, banging, dropping, combining, using functionally in intended manners, using in pretend, and so on. Through play children develop the ability to make connections, sort, classify, and see and recognize patterns, which are all skills foundational to later mathematics (e.g., algebra). Children progress from simple to complex forms of communication. Infants first begin to communicate through crying, body movements, gestures, and facial expressions. As babies grow into toddlers and preschoolers, they develop a vocabulary of hundreds of words, and learn how to use them.

Outcome 3: With regard to outcome three children progress in independence and the ability to meet their own needs, such as getting around, eating, drinking, toileting, communicating wants and needs, and following health and safety rules.

As each outcome is explored, keep the complexity of child development in mind and focus on functionality of skills and behaviors rather than isolated skills and milestones.

☝ Note: Communication skills are part of each outcome. Outcome 1 includes social communication; outcome 2 includes acquiring of communication skills; and outcome 3 includes using communication to get needs met.

📑 **Handout:**
2.1 Family and Child Outcomes for Early Intervention and Early Childhood Special Education. ECO April 2005
http://www.fpg.unc.edu/~eco/pdfs/eco_outcomes_4-13-05.pdf

Observing Functional Development

- Identify what the child is doing in terms of

  1. **Demonstrating positive social/emotional skills including social relationships**
  2. **Acquiring and using knowledge and skills**
  3. **Taking appropriate action to meet needs**

  - Consider Progression of Development
  - Consider Functionality - skills/behaviors in context and across settings.

Army Educational and Developmental Intervention Services

16

Observing functional development is different from assessing developmental domains. Many assessment tools examine children's development in different domains. Domains are areas of development. Functional outcomes refer to behaviors that are meaningful in the context of a child's everyday living.

Domain areas on an assessment often include items that are not meaningful or even possible for all children, such as "stacks three blocks" or "rides a tricycle," or items that assess a skill independent of how the child uses the skill, such as "knows 20 words." Domains refer to areas of development that contribute to successful functioning but are not themselves the functioning. For example, a child might demonstrate knowledge of language but still not use language appropriately to meet his or her needs. Conversely, a child who has no spoken language may have an effective and appropriate way to express what he or she wants.

Functional outcomes focus on what the child can do and must do in the context of his or her life. They are integrated behaviors that usually cross multiple domains and allow children to achieve something meaningful.

Relative to each of the three functional outcomes, the next part of this module will address
1) Examples of behaviors, skills, and content knowledge that fall under each outcome.
2) Developmental progression considerations.
3) Observation and discussion prompts that can be used to help understand a child's functional development.

1. Positive Social Relationships

- Demonstrate attachment
- Initiate & maintain social interactions
- Behave in a way that allows them to participate in a variety of settings & situations
- Demonstrate trust in others
- Regulate emotions
- Understand & follow rules
- Comply with familiar adult requests
- Share toys & materials with others
- Initiate, respond to, & sustain interactions with others as play partners
- Listen, watch, & follow activities during group time.

17

Positive relationships are the foundation for subsequent development. Outcome 1 speaks to their importance.

Positive social-emotional skills refer to how children get along with and relate to adults and children. For older children, these skills also include how they follow group rules and interact with others in group situations such as a child care center. The outcome includes the ways the child expresses emotions and feelings and how he or she interacts and plays with other children.

This slide includes some examples of behaviors, skills, and content knowledge that fall under this outcome.

🗨️ *Think About*
What are other behaviors, skills, and content knowledge that you would consider under this outcome?

Developmental Progression
1. Positive Social Relationships

Relationships with primary caregivers
- Recognizes and reaches to primary caregiver
- Seeks to remain in company of primary caregiver
- Seeks primary caregiver as secure base in new situations
- Interacts with new people/situations when primary caregiver is nearby
- Functions with increasing comfort in a variety of situations

Play with others
- Watches & responds to other children
- Reaches out & engages momentarily with others
- Has brief play encounters with others
- Participates in longer play encounters playing with similar activities
- Participates in coordinated play with others

Army Educational and Developmental Intervention Services   18

Observation & Discussion Prompts
1. Positive Social Relationships

- How does the child…
  - interact with & relate to others in day-to-day happenings
  - display, read and react to emotions
  - initiate, maintain, and close interactions
  - express delight or display affection
  - transition in routines or activities (familiar & new)
  - engage in a joint activities/interactions
  - show awareness of contextual rules expectations
  - respond to arrivals and departures of others
    - …..across different settings?

Army Educational and Developmental Intervention Services   19

---

2. Acquire & Use Knowledge & Skills

- Display curiosity & an eagerness for learning
- Explore their environment
- Explore & play with people & objects (toys, books, etc.)
- Engage in appropriate play with toys & objects
- Use vocabulary either through spoken means, sign language, or through augmentative communication devices to communicate in an increasingly complex form
- Learn new skills & use these skills in play (e.g., completing a puzzle or building a fort)
- Acquire & use the precursor skills that will allow them to begin to learn reading & mathematics in kindergarten
- Show imagination & creativity in play

20

SLIDE 18:

Considering developmental progression provides insight into foundational and immediate foundational skills, Remember this is like a staircase. The skills included here represent a progression of development from infancy through toddlerhood.

Providers are encouraged to refer to resources on age-expected development to review age range expectations.

Refer to list of resources generated (see slide # 10).

SLIDE 19:

Relative to each outcome it is helpful to have questions that teams can use to guide their discussion of the child's performance. These questions are not comprehensive and not intended as a checklist of performance. Rather they are intended to help teams understand what information about the child's skills across settings relates to the outcome.

📋 **Handout:**
   2.2 COSF Discussion Prompts (ECO publication 4/4/07)

Source: Child Outcome Summary Form (COSF) Discussion Prompts (4/4/07) The Early Childhood Outcomes (ECO) Center. http://www.fpg.unc.edu/~eco/pdfs/COSF_discussion_prompts_4-4-07.pdf

SLIDE 20:

Acquiring and using knowledge and skills refers to the ways in which children learn skills and knowledge and ultimately what types of skills and knowledge are gained through those processes.

This slide includes some examples of the many ways in which children acquire knowledge and skills and illustrates what children learn as a result of their curiosity and exploration.

💬 *Think About*
   What are other behaviors, skills, and content knowledge that you would consider under this outcome?

Developmental Progression
2. Knowledge & Skills

Learning about their environment
- Visually exploring
- Mouthing toys
- Banging, dropping toys
- Combining toys – using toys functionally
- Pretending
- Expanding scheme in pretend play

Problem solving
- Awareness of a problem
- Imitates the way others solve problem - immediately
- Experiments with trial & error to solve simple problem
- Persists with trial & error to solve problem
- Intently carries out own plan for solving problem

Army Educational and Developmental Intervention Services

21

Observation & Discussion Prompts
2. Knowledge & Skills

- How does the child…
    - imitate others and learn to try new things
    - persist or modify strategies to achieve a desired end
    - solve problems and attempt solutions others suggest
    - use the words/skills he has in everyday settings
    - understand and respond to directions or requests
    - display awareness of the distinction between things
    - interact with books, pictures, print
    - demonstrate understanding of familiar scripts in play

        - …..across different settings?

Army Educational and Developmental Intervention Services

22

3. Take Action to Meet Needs

- Move from place to place to participate in activities, play, & routines.
- Seek help when necessary to move from place to place.
- Manipulate materials to participate in learning opportunities & be as Independent as possible.
- Use objects (e.g., forks, sticks, crayons, clay, switches, other devices, etc.) as tools in appropriate ways.
- Use gestures, sounds, words, signs or other means to communicate wants & needs.
- Meet self care needs (feeding, dressing, toileting, etc.).
- Seek help when necessary to assist with basic care or other needs.
- Follow rules related to health & safety.

23

SLIDE 21:

Considering developmental progression provides insight into foundational and immediate foundational skills. The skills included her represent a progression of development in age and ability.

Providers are encouraged to refer to resources on age-expected development to review age range expectations.

Refer to list of resources generated (see slide # 10).

SLIDE 22:

These are questions that teams can use to guide their discussion of the child's performance relative to this outcome. These questions are not comprehensive and not intended as a checklist of performance. Rather they are intended to help teams understand which information about the child's skills across settings relates to the outcome.

📄 **Handout:**
   2.2 COSF Discussion Prompts (ECO publication 4/4/07)

Source: Child Outcome Summary Form (COSF) Discussion Prompts (4/4/07) The Early Childhood Outcomes (ECO) Center. http://www.fpg.unc.edu/~eco/pdfs/COSF_discussion_prompts_4-4-07.pdf

SLIDE 23:

Taking action to meet needs includes the kinds of things children need to know or be able to do to be independent. Examples that fall under this outcome include:
- communication skills which allow the child to make their needs or wants known to other people
- motor skills which allow the child to manipulate materials, or move so that they can actively participate in learning opportunities as well as to be independent as possible meeting their own needs.

This slide includes some examples of the many ways in which children take action to meet their needs.

💬 *Think About*
   What are other behaviors, skills, and content knowledge that you would consider under this outcome?


Developmental Progression
3. Action to Meet Needs

Motoring about
- Begins moving purposefully (rolling, sitting, crawling)
- Gains balance to move from place to place
- Walks forward with increasing coordination
- Attempts a variety of motor activities
- Balances while moving arms and legs in active play

Self-care *(dressing, undressing, eating, toileting)*
- Begins to participate as adult attends to personal needs
- Attempts simple personal care tasks
- Tries more complex personal care tasks with limited success
- Tries more complex personal care tasks with increasing success
- Does many personal care tasks successfully

Expressing needs *(hungry, thirsty, changing, toys)*
- Cries, vowel sounds, babbles, points/gestures, word-like sounds, single words, two-word phrases, simple sentences

Army Educational and Developmental Intervention Services   24

Observation & Discussion Prompts
3. Action to Meet Needs

- How does the child…
  - get from place to place
  - assist with or engage in dressing, eating, toileting, hygiene tasks
  - convey needs and desires and preferences
  - respond to challenges
  - respond to delays in getting what he wants
  - get what he wants (e.g., toys, food, attention…)
  - show awareness of or respond to situations that may be dangerous
  - amuse himself or seek out something fun

…across different settings?

Army Educational and Developmental Intervention Services   25

III. Know How to Use the COSF Rating Scale?

Army Educational and Developmental Intervention Services   26

ECO COSF
Revised by Army EDIS

Army Educational and Developmental Intervention Services   27

SLIDE 24:

Considering developmental progression provides insight into foundational and immediate foundational skills. The skills included here represent a progression of development in age and ability.

Providers are encouraged to refer to resources on age-expected development to review age range expectations.

Refer to list of resources generated (see slide # 10).

SLIDE 25:

These are questions that teams can use to guide their discussion of the child's performance relative to this outcome. They are intended to help teams understand which information about the child's skills across settings relates to the outcome.

