

Army

Educational & Developmental Intervention Services

~EDIS~

Measuring Outcomes Initiative

Module One

October 2007



Army Educational and Developmental Intervention Services (EDIS)

Show Me The Data! Understanding Early Childhood Outcomes Army EDIS

Module One

Army EDIS Measuring Outcome Initiative

Slide Notes & Background Information

SLIDE 1:

This initial training module provides an overview of the Army EDIS Measuring Outcomes Initiative.

HANDOUT 1.1: Outcomes Tri-fold

The Measuring Outcomes Initiative tri-fold was the first official publication associated with this initiative. The tri-fold was designed to promote early awareness about the Army EDIS Measuring Outcomes Initiative.

Participants will... understand the fundamentals of the Army EDIS Measuring Outcomes Initiative understand why this is needed and how it will be accomplished understand the Early Childhood Outcomes National initiative and associated resources including: ECO Center Summary tools Evidence statements

Measuring Outcomes Initiative

Module One

SLIDE 2:

Module One Objectives - review objectives

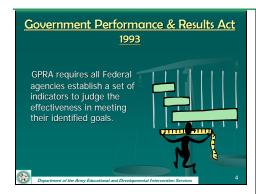
This module provides a general