🗐 **Handout:**
  2.2 COSF Discussion Prompts (ECO publication 4/4/07)

Source: Child Outcome Summary Form (COSF) Discussion Prompts (4/4/07) ECO Center.
http://www.fpg.unc.edu/~eco/pdfs/COSF_discussion_prompts_4-4-07.pdf

SLIDE 26:

Key point number III Know how to use the COSF.

The COSF provides a way for a team to summarize the child's level of functioning using information from many sources including assessment tools and parent and provider reports.

SLIDE 27:

This slide shows the ECO COSF.

EDIS revised the original ECO COSF slightly, as information on the IFSP PD is designed to provide supporting evidence for outcome ratings.

Army EDIS COSF

The EDIS COSF is two pages long. The first page includes rating documentation and signatures of the team members involved in the rating decisions. The second page provides space for documenting additional evidence to supporting ratings.

📄 **Handout:**
   2.3 EDIS COSF
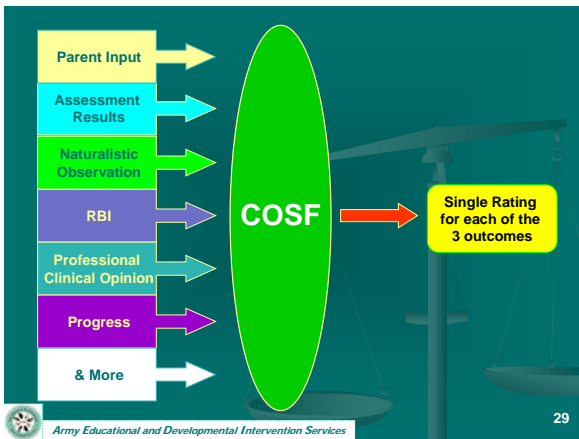
COSF ratings reduce rich information about a child's functioning into a common metric allowing a summary of progress across children. Completing the COSF involves collecting and synthesizing input from many sources familiar with the child in different settings and situations.
Many types of information should be considered in deciding upon a rating. These may include parent and clinical observation, curriculum-based and norm-referenced assessments, service provider notes about progress & performance in different situations, and issues identified in the IFSP.

"Team decision making is a viable method for reaching valid conclusions about the abilities/performance of children with disabilities" (Bailey, Buysee, Simeonsson, Smith, & Keys, 1995; Bailey, Simeonsson, Buysee, & Smith, 1993; Buysee, Smith, Bailey, & Simeonsson, 1993; Suen, Logan, Neisworth, & Bagnato, 1995; Suen, Lu, & Bagnato, 1993). In Greenwood, Walker, Hornbeck, Hebbeler, & Spiker (2007). TECSE 27:1, 2-18.

Assessment

There is no assessment tool
that assesses
the three outcomes directly.

Clearly, standardized assessment information alone is not sufficient. Domain scores do not translate directly into an outcome rating.

Ratings must reflect and convey the child's current functioning across settings and in situations that make up his/her day. A standardized testing situation is unusual for a young child. If the child's functioning in a testing situation differs from the child's everyday functioning, the rating should reflect the child's everyday functioning.

Points of View

- What any individual professional (or parent) "tunes into" depends on his/her orientation
- Training provides an "organizing framework" for how different professionals see the child.

- Each child is unique and has their own mix of behaviors, skills, capabilities, strengths, interests, and needs

Army Educational and Developmental Intervention Services

31

☞ *Key Point*: Standardized evaluation results are how a child performs on a selected set of items. No more. No less. The COSF requires more.

Information for COSF

- Being attune to "alternate domains of development" and the 3 Early Childhood Outcomes *early on* in the process is valuable for attaining a functional picture of the child relative to the 3 Outcomes.

Completion of the COSF must include:

- Information about the child's present levels of functional integrated development
  - *Remember that information from the RBI is indispensable*
- Naturalistic observation
- Parent input
- Team involvement

Army Educational and Developmental Intervention Services

32

Each assessment and assessor see children through its own lens. These lenses are not right or wrong. Each assessment has a distinct organizing framework. Many assessment tools are organized around domains. Yet, what is covered in each domain is not the same.

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 other information 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. Assessment information can assist in deciding how close a child's functioning is to age expected. However, a child should not be given a lower rating if he/she has an alternative way to accomplish the outcome.

Keep in mind that there are many pathways to competence for children with atypical development (e.g., using sign language, wheel chair, AT…). This seems obvious but can get lost in assessment scores that use a different lens e.g., a child learning to sign will not "pass" items related to speaking. If the child can sign to accomplish the same outcome one might through speaking (taking action to meet needs), the fact that the child "fails" some assessment items is not relevant and should not influence the rating.

SLIDE 32:

Rating outcomes must be a collaborative decision-making process that draws upon many different types of information that can be gathered through the IFSP process. Keeping a focus on the 3 broad functional outcome areas early on and throughout the IFSP process will facilitate the gathering of useful information. The EDIS IFSP PD guides this process.

Naturalistic observation, parent input, and team involvement are critical for gathering information about the child's present levels of functional integrated development across settings and situations.

Observation of children in natural environments doing everyday things is essential.

The COSF includes two questions for each outcome (six questions total). The 'a' questions are answered initially and the 'a' and 'b' questions are answered thereafter.

Achievement of the outcomes is age-based. Accordingly, children of different ages will demonstrate achievement in different ways.
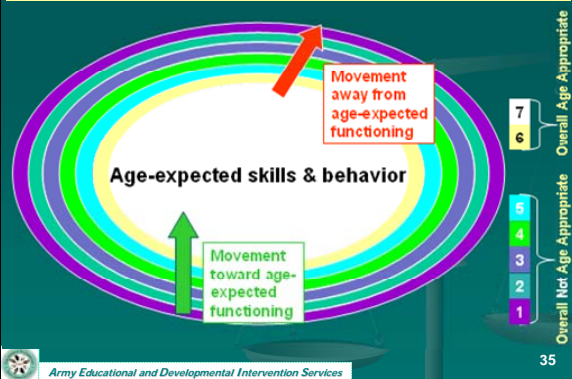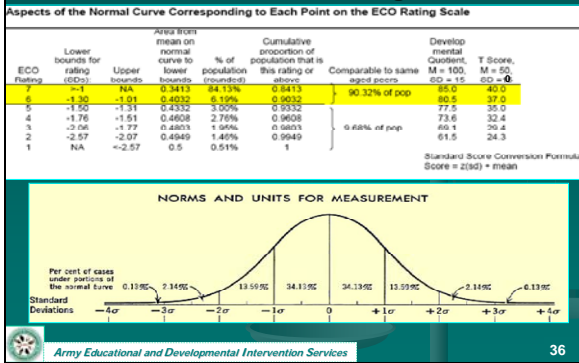
The COSF scale is from 1 to 7 with a 6 or 7 indicating age appropriate functioning. Lower numbers indicate further distance from age appropriate. The lower the number the further from age appropriate.

The data from the 7-point scale are then converted into data used to report the information per the five reporting categories (see slide number 6).

- **Handout:**
   2.4 Definitions of Outcome Ratings Table

Normal Curve Corresponding to Points on COSF Rating Scale

Aspects of the Normal Curve Corresponding to Each Point on the ECO Rating Scale

ECO Rating	Lower bounds for rating (SDs)	Upper bounds	Area from mean on normal curve to lower bounds	% of population (rounded)	Cumulative proportion of population that is this rating or above	Comparable to same aged peers	Developmental Quotient, M = 100, SD = 15	T Score, M = 50, SD = 10
7	>-1	NA	0.3413	84.13%	0.8413	90.32% of pop.	85.0	40.0
6	-1.30	-1.01	0.4032	6.19%	0.9032		80.5	37.0
5	-1.50	-1.31	0.4332	3.00%	0.9332		77.5	35.0
4	-1.76	-1.51	0.4608	2.76%	0.9608		73.6	32.4
3	-2.06	-1.77	0.4803	1.95%	0.9803	9.68% of pop.	69.1	29.4
2	-2.57	-2.07	0.4949	1.46%	0.9949		61.5	24.3
1	NA	<-2.57	0.5	0.51%	1			

Standard Score Conversion Formula
Score = z(sd) + mean

NORMS AND UNITS FOR MEASUREMENT

Per cent of cases under portions of the normal curve: 0.13%, 2.14%, 13.59%, 34.13%, 34.13%, 13.59%, 2.14%, 0.13%

Standard Deviations: −4σ, −3σ, −2σ, −1σ, 0, +1σ, +2σ, +3σ, +4σ

Army Educational and Developmental Intervention Services 36

☞ This slide and the next slide provide insight into conceptual thinking associated with development of the 7 point COSF scale. The paper this information was published in was written as guidance to test publishers. This information is shared as background information and is <u>NOT</u> intended to be used as a direct association of COSF ratings and the percentages of the general population and the standard deviations.

9.68 % of pop. compared to same age peers

90.32 % of pop. compared to same age peers

1 2 3 4 5 6 7

-4 -3 -2 -1 0 +1 +2 +3 +4

Army Educational and Developmental Intervention Services 37
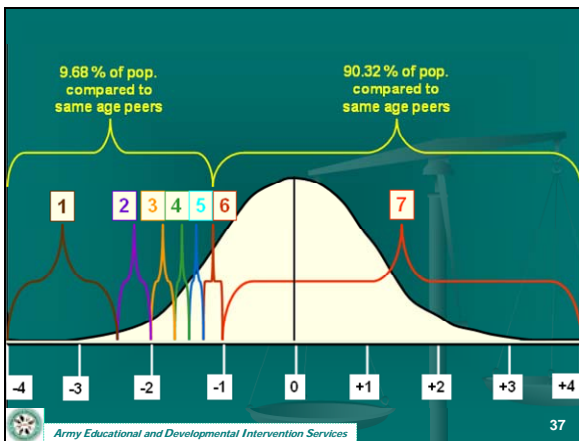
Ratings 7 *"Completely"* and 6

7
- Child shows functioning expected for his/her age in **all or almost all everyday situations** that are part of the child's life. Functioning is considered **appropriate** for his/her age.
- No one has any concerns about the child's functioning in this outcome area.

6
- Child's functioning generally is considered **appropriate** for his/her age but there are **some significant concerns** about the child's functioning in this outcome area. These concerns may be substantial enough to suggest monitoring or possible additional support.
- Although **age-appropriate**, the child's functioning may border on not keeping pace with age expectations.

Army Educational and Developmental Intervention Services 38

SLIDE 36:

The guidance in this table "is best read at a ***general level***, i.e., it illustrates that very few children are likely to be categorized as a 1, and that the overwhelmingly majority of children in the general population would be a 7."

This table shows the theoretical percentages of the population that would fall within each rating on the 7-point COSF rating scale.

This information is based upon "using the normal curve and using 10% as a guide for defining age expected functioning, i.e., children in the general population scoring in the bottom 10% in an outcome area would be considered to be functioning below age expectations."

"The boundaries between the ratings are intentionally set to have different percentages of children at each rating. For example, there are proportionately more children who would be given a 5 than given a 1. This was done to reflect the fact that there are more atypical young children with milder than more severe delays in developmental functioning and that the proportion of children with the severest delays disabilities is very small."

Source: Recommendation of the Early Childhood Outcome (ECO) Center for Determining Age Expected Functioning and the Points on the ECO Rating Scale, July 5, 2006.

SLIDE 37:

Drawing from the information presented in the earlier slide, this slide provides an illustration of the COSF 7-point ratings distributed across the normal curve.

Remember thought that standardized test scores alone are not sufficient to make a rating determination. Rather information is needed from various sources to ensure a rating that accounts for the child's functioning across a variety of settings and emphasizes functionality versus test scores alone.

SLIDE 38:

The ratings 6 or 7 are used for children whose functioning is considered within expectations for their ages.

Distinguishing Ratings 7 vs. 6

- All children have strengths and weaknesses. Families and providers identify areas to work on to support ongoing growth (some call these "concerns")

- Concerns raised for which families and providers may want to offer extra support and strategies to promote development, but the area of concern is not a possible indicator or precursor of a significant developmental problem (7).

- Developmental concerns-weaknesses significant enough to watch closely and definitely support. Although age expected now, the child's development boarders on not keeping pace with age-expected levels or shows early signs of possible developmental problems (6). Re-screening children.

Army Educational and Developmental Intervention Services

39

Ratings 5 *"Somewhat"* and 4

5
- Child's functioning expected for his/her age **some of the time and/or in some situations.** Child's functioning is a mix of age appropriate and not age appropriate behaviors and skills.
- A child's functioning might be described as like that of a **slightly younger child**.

4
- Child shows **some but not much** age-appropriate functioning.

Army Educational and Developmental Intervention Services

40

Ratings 3 *"Emerging"* and 2

3
- Child does **not yet** show functioning expected of a child of his/her age in any situation.
- Child's behaviors and skills include **immediate foundational skills** upon which to build age appropriate functioning. Child shows these immediate foundational skills most or all of the time across settings and situations.
- Functioning might be describes as like that of a **younger child**.

2
- Child's behaviors and skills include **some immediate foundational skills** but these are not displayed very often across settings and situations.

Army Educational and Developmental Intervention Services

41

Ratings 1 *"not yet"*

1
- Child does **not yet** show functioning expected of a child his/her age in any situation.
- Child's skills and behaviors also **do not yet include any immediate foundational skills** upon which to build age appropriate functioning.
- Child's functioning might be described as that of a **much younger child**.

Army Educational and Developmental Intervention Services

42

SLIDE 39:

It is possible that a child could be rated at 6 or 7 on an outcome and still receive early intervention services. This is because decisions about ratings made on child outcomes are different from decisions about eligibility determination for early intervention services. With that said, it would be extremely rare for a child receiving early intervention services to receive an initial rating of 6 or 7 on all three outcomes.

SLIDE 40:

Ratings 5 and below are applied to approximately the lowest functioning 10% of the general population.

SLIDE 41:

Ratings of 3 and 2 include children that do not show any functioning expected of a child his/her age.

SLIDE 42:

The lowest rating is 1.

These children do not showing any immediate foundational skills.

Relative to Each Outcome
Think About…

Worksheet — Documenting the Basis for the COSF Rating

Functioning that will lead to immediate foundational skills	Functioning that shows immediate foundational skills	Functioning that is age appropriate

Age appropriate, but some concerns

Atypical behavior, but not like that of a younger child

Key behaviors or skills that are expected of children this age but are missing

Army Educational and Developmental Intervention Services   43

☝ Functioning that is displayed rarely and/or when the child is provided with a lot of unusual support or prompts is of little significance for the purpose of rating.

SLIDE 43:

This worksheet is designed to help guide the rating decision discussion and process.

For each outcome…
* Discuss the child's current functioning in the outcome area across settings and situations.
* Identify areas where the child's functioning is age appropriate.
* If not all functioning is age appropriate, identify areas where the child's functioning reflects immediate foundational skills.
* Identify areas where the child's functioning reflects skills that will lead to immediate foundational skills.
* Discuss any behavior that is considered atypical, but not like that of a younger child.
* Discuss key behaviors or skills expected of children this age and define those that the child is missing.
* Use the information to decide which rating best describes the child's current functioning related to the outcome.

Maintain a focus on the child's overall functioning across settings and situations for each outcome.

📑 **Handout:**
2.5 Documenting the Basis for COSF Rating Worksheet

Completing the COSF form

- On the form, you will need to document
  - Child's name
  - Child's DOB
  - Rating date and which rating (initial, subsequent, exit)
  - EDIS Program Location
  - The consensus rating for each outcome
  - If the child's IFSP includes documentation to support ratings if not complete page 2 of COSF
  - Persons involved in deciding the summary rating
  - Evidence that led to the selected rating that is not included on the IFSP or in the child's record (use page 2 of COSF)

- The form is filed in the child's record under section 2

Army Educational and Developmental Intervention Services   44

SLIDE 44:

Always provide ratings for all three outcomes.

Ratings are needed for all 3 outcomes even if the child has no concerns or delays in a particular outcome area.

IV. Know about the child's functioning across settings and situations.

Army Educational and Developmental Intervention Services   45

SLIDE 45:

Key point number IV Know about the child.

This section of this module involves reviewing a case study and completing the COSF.

Team Scenario

- Present what is known about the child and select one outcome to work through.

- Discuss what is known about the child with regards to the chosen outcome

- Discuss and record key points about the child's functioning on the "Documenting Basis Worksheet"

- Decide on a rating using the rating table

- Enter the rating on the COSF

Army Educational and Developmental Intervention Services   46

SLIDE 46:

🖐 *Teamwork*
Review information about a child receiving early intervention services. Work through the team scenario process outlined in the slide.

Materials needed:
A child's record and people familiar with the child.
2.2 COSF Discussion Prompts (ECO publication 4/4/07)
- Use the Discussion Prompts to help guide the discussion. These questions help teams understand what information about the child's skills across settings relates to the outcome.
2.4 Definitions of Outcome Ratings Table
2.5 Documenting the Basis for COSF Rating Worksheet
- *What is the child doing that is we would expect to see for children his age?*
- *What is the child doing that might be immediately foundational to age expected skills/behaviors?*
- *What is the child doing that will lead to immediate foundational skills?*
- *What would we expect a child of the same age to be doing in this area?*
- *Is the child demonstrating any atypical behaviors?*
2.3 COSF form
Age-expected Development Tools/Resources

ECO Crosswalks:
ECO has developed crosswalks which provide general guidance as to how assessment information maps to the 3 outcomes. These crosswalks are intended as guides to help you understand the content of the 3 outcomes. They are not checklists. Keep in mind that assessment items may not always capture functioning in day-to-day situations as required for measuring outcomes. Crosswalks include BDI-2, DAYC, Hawaii, Carolina, Brigance, and more. They are available at: http://www.fpg.unc.edu/~eco/crosswalks.cfm

SLIDE 47:

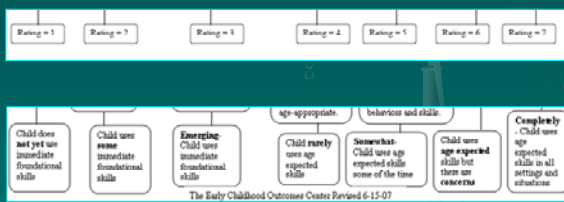Note that if the table is reviewed with parents the numbers can be removed.

Another resource to assist with rating determinations is the ECO Decision Tree.

📑 **Handout**
   2.6 Decision Tree for Summary Rating Discussions.

SLIDE 49:

Two versions of the Decision tree include one with the numbers at the bottom and the other with descriptors instead of numbers.

SLIDE 50:

👥 *Teamwork*
   Work through the team scenario process outlined in the slide and complete ratings for the remaining two outcomes.

Materials needed:
   A child's record and people familiar with the child.
   2.2 COSF Discussion Prompts (ECO publication 4/4/07)
   2.4 Definitions of Outcome Ratings Table
   2.5 Documenting the Basis for COSF Rating Worksheet
   2.3 COSF form
   ECO Crosswalks

SLIDE 51:

Complete the COSF for the child being discussed using the resources reviewed and presented in the previous slides.

V. Understand age expectations for the child's functioning within his/her culture. *Army Educational and Developmental Intervention Services* 52	**SLIDE 52:** Key Point V.
Cultural Considerations ■ Know what behaviors and skills are appropriate for the child's age within the context of the family and their culture. ■ Use the expectations for the child's culture to decide if the child's functioning is at the level expected. 53	**SLIDE 53:** If a child is from a culture that has expectations that differ from published developmental milestones for when young children accomplish common developmental tasks, such as feeding themselves or dressing themselves, use the expectations for the child's culture to decide if the child's functioning is at the level expected for his or her age.
Special Considerations ■ Very young children ■ Children with only speech/articulation delays ■ Assistive technology and accommodations *Army Educational and Developmental Intervention Services* 54	**SLIDE 54:** With regard to very young children, it is recognizably difficult to identify 7 points of difference (e.g., a 4-week-old infant). For very young children (e.g., under 4 months) teams can use limited number of points, e.g., 1, 3, 7. Albeit rare for children with primarily articulation or atypical phonological processing delays to be eligible, it can occur. For children with these delays, be sure to discuss and examine whether and how these difficulties are affecting the child's functioning with regard to each of the 3 outcomes. For example: ♦ Will others play and interact with him/her? ♦ Can others understand him/her in different settings? ♦ How does he/she convey critical needs (e.g., safety needs)? If assistive technology or special accommodations are available in the child's everyday environments, then the rating 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. Ratings must to reflect the child's actual functioning across a range of settings, *not* his/her capacity to function under ideal circumstances if he or she had the technology. Children who could benefit from AT but don't have it will get lower ratings.

These lower ratings do not reflect a child's inability as much as the fact that the child does not have the necessary equipment/services over time, the change in ratings tells us how much actual difference the program makes for this child it may tell us that we could do more for some children.

SLIDE 55:

Team Consensus Challenges
What if the team cannot reach consensus?

- Focus discussion on child's skills related to the outcome.
- Don't go to selecting a rating number too quickly.
- Discuss rationales for differing ratings.
- Focus on concrete descriptions & how they support a particular rating.
- Include more discussion on typical development for a same age child.

Army Educational and Developmental Intervention Services

55

To minimize the potential for disagreement, teams should focus most of the discussion on the child's skills related to the outcome and be certain not to select a rating number too quickly. Ensure that everyone has an opportunity to share their view, including what skills and behaviors are expected for a same-aged child. Encourage examples of the breadth of content covered in each outcome. Use the Documenting the Basis for the COSF Rating Worksheet (handout **2.5**) to guide the rating decision process.
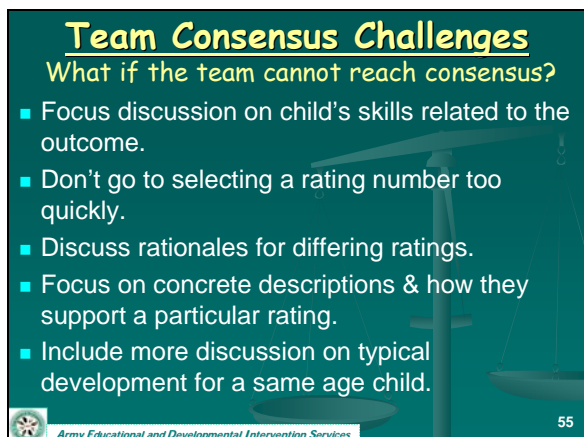
If irresolvable differences are occurring frequently, revisit how the rating is being decided.

📄 **Handout:**
2.7 Possible Conversation Prompts for Groups Having Difficulty Reaching Consensus 1 ECO DRAFT 5-9-07
http://www.fpg.unc.edu/~eco/pdfs/Consensus.pdf

SLIDE 56:

Team Consensus Challenges

- **General Policy**

  1. **Ensure all available information & resources are being used.**
  2. **Seek additional information.**
  3. **Call upon other resources to assist with the rating process.**
  4. **Majority rules.**

Army Educational and Developmental Intervention Services

56

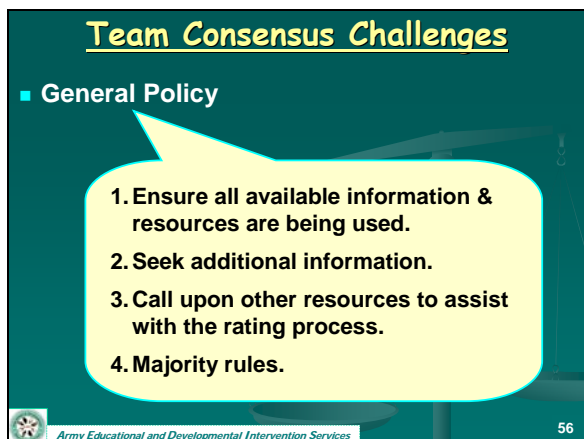These general policy guidelines should be considered if teams encounter consensus challenges.
- Ensure that the team has the information needed to make a rating decision. Use the resources available.
- Don't hesitate to gather further information about the child if there are gaps in the information available.
- Ask for input from others familiar with the child.
- Ask input from others knowledgeable about child development and experienced in the COSF rating process.
- Remember that majority rules.

Including Parents
in the Rating Meeting

- Team Member
- Information Provider
  - Parent input is critical - COSF ratings rely on information about the functioning across situations and settings.
- Participant in the COSF rating discussion
  - Encouraged, but not required.
  - When included use decision tree & rating table without numerical rating values
- Consumer
  - Explain why the rating is being done and what in means.
  - Refer to Measuring Outcomes tri-fold

Army Educational and Developmental Intervention Services

57

☞ There is no expectation that parents will be able to determine whether what they see is age appropriate.

The family plays several important roles in the child outcomes measurement process:
1) Team member: Just as families are members of IFSP teams, they are critical to the assessment team.
2) Information provider: COSF ratings rely on information about a child's functioning across situations and settings. Parent input is crucial: family members see the child in situations that professionals do not. The rest of the team will need to learn what family members know about the child -- what the child does at home, at grandma's house, in the grocery store, etc.
3) Rating participant: As members of the IFSP team, families are naturally involved in the COSF rating discussion. Their role in the rating is child expert, while other members of the team will know child development and the skills and behaviors expected at various age levels. Programs must maximize the role of family as information provider in order to make the COSF rating.
4) Consumer: EDIS practitioners must be able to explain why the rating is being done and what it means. The EDIS tri-fold can be helpful in sharing this information. (DRAFT ECO HANDOUT 4-18-07 Including Families in the Rating Discussion)

The bottom line is that COSF rating decisions must be made through a multidisciplinary team meeting, involving at least 2 EDIS practitioners familiar with the child, and must include information from parents.

The COSF rating is a function of program evaluation, not individual child evaluation. Keep in mind that sharing the information collected from the assessment may provide more meaningful and useful information to families than a numerical COSF rating. When discussing ratings with parents emphasize the rating descriptors rather than the rating number.

◨ **Handouts**
   2.8 EDIS tri-fold
   2.9 Tips for Having the Child Outcome Summary form (COSF)
        Conversation with Families, ECO Draft 5-1-07
   2.10 Suggested Language for Talking with Parents about the COSF
        Ratings (Virginia form)

Source: Including Families in the Rating Decision ECO 4/18/07
http://www.fpg.unc.edu/~eco/pdfs/Role_of_Families.pdf

Subsequent Ratings

- Essentially the same procedure as entry

- **In addition**, answer questions 1b, 2b, and 3b
- 'b' questions address progress
  - Any progress the child has made even if that progress does not give the child a higher rating on the scale.
  - Compares child to his/her own past behavior.
  - Small steps of progress count!

Army Educational and Developmental Intervention Services

58

Subsequent ratings (i.e., annual and exit ratings) follow the same process. The only difference is that for each subsequent rating the 'a' *and* 'b' questions for each outcome are answered on the COSF.

The 'b' questions address progress. Progress across each of the three outcomes can be made when there is any level of change in the child's performance. For example, progress might be reflected in: an improved score on assessment; a new skill that is demonstrated; the child being more independent or needing less support or assistance to do something.

On subsequent ratings there are two measures of progress for each outcome. Even if the gap widens between the child's performance on the outcomes and children who are typically developing, child progress on each of the outcomes can still be documented if the child has shown any new skills or behaviors related to the outcomes. Such progress is reflected in responses to the 'b' questions.

Entering Data in SNPMIS

Initial Entry

Army Educational and Developmental Intervention Services

59

Initial data entry in the Special Needs Management Information System (SNPMIS) parallels documentation on the COSF.

Entering Data in SNPMIS

Annual and Exit Entries

Army Educational and Developmental Intervention Services

60

Subsequent data entry in SNPMIS parallels documentation on the COSF and includes responses to the 'b' questions.

Quality Assurance Checks

- After completing Module II training, each program will submit at least one completed COSF, accompanying documenting worksheet, and IFSP for review and feedback.

- Share questions and ideas as they arise.

- Frequently asked questions and answers will be published for sharing across the programs.

Army Educational and Developmental Intervention Services

61

Quality assurance checks will be essential to ensure the collection and reporting of reliable and valid information.

When & How Often Will Child Outcomes be Measured?

- Begin collection now
- Include all new & annual IFSPs
  - Within 30 days on either side of initial IFSP
  - Within 30 on either side of annual IFSP
- Thereafter
  - Exit outcome data for all children exiting that have had services at least 6 months & had a prior COSF
    - At Exit
      - unless outcomes were measured within past 60 days
      - unless the child was in the program less than 6 months

Army Educational and Developmental Intervention Services

62

Following completion of this Module teams should begin to collect child outcome data and complete the COSF for all new and annual IFSPs.

📄 **Handout**
2.11 Responses to Anticipated General Questions, October 2007

Way ahead

- Timelines for implementation
  - Q 1 CY 2008
    - Training and Begin Collecting Child Outcomes
    - Enter data in SNPMIS
    - Quality Assurance Checks of Data Collection
  - Q 2 CY 2008
    - Continue Collecting Child Outcomes
    - Training and Begin Collecting Family Outcomes
    - Enter child and family outcome data in SNPMIS
    - Quality Assurance Checks of Data Collection
  - 1 July 2008
    - Full Implementation of Child and Family Outcomes across EDIS programs
    - Quality Assurance Checks of Data Collection Continue

Army Educational and Developmental Intervention Services

63

Review timelines.

As of July 1, 2008 all programs will fully implement outcome data collection and data entry.

Please Share Your Ideas & Questions

- What's working & what's not?
- What's clear & what's not?
- Are there ways to improve the process?

- Contact
  Naomi.Younggren2@us.army.mil
  Naomi.Younggren@hbg.amedd.army.mil

  - We will continue to publish FAQs

Army Educational and Developmental Intervention Services

64

Review ideas & questions.

Information included in this module is available at the Early Childhood Outcomes (ECO) Center.

www.the-eco-center.org

The Army EDIS Program extends a special thank to
Dr. Robin Rooney, Technical Assistance Coordinator
Early Childhood Outcome Center/National Early Childhood TA Center,
for her valued support and expert assistance
with the development of the Army EDIS outcome training modules.

Handouts

2.1   Family and Child Outcomes for Early Intervention and Early Childhood Special Education. ECO April 2005 http://www.fpg.unc.edu/~eco/pdfs/eco_outcomes_4-13-05.pdf

2.2   COSF Discussion Prompts (ECO publication 4/4/07) http://www.fpg.unc.edu/~eco/pdfs/COSF_discussion_prompts_4-4-07.pdf

2.3   Army COSF

2.4   Definitions of Outcome Ratings Table

2.5   Documenting the Basis for COSF Rating Worksheet

2.6   Decision Tree for Summary Rating Discussions

2.7   Possible Conversation Prompts for Groups Having Difficulty Reaching Consensus ECO DRAFT 5-9-07 http://www.fpg.unc.edu/~eco/pdfs/Consensus.pdf

2.8   EDIS tri-fold

2.9   Tips for Having the Child Outcome Summary form (COSF) Conversation with Families, ECO Draft 5-1-07

2.10   Suggested Language for Talking with Parents about the COSF Ratings (Virginia form)

2.11   Responses to Anticipated General Questions, October 2007

Family and Child Outcomes for Early Intervention and Early Childhood Special Education
April 2005

Background

The Early Childhood Outcomes (ECO) Center was funded by the Office of Special Education Program to develop an approach for collecting data on child and family outcomes for the Part C early intervention and Part B preschool programs of IDEA (Individuals with Disabilities Education Act). The resulting data are to be used for federal and state accountability purposes and to improve programs. The family and child outcomes in this document are the product of the initial step in developing this approach. The outcomes were developed through a year-long consensus-building process that involved input from and review by numerous stakeholders including federal, state, and local policy-makers and administrators, local providers, family members of children with disabilities, and researchers. The ECO Center tried to incorporate the feedback received into the current version of the outcomes but, not surprisingly, it was not always possible to reflect the diversity of positions on the outcomes.

This version of the outcomes represents the ECO Center's current thinking based on the input received. The next step in the process will be to work with OSEP and states on the development of the measurement approach. It is possible that developing the measurement approach may reveal a need for additional refinements in the outcomes.

Child Outcomes

The child outcomes are based on the assumption that children of different ages demonstrate these outcomes in different ways. A second assumption is that there are many pathways to competence and that some children will need special supports or accommodations. The following presents a brief explanation of the outcome and a few selected examples of the behavior or skills that are part of achieving the outcome. The examples are not meant to show all the ways the outcome would be demonstrated across the entire early childhood age span or across the range of abilities and disabilities of children served in early intervention and early childhood special education.

1. Children have positive social relationships.

As noted in the discussion of the first family outcome, a caring, warm relationship between a parent and the child is the foundation for all subsequent development. From this foundation, the young child begins to develop a positive sense of self and can begin to build more relationships with other family members and those outside of the family such as peers. Making new friends and learning to get along with others is an important accomplishment of the early childhood years. Children develop a sense of who they are by having rich and rewarding experiences interacting with adults and peers. They also learn that different rules and norms apply to different everyday settings and that they need to behave accordingly. All children need support from adults in learning how to be successful participants in their social world but some children who face challenges in this area need additional or specialized support. Children who achieve this outcome show a variety of behaviors related to making and maintaining positive social relationships in age-appropriate ways. For example, they:
- Demonstrate attachment with the significant caregivers in their lives.
- Initiate and maintain social interactions.
- Behave in a way that allows them to participate in a variety of settings and situations, for example, on the playground, at dinner, at the grocery store, in child care, etc.
- Demonstrate trust in others.
- Build and maintain relationships with children and adults.
- Regulate their emotions.
- Understand and follow rules.
- Solve social problems.

2. Children acquire and use knowledge and skills.

Over the early childhood period, children display tremendous changes in what they know and what they can do. Everyday life can present children with a wide variety of natural learning opportunities that serve to help children acquire progressively more advanced skills. Parents and other adults support children's acquisition of knowledge and skills by providing children with safe, nurturing and stimulating environments in which learning can flourish. Children with special needs can face a variety of challenges related to acquiring knowledge and skills and may need additional supports to realize their potential. The knowledge and skills acquired in the early childhood years, especially those related to communication, pre-literacy and pre-numeracy, provide the foundation for success in kindergarten and the early school years. Children who achieve this

6

outcome show a variety of behaviors related to acquiring and using knowledge and skills across a variety of everyday routines and activities. For example, they:

- Display curiosity and an eagerness for learning.
- Explore their environment.
- Explore and play with people and objects including toys, books and other materials
- Engage in daily learning opportunities through manipulating toys and other objects in an appropriate manner.
- Use vocabulary either through spoken means, sign language, or through augmentative communication devices to communicate in an increasingly complex form.
- Learn new skills and use these skills in play, for example, by completing a puzzle or building a fort.
- Acquire and use the precursor skills that will allow them to begin to learn reading and mathematics in kindergarten.
- Show imagination and creativity in play.

3. Children take appropriate action to meet their needs.

As children develop, they become increasingly more capable of acting on their world. Babies cry to communicate hunger whereas an older child can ask for something to eat. Children have a variety of needs – to eat, sleep, play, move, explore, and communicate to name but a few. With the help of supportive adults, young children become able to address their needs in more sophisticated ways and with increasing independence over the course of the early childhood years. They integrate their developing skills, such as fine motor skills and increasingly complex communication skills, to achieve a goal that is of value to them, such as showing their artwork to an adult and describing what it is or pointing to a toy and asking for it. Children with disabilities may use specialized technology or may need assistance from adults to allow them to meet their needs. Children who take appropriate action to meet their needs show a variety of behaviors related to this outcome. For example, they:

- Use gestures, sounds, words, signs or other means to communicate wants and needs.
- Meet their self care needs (feeding, dressing, toileting, etc.). Their ability to meet self care needs allows them to participate in everyday routines and activities.
- Use objects (for example, forks, sticks, pencils, crayons, clay, scissors, switches, other devices, etc.) as tools in appropriate ways.
- Move from place to place to participate in everyday activities, play, and routines.
- Seek help when necessary to move from place to place.
- Seek help when necessary to assist with basic care or other needs.
- Follow rules related to health and safety.

7

Revised 4/4/07

Child Outcome Summary Form (COSF)
Discussion Prompts

The pages that follow provide a few ideas for some types of questions or prompts that could be used to elicit conversation about a child's functioning with regard to the three global child outcome statements. As teams discuss child functioning in these outcomes areas, they generally draw on many sources of information and ask excellent questions that provide a specific description of what the child generally does with regard to each outcome. However, some teams have looked for further guidance about the kinds of questions that might help them focus on functional skills and span many of the components reflected in each outcome. The list that follows is by no means a comprehensive list of the types of questions or topics that might be discussed. It also is not intended to be used as a checklist necessary for discussion or as a checklist that will always constitute a complete discussion. However, it might provide some ideas to expand team approaches. It also may be helpful if individuals new to the COSF are quickly training other staff in using it and want more information for that purpose. As you begin to use this resource, we encourage you to share comments and additions with us at staff@the-eco-center.org so that we can include and circulate them as well!

The Early Childhood Outcomes (ECO) Center

1

Outcome 1: Child has positive social relationships.

Thinking about relating to adults, relating to other children, and (for those older than 18 months) following rules related to groups or interacting with others.

- △ How does the child relate to his/her parent(s)?
- △ How does the child relate to other relatives or extended family and close family friends (e.g., grandparents, aunts, extended kin, etc.)? Do these interactions with people differ depending on the setting the child is in with these people?
- △ How does the child interact with familiar caregivers (e.g., child care providers, babysitters)?
- △ How does the child relate to strangers? At first? After a while? In different settings and using different approaches?
- △ How does the child interact with/respond to people in community settings (e.g., park, library, church, grocery store, with neighbors on walks, at the bus stop, in restaurants, at playgroups or outings, etc.)?
- △ How does the child interact with/react to peers (e.g., at child care, in the park, in the neighborhood, in brief interactions in stores or at restaurants)?
- △ How does the child relate to his/her siblings, cousins, or kids he/she sees frequently?
- △ What is the child's eye contact with others like? Does it differ across situations or with different people?
- △ How does the child display his/her emotions?
- △ How does the child read and react to the emotions and expressions of others?
- △ How does the child respond to touch from others?
- △ How does the child maintain interactions with people?
- △ In what situations and ways does the child express delight or display affection?
- △ In the child's interactions, are there behaviors that may interfere with relationships or seem inappropriate in interactions expected for the child's age (e.g., screaming, biting, tantrums)? How often does this occur? In what situations? In what situations does it not occur?
- △ Does the child display awareness of routines? How?
- △ How does the child respond to transitions in routines or activities? Are the child's actions different for familiar transitions versus new transitions, or different across settings or with different people?
- △ How and in what situations are interactions with others initiated?
- △ How does the child engage in mutual activity (e.g., joint attention, communicate to convey desire to engage, initiate interaction or play, follow rules for mutual games)?
- △ Does the child seek out others after an accomplishment? How?
- △ Does the child seek out others after frustration or when angry? How?
- △ Does the child participate in games (e.g., social, cooperative, rule-based, with turn-taking)? What do the child's interactions look like in these situations?
- △ Does the child display an awareness of rules and expectations? How? Does the child behave differently in different contexts (e.g., quieter in church, more active outside)?
- △ Does the child attempt to resolve his/her conflicts? How? What do these actions look like with peers, parents, etc.?
- △ How does the child respond when others are not attending to him/her?
- △ How does the child respond when someone arrives? Someone new? Someone familiar? How does the child respond when someone leaves?
- △ Talk about the child's functioning with regard to turn-taking, showing, and sharing? With adults? With other children?

- △ **How would you expect other children this age to act in these situations?**

The Early Childhood Outcomes (ECO) Center

2

Outcome 2: Child acquires and uses knowledge and skills.
Thinking, reasoning, remembering, and problem solving; understanding symbols; and understanding the physical and social worlds.

△ How does the child use the words and skills she/he has in everyday settings (e.g., at home, at the park, at child care, at the store, with other kids, at child care, in restaurants, with different people)?

△ Tell me about a time when he/she tried to solve a problem (e.g., overcome an obstacle/problem interfering with something important to him/her). What did he/she do?

△ What concepts does the child understand? Does the child incorporate these into strategies that he/she uses to accomplish something meaningful? How?

△ How does the child understand and respond to directions and requests from others?

△ How does the child imitate others' actions (e.g., peers, adults) across settings to learn or try new things?

△ How does the child display understanding of differences in roles, characteristics, and expectations across people and situations (with increasing age role understanding may change from immediate household roles and differences to more external community helper roles)?

△ Can the child use his/her understanding to communicate problems or attempt the solutions that others suggest (e.g., try new strategies that they haven't thought of based on gestures or suggestions using words they know)?

△ Can the child answer questions of interest in meaningful ways?

△ Does the child use something learned at one time at a later time or in another situation?

△ Does the child display an awareness of the distinctions between things (e.g., object characteristics, size differences, differences in object functions)?

△ What does the child do if an action or a strategy attempted isn't successful? (e.g., how does he/she try to modify approach, show persistence, etc.)

△ How does the child demonstrate her/his understanding of symbols into concepts, communication, and play?

△ How does the child interact with books, pictures, and print?

△ How does the child's play suggest understanding of familiar scripts for how things work, what things are related, what comes next, and memory of previous actions in that situation?

△ Does the child's play show attempts to modify strategies/approaches and to try new things? How?

△ Are there kinds of knowledge and skills that are not similar to same age peers and/or that might interfere with acquiring and using knowledge and skills?

△ **How would you expect other children this age to act in these situations?**

The Early Childhood Outcomes (ECO) Center   3

Outcome 3: Child takes appropriate action to meet his/her needs.

Taking care of basic needs; getting from place to place and using tools; and (if older than 24 months) contributing to own health and safety.

△ What does the child do when she/he can't get or doesn't have what she wants?

△ What does the child do when he/she wants something that is out of reach or hard to get?

△ What does the child do when he/she is upset or needs comfort?

△ What does the child do when she/he is hungry?

△ What does he/she do when he/she is frustrated?

△ What does the child do when she/he needs help?

△ How does the child convey his/her needs?

△ How are the child's actions to seek help or to convey his/her needs different from one setting to another? How do they differ with different people? (e.g., child care vs. home vs. community setting, with parent vs. grandparent, familiar person vs stranger)

△ Tell me about the child's actions when dressing and/or undressing?

△ What does the child do before and after peeing and pooping?

△ What does the child do at mealtime (eating, drinking)? Are there differences across settings and with different people?

△ How does the child get started playing with toys? What does the child do when he/she is interested in a different toy than he/she has?

△ Tell me about the child's actions/reactions with regard to hygiene (toothbrushing, washing hands/face, blowing nose, etc.)?

△ Does the child show awareness of situations that might be dangerous? What does he/she do (give examples, (e.g., to dropoffs, hot stoves, cars/crossing streets, strangers, etc.)?

△ Are there situations when a problem behavior or disability interferes with the child's ability to take action to meet needs? How consistently? How serious is it? Does the child take alternative approaches? What are those?

△ Are the actions the child uses to meet his/her needs appropriate for his/her age? Can he/she accomplish the things that peers do?

△ How does the child respond to delays in receiving expected attention and/or help from others?

△ How does the child respond to challenges?

△ Does the child display toy preferences? How do you know?

△ How does the child get from place to place when desired or needed?

△ What does the child do when she/he is bored? How does she/he amuse her/himself or seek out something fun?

△ How does the child respond to problematic or unwanted peer behavior?

△ How does the child use materials to have an effect (e.g., drawing materials, tools, etc.)?

△ **How would you expect other children this age to act in these situations?**

The Early Childhood Outcomes (ECO) Center   4

Army EDIS
CHILD OUTCOMES SUMMARY FORM

Child's Full Name: _____   Child's date of birth: _____/_____/_____
                                                                                    Day   Month   Year

Date of Rating: _____/_____/_____ ☐ Initial IFSP/First rating ☐ Annual/Subsequent IFSP rating ☐ Exit rating
                       Day   Month   Year

EDIS Program: _____

• To answer the questions below, think about the child's functioning as indicated by assessments & based on observations from individuals in close contact with the child. • Answer questions 1b, 2b, and 3b for annual, subsequent & exit ratings.

1. POSITIVE SOCIAL-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS)
•Relating with adults •Relating with other children •Following rules related to groups or interacting with others (if older than 18 mos.)

1a. To what extent does this child show age-appropriate functioning, across a variety of settings and situations, on this outcome?

Not Yet		Emerging		Somewhat		Completely
1	2	3	4	5	6	7

1b. Has the child shown any new skills or behaviors related to positive social-emotional skills (including positive social relationships) since the last outcomes summary? ☐ Yes   ☐ No

2. ACQUIRING AND USING KNOWLEDGE AND SKILLS
•Thinking, reasoning, remembering, & problem solving •Understanding symbols •Understanding the physical & social worlds

2a. To what extent does this child show age-appropriate functioning, across a variety of settings and situations, on this outcome?

Not Yet		Emerging		Somewhat		Completely
1	2	3	4	5	6	7

2b. Has the child shown any new skills or behaviors related to acquiring and using knowledge and skills since the last outcomes summary? ☐ Yes   ☐ No

3. TAKING APPROPRIATE ACTION TO MEET NEEDS
•Taking care of basic needs (e.g., showing hunger, dressing, feeding, toileting, etc.) •Contributing to own health & safety (e.g., follows rules, assists with hand washing, avoids inedible objects) (if older than 24 months) •Getting from place to place (mobility) & using tools (e.g., forks, strings attached to objects)

3a. To what extent does this child show age-appropriate functioning, across a variety of settings and situations, on this outcome?

Not Yet		Emerging		Somewhat		Completely
1	2	3	4	5	6	7

3b. Has the child shown any new skills or behaviors related to taking appropriate action to meet needs since the last outcomes summary? ☐ Yes   ☐ No

*** The child's IFSP (and record) include documentation to fully support these ratings.   ☐ Yes   ☐ No
If yes, this form is complete. If no, supporting documentation must be completed on the back of this form.

Persons involved in deciding the summary ratings:

Names	Roles

Army EDIS Child Outcomes Summary Form (January 2008) Adapted with permission.
Original developed by the Early Childhood Outcomes Center with support from the Office of Special Education Programs, U.S. Department of Education.

EDIS Child Outcomes Summary Form
Additional Supporting Evidence for Outcome Ratings

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

Sources of information	Date	Child's skills or behaviors related to this outcome.

2. ACQUIRING AND USING KNOWLEDGE AND SKILLS

Sources of information	Date	Child's skills or behaviors related to this outcome.

3. TAKING APPROPRIATE ACTION TO MEET NEEDS

Sources of information	Date	Child's skills or behaviors related to this outcome.

Army EDIS Child Outcomes Summary Form (January 2008) Adapted with permission.
Original developed by the Early Childhood Outcomes Center with support from the Office of Special Education Programs, U.S. Department of Education.
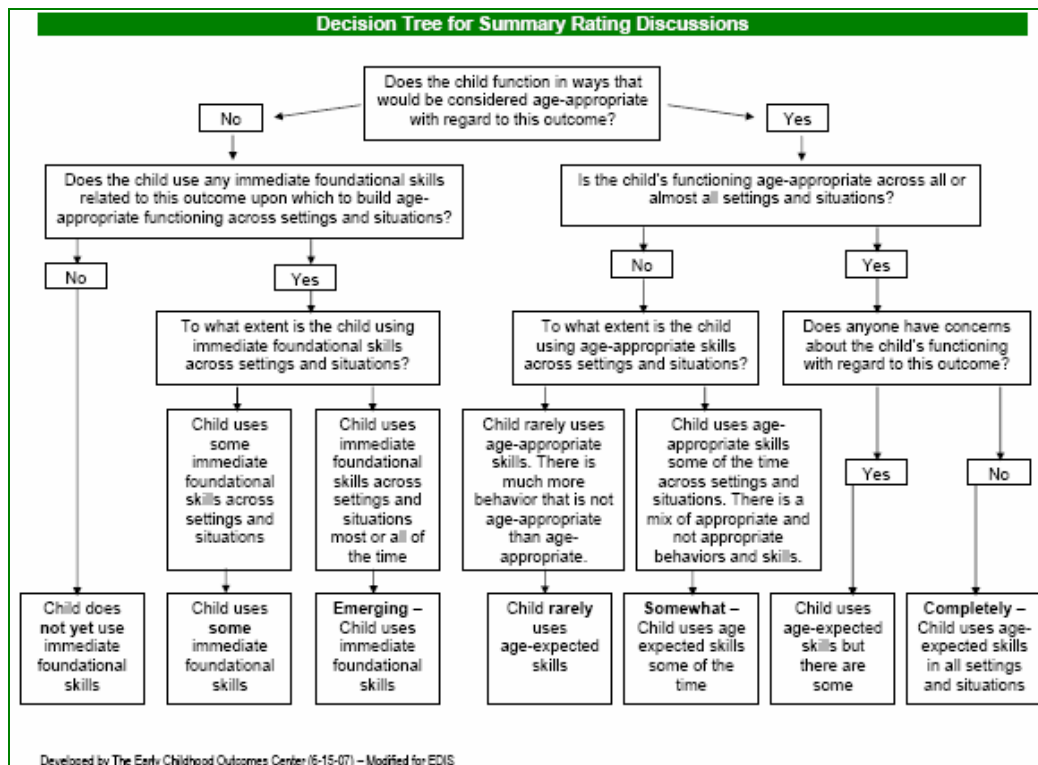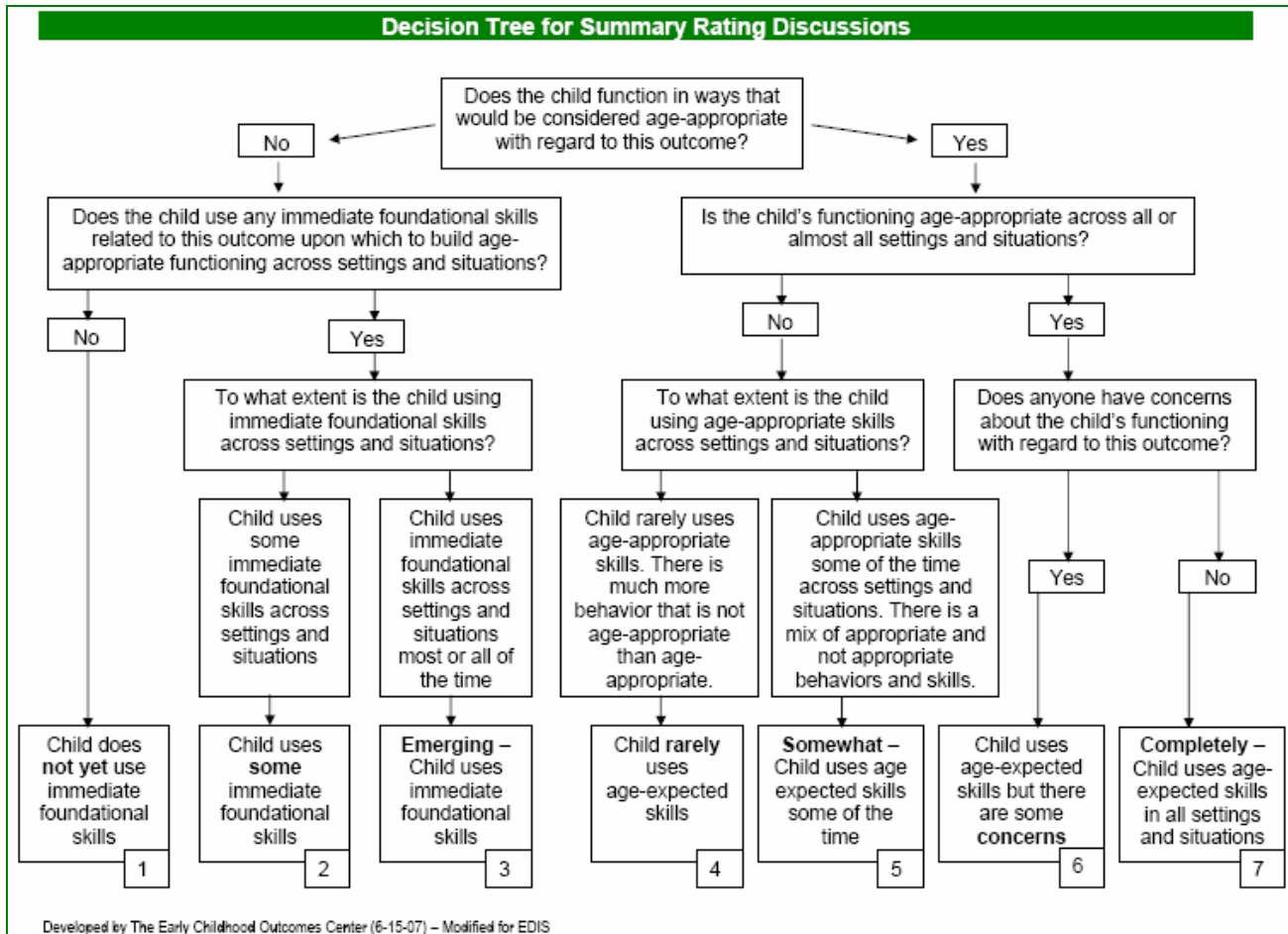
EDIS Measuring Child Outcomes

Definitions for Outcome Ratings Table

Overall Age Appropriate	**Completely** *means:*	7	• Child shows functioning expected for his or her age in **all or almost all everyday situations** that are part of the child's life. Functioning is considered **appropriate** for his or her age. • No one has any concerns about the child's functioning in this outcome area.
		6	• Child's functioning generally is considered **appropriate** for his or her age but there are **some significant concerns** about the child's functioning in this outcome area. These concerns may be substantial enough to suggest monitoring or possible additional support. • Although age-appropriate, the child's functioning may border on not keeping pace with age expectations.
Overall Not Age Appropriate	**Somewhat** *means:*	5	• Child shows functioning expected for his or her age **some of the time and/or in some situations**. Child's functioning is a mix of age appropriate and not age appropriate behaviors and skills. • Child's functioning might be described as like that of a **slightly younger child**.
		4	• Child shows some but not much age-appropriate functioning.
	Emerging *means:*	3	• Child does **not yet** show functioning expected of a child of his or her age in any situation. • Child's behaviors and skills include **immediate foundational skills** upon which to build age appropriate functioning. Child shows these immediate foundational skills most or all of the time across settings and situations. • Functioning might be described as like that of a **younger child**.
		2	• Child's behaviors and skills include some **immediate foundational skills** but these are not displayed very often across settings and situations.
	Not yet *means:*	1	• Child does **not yet** show functioning expected of a child his or her age in any situation. • Child's skills and behaviors also **do not yet include any immediate foundational skills** upon which to build age appropriate functioning. • Child's functioning might be described as like that of a **much younger child**.

Developed by the Early Childhood Outcomes Center

EDIS Documenting the Basis for the COSF Rating _Worksheet_

Child's Name: _____   Outcome: 1   2   3   Rating: 1   2   3   4   5   6   7

Functioning that will lead to immediate foundational skills	Functioning that shows immediate foundational skills	Functioning that is age appropriate
		Age appropriate, but raises some concerns

Behavior that is not age appropriate but not like that of a younger child or other serious developmental concerns in this outcome

Key behaviors or skills that are expected of children this age but are missing

Adapted with permission. Original developed by the Early Childhood Outcomes Center with support from the Office of Special Education Programs, U.S. Department of Education.

Decision Tree for Summary Rating Discussions

Does the child function in ways that would be considered age-appropriate with regard to this outcome?

No ← → **Yes**

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

Is the child's functioning age-appropriate across all or almost all settings and situations?

No — **Yes**

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

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

Does anyone have concerns about the child's functioning with regard to this outcome?

Child uses some immediate foundational skills across settings and situations

Child uses immediate foundational skills across settings and situations most or all of the time

Child rarely uses age-appropriate skills. There is much more behavior that is not age-appropriate than age-appropriate.

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.

Yes — **No**

Child does not yet use immediate foundational skills **1**

Child uses **some** immediate foundational skills **2**

Emerging – Child uses immediate foundational skills **3**

Child **rarely** uses age-expected skills **4**

Somewhat – Child uses age expected skills some of the time **5**

Child uses age-expected skills but there are some **concerns 6**

Completely – Child uses age-expected skills in all settings and situations **7**

Developed by The Early Childhood Outcomes Center (6-15-07) – Modified for EDIS

ECO DRAFT 5-9-07

What if We Can't Reach Consensus?

Suggestions for Reaching Consensus
- Team disagreement is a common concern, but this doesn't happen often.

- Structure the discussion to minimize the likelihood of reaching an impasse.

- Adopt a policy/procedure for dealing with these situations. Possible options:
  - Majority rules
  - Supervisor decides
  - No rating is given (ECO doesn't recommend!)

- Focus most of the discussion on the child's skills related to the outcome; don't go to selecting a rating number too quickly.

- Discuss the rationales for the differing ratings; focus on concrete descriptions and explore how these support a rating.

- Include more discussion on what skills and behaviors you would see in a typically developing child this age to provide more background for the discussion of this child.

- If unresolvable differences are occurring fairly frequently, revisit how the rating is being decided.

Possible Conversation Prompts for Groups Having Difficulty Reaching Consensus
Suggest that they re-visit documents that give examples of the breadth of content covered in each outcome. Have they discussed the child's skills regarding those aspects of the outcomes? Are the comments being considered relevant to the outcome up for rating discussion? Conversation prompts may include the following:

"I hear you describing the child's skills with regard to [insert content], what information do you have about the child's skills in [insert another relevant setting or situation or outcome component that hasn't yet been discussed]?"

"Tell me about the kinds of evidence that suggest to you this child has [insert modifier] age-expected behavior or has [insert modifier] immediate foundational skills?
  - When have you observed or documented those skills?
  - In what situations?
  - How frequently does that occur?
  - Were the accommodations/supports available in that setting those that are usually available to the child? What were they?
  - You identified this as an immediate foundational skill. Are there other steps in the sequence of development that need to occur between developing this skill and the age-expected skills in this area?
  - Is there other information you need or want to be better equipped to make this decision?

1

- o Has everyone on the team had a chance to talk about the skills they have observed and the evidence they are considering in reaching a rating? (Is any one person dominating conversation and that is part of the problem?)"

"What do most [insert child's age] year olds do with regard to this skill [or this outcome area]?"

"How does the child's disability/the child's delay/the change in the child's approach to these skills impact his/her ability to function in achieving this outcome RIGHT NOW?"

"Ratings are based on the child's functioning RIGHT NOW at one point in time. Thinking about the child's skills that have been discussed…
- o Right now is the child showing skills that are expected for his/her age?
- o Right now, is the child showing skills that are immediate foundations for the skills that other peers his/her age are showing?
- o How often? Can you describe what they are and when and where they occur?"

"What is the key difference between a X vs a X [insert numbers of ratings that are sources of disagreement]? What skills (or lack of skills) stand out in making you choose that number [or insert differentiating language associated with number]?"

"I hear a lot of discussion about wanting ratings to agree with eligibility. With some kids and in some states there is a lot of overlap between achievement of functional outcomes and eligibility; with other kids and in other states, there is not. Eligibility may focus a lot on testing done in contexts that differ substantially from those common in everyday functioning. Eligibility may or may not allow certain kinds of accommodations or supports; to the extent that these are available to the child in everyday situations, then they would be allowed in considering outcomes ratings. Eligibility usually is organized around specific domains whereas the functional outcomes are organized in a different way that could lead to different conclusions. Eligibility may assume corrections for prematurity; while this is a state decision, in many places outcomes ratings are based on a true chronological comparison. Taking all this into account, let's set eligibility decisions aside for a moment (though not necessarily the data you got to help make them), what do the child's skills and actions suggest about the child's functioning right now with regard to the outcome?"

Was this handout useful? Please share comments, suggestions, or questions with us at staff@the-eco-center.org .

2

Measuring Outcomes of early intervention services is a major initiative throughout the United States intended to understand *how* families benefit from these supports and services.

Early childhood intervention recognizes that parents and other key caregivers are the primary teachers of young children. Therefore, Army Educational & Developmental Intervention Services (EDIS) supports families and caregivers in gaining the competence and confidence needed to help their child learn.

Early intervention works in partnership with parents of infants and toddlers with disabilities to enhance their child's development and learning through everyday activities that are meaningful to the child and family.

Why should we Measure Outcomes?

- It tells us *how* our programs make a difference for the children and families we support and serve.
- It supplies information that we can use to improve early intervention supports and services.
- It provides data to demonstrate results to all stakeholders – to families, to our Commanders, to resource managers, and to the taxpayers.

What Outcomes will we Measure?

To understand *how* children and families benefit from early intervention, Army EDIS has adopted the three child outcomes and the five family outcomes that were developed by national experts in early intervention and accepted by the Office of Special Education Programs for implementation nationwide. These outcomes are regarded as benefits experienced as a result of child and family involvement in early intervention.

Child Outcomes

1. Children have positive social relationships.
2. Children acquire and use knowledge and skills.
3. Children take action to meet their needs.

Family Outcomes

1. Families understand their children's strengths, abilities and special needs.
2. Families know their rights and effectively communicate their children's needs.
3. Families help their children develop and learn.
4. Families feel they have adequate social support.
5. Families are able to access services and activities that are available to all families in their communities.

When will we begin Measuring Outcomes?

We will begin **Measuring Outcomes** in the Army EDIS programs during calendar year 2007. Although our EDIS programs have a rigorous system for collecting data on the critical steps in the early intervention process, this system does not currently collect or report information about the outcomes for children and families.

How will we Measure Outcomes?

Rather than developing our own outcome measurement tools, the EDIS leadership decided to use the tools developed by the National Early Childhood Outcomes (ECO) Center. Many of the States are already using these tools to measure outcomes.

These tools include brief surveys completed with families. They have been pilot tested and proven meaningful for measuring outcomes in early intervention.

By using common outcome measures, we will be able to compare the Army's services with similar services nationwide. This also allows our data to be included in national data analyses that inform lawmakers about the effectiveness of early intervention supports and services.

As we gain momentum toward **Measuring Outcomes**, many more decisions remain. The next steps are to:

- Identify the resources and other support we need to **Measure Outcomes**.
- Update the Special Needs Management Information System (SNPMIS) to support data collection and reporting.
- Design and implement training on **Measuring Outcomes**.
- Initiate a pilot program to test our methods.
- Communicate our success and lessons learned in the pilot program to other EDIS programs so they can benefit from our efforts.
- Provide ongoing support and technical assistance to EDIS programs Army-wide as we continue to **Measure Outcomes**.

**EDIS:
Making a Difference
for Children
by Partnering with
Families**

Your comments and questions about **Measuring Outcomes** are welcome. Please direct inquiries to:

For detailed information and resources, including copies of the ECO Family Outcomes Survey and the Child Outcomes Summary Form (COSF) see www.the-ecocenter.org

Measuring Outcomes in Early Intervention Services

UNDERSTANDING *HOW* CHILDREN AND FAMILIES BENEFIT FROM EARLY INTERVENTION

Tips for Having the Child Outcome Summary Form (COSF) Conversation with Families

The COSF uses a 7-point scale to rate a child's functioning in each of the three outcome areas. To determine a rating, the team must be familiar with the child's functional skills and behaviors across a variety of situations and settings. Parent input is crucial: family members see the child in situations that professionals do not. The team will need to learn what family members know about the child -- what the child does at home, at grandma's house, in the grocery store, etc.

The following prompts can help professionals converse with families about their child's functioning in the three outcome areas. Originally developed to accompany the COSF decision tree, the prompts elicit information from families to help determine the extent to which a child is functioning according to expectations for his or her age.

The COSF rating conversation is likely to occur after a general discussion about a child's skills and behaviors. When it is time to begin rating the first outcome area, review the information that has already been discussed about that area. Use a conversation opener such as, "We've talked about your child's skills in the area of…" and fill in the appropriate outcome: social emotional development, acquisition and use of knowledge and skills, or taking action to meet needs. Summarize the discussion that has taken place thus far, specific to the targeted outcome area.

Note whether the skills and behaviors you have summarized fall into the range of those expected for the child's age. If they do, ask about those skills in various situations and settings. For example:

"I've observed that your child is sharing toys with other children -- which is exactly what I would expect for his age. Would you say that he shares with others in all the different places he goes (home, child care, friends' homes, grocery store, mall, church, etc.)? Does he share with different children – cousins, children on the playground, children in child care?"

If information provided by the family indicates that the child consistently uses age-expected skills and behaviors, find out whether the family is concerned about this outcome by asking, "Do you have any concerns about your child's development in this area?"

Determine whether the family's concerns in this outcome area, if expressed, are significant enough to warrant monitoring. If not, the child's functioning may be considered "completely" within age expectations (7) on the rating scale. If team members, including the family, raise significant issues related to the targeted outcome, the child's functioning may be rated as "age-expected but with some concerns" (6) on the rating scale.

1

For the child who demonstrates age-expected functioning, but inconsistently, you will want to probe further. Acknowledge that the child is learning new skills that are within the realm of age expectations, and provide examples. To learn more about the extent to which the family sees age-expected skills, ask,

"At the child care center, I've seen him eat with a spoon sometimes and use his fingers at other times. Have you seen him using a spoon at home, at restaurants or other places? How often would you say he uses a spoon when eating?"

An affirmative response to the above question would indicate that the child's functioning can be considered "somewhat" age-expected (5) on the rating scale. However, if it sounds like the new skills are rarely demonstrated, ask, "Are these new skills mostly seen with the adults he is most comfortable with? Or used mostly in one setting?"

After determining that the new skills are quite incomplete and exhibited only rarely, consider a rating of "near somewhat" (4) on the scale. "Near somewhat" falls between "somewhat" (5) and "emerging" (3) on the 7-point scale.

If it has been determined that the child does NOT have age-expected behavior, note whether she has immediate foundational skills and give examples. Then ask about those skills in situations and settings. For example:

"We sat down to do some coloring and I observed that your child holds an oversize crayon and marks with it. Would you say that she holds large writing tools, such as oversize crayons or markers, and marks with them in various settings (home, child care, friends' homes, etc.)? Would you say she is using this skill with different people (immediate family members, grandparents, child care provider, etc.)?

If the various information sources provide evidence that the child uses immediate foundational skills across situations and settings, the child's functioning should be rated as "emerging" (3) on the rating scale. If the child uses immediate foundational skills only some of the time, in some situations or settings, her functioning can be rated at the level of "near emerging" (2) on the 7-point scale.

For children who are not showing age-expected functioning in the targeted outcome area, you will want to learn whether the family has observed skills and behaviors on which development can build. Provide examples of "immediate foundational skills" -- those that occur developmentally *just prior* to age-expected functioning. If no one on the team, including the family, has observed immediate foundational skills, consider a rating of "not yet" (1) on the rating scale. Describe the skills the child is showing that are foundational, in that they provide the basis to work toward immediate foundational skills. Explain to the family,

"Your child is showing interest in big crayons and markers. She plays with them, but has not started marking with them. We will build on her curiosity and interest to develop her skills in holding and using large writing tools."

2

Suggested Language for Talking with Parents about COSF Ratings

- **Completely (7)**
  - Compared with his 18 month old peers, Johnny has all of the skills that we would expect of a child this age in the area of (outcome). Coming next, you will see him…

- **Concerns (6)**
  - Compared with his 18 month old peers, Johnny has almost all of the skills that we would expect of his age in regard to (outcome). There are only minor concerns with how he (functional area that is of concern / quality of ability/ lacking skill).

- **Somewhat (5)**
  - Compared with his 18 month old peers, Johnny is somewhat where we would expect him to be at this age. This means that Johnny has some of the skills we would expect at this age in regard to (outcome) (you can list if you like), but he does not yet have all of the skills we would expect of this age which include (list functional skills child is lacking to be age appropriate).

- **Near Somewhat (4)**
  - Compared with his 18 month old peers, Johnny is near somewhat where we expect him to be at this age. This means that although he has a few of the skills we would expect in regard to (outcome), he is not using those skills in many different situations. We would expect him to have the following skills at this age (list).

- **Emerging (3)**
  - Compared with his 18 month old peers, Johnny has emerging skills. This means that he does not yet have the skills we would expect of a child his age. He has the skills that are necessary to build upon to achieve the age appropriate skills which include (list).

- **Near Emerging (2)**
  - Compared with his 18 month old peers, Johnny is near emerging. This means that he does not yet have age appropriate skills in this area. He is just beginning to have the foundational skills which will help him to achieve the age appropriate skills that we would expect. Those skills include (list)

- **Early Skills / Not Yet (1)**
  - Compared with his 18 month old peers, Johnny has the early skills in the area of (outcome). This means that Johnny has the skills we would expect of a much younger child. Skills typical of an 18 month old include (list). (Consider breaking down critical stepping stone skills)

Developed by Saundra Harrington, Norfolk, Virginia Part C

ARMY EDIS -Measuring Outcomes Initiative
Responses to Anticipated General Questions
October 2007

1. **When and how often will outcomes be measured?**

   ✋ Child Outcomes – Initially, annually, and at discharge for families that have been in the program at least six months from their initial IFSP.

   - o Within 30 days (on either side) of the initial IFSP for eligible children regardless of the child's age. May be completed as part of the evaluation process.
      - ⌨ *SNPMIS will alert you if outcomes are not entered within 30 days of their IFSP development or upon exiting the IFSP window, if no child outcomes have been entered.*

   - o Within 30 days (on either side) of each annual IFSP. Generally completed as part of the annual re-evaluation.
      - ⌨ *SNPMIS will alert you if outcomes are not entered within 30 days of their IFSP development or upon exiting the IFSP window, if no child outcomes have been entered.*

   - o At exit unless child outcomes were measured within the past 60 days (i.e., as part of an initial or annual IFSP).
      - ⌨ *SNPMIS will require you to enter outcome data if no outcome data was entered in the past 60 days. (See #5 for what to do if the family leaves unexpectedly.)*

   - o At exit unless the family has been in the program for <u>less than</u> six months from the date of their initial IFSP.

   🐾 Family Outcomes – Annual IFSP's and at discharge for families that have been in the program six months from their initial IFSP.

   - o Within 30 days (on either side) of each annual IFSP.
      - ⌨ *SNPMIS will alert you if outcomes are not entered within 30 days of their IFSP development or upon exiting the IFSP window, if no family outcomes have been entered.*

   - o At exit unless family outcomes were measured within the past 60 days (i.e., as part of an annual IFSP).
      - ⌨ *SNPMIS will require you to enter outcome data if no outcome data was entered in the past 60 days. (See #5 for what to do if the family leaves unexpectedly.)*

   - o At exit unless the family has been in the program for less than six months from their initial IFSP.

2. **What children/families will be involved?**

   ✋ Child Outcomes
   - o All eligible children with an IFSP.

   🐾 Family Outcomes
   - o All eligible families receiving early intervention support and services with an IFSP.

3. **How long should a child/family be in early intervention before outcomes are measured?**

   ✋ Child Outcomes
   - o Child outcomes are initially collected as part of the initial IFSP process. Accordingly, the child may be just starting when initial outcome data is collected.
   - o See answer to number one above ("when and how often will outcomes be measured?").

   🐾 Family Outcomes
   - o Family outcomes are collected for families in that are in the program six months or longer.
   - o If a family leaves within six months of their initial IFSP, family outcome data would not be gathered.

1

4. **How do we handle measuring outcomes for children/families that are transferring to another Army EDIS program?**

    ✋ Child Outcomes

    - o The sending program measures child outcomes in accordance with previously stated timelines/junctures.

    - o The receiving program uses the child's outcome exit data from the sending program as entry data, provided the exit outcome data was collected within the past 60 days. If it has been more than 60 days, the receiving program collects new outcome entry data for the child. Thereafter, outcomes are measured in accordance with previously stated timelines/junctures.

    🗣 Family Outcomes
    - o Outcomes are measured by the current program in accordance with previously stated timelines/junctures.

5. **What happens if the family leaves and exit outcomes are not attainable?**

    ✋ Child Outcomes
    - o It is recognized that families may leave unexpectedly.
        - 💻 *When this occurs, click the "Data Unavailable" checkbox on the outcomes window in SNPMIS to document that the family departed unexpectedly.*

    🗣 Family Outcomes
    - o It is recognized that families may leave unexpectedly.
        - 💻 *When this occurs enter click the "Data Unavailable" checkbox on the outcomes window in SNPMIS to document that the family departed unexpectedly.*

6. **Must a parent be provided prior written notice for collecting outcome information?**

    ✋ Child Outcomes
    - o This information is collected for program performance purposes. It is not intended to be used for evaluation purposes to determine initial or continuing eligibility. Therefore, it does not require prior written parental consent.

    🗣 Family Outcomes
    - o This information is collected for program performance purposes. It is not intended to be used for evaluation purposes to determine initial or continuing eligibility. Therefore, it does not require prior written parental consent.

✋ *Child Outcomes*

1. **Why are there only three child outcomes, but we look at five domains of development?**

    ✋ The outcomes were identified through an extensive process involving stakeholders across the nation. By focusing on three functional outcomes, the integrated nature of how children develop and learn is recognized. The three outcomes cut across the five developmental domains.

2. **Do we need to collect data for all three child outcome areas even when it is not an area of concern?**

    ✋ Yes.

3. **Should IFSP outcomes be developed for the three outcomes?**

    ✋ No. Outcomes are derived from family concern and priorities. When completing the COSF information regarding IFSP outcomes may be useful, however IFSP outcomes would not necessarily provide data on the three child outcome areas. Additionally, the child outcomes require comparing children's functioning to same-aged peers, something IFSP outcome attainment data does not readily provide.

2

4. **Will additional assessment time be required?**

    ✋ No. Child outcome information will be collected through evaluations and assessments that already occur in order as part

of initial and annual assessment. This information will be used to complete the COSF.

5. Is adjusted or chronological age used for premature babies?

✋ The rating scale is based on age expectations, comparing children's functioning to their same-age "non disabled" peers. The purpose of the scale is to generate data, ultimately for accountability purposes that can be compared across children, across programs, across states, etc. Adjusting the age would not make the data comparable. At entry, the team reviews available information about the child and makes a decision. The scale utilizes the terminology age-expected for a child and programs should consider how the child is functioning based on their chronological age. As the child develops, progress data at exit may indicate that the child has reached age-expected development.

🗣 *Family Outcomes*

1. Who should complete the family survey?

🗣 The parent/family members most actively involved with early intervention should be asked to complete the family survey. It is best if the early intervention practitioner/s actively working with the family is not directly involved with having the family complete the survey.

2. How long will the family survey take to complete?

🗣 This will depend on how many times the survey is read and if discussion occurs while completing the survey. Generally, it should take about 15 minutes to complete the survey.

3. If the family has twins who are both receiving early intervention services must the family complete two surveys?

🗣 Of course, we want to obtain the most accurate information as it relates to the family's experiences in early intervention. If the family feels that the responses for both children are the same then they would only need to complete one survey. If the family feels that, the responses would be different for the children then have the family complete two surveys. The decision should be made on an individualized basis.

💻 *Please note, however, that although the family may only fill out one survey, the results may need to be entered into SNPMIS for each child in the family (depending on activity dates for each child), as the outcomes in SNPMIS are tied to child, not a sponsor (family).*

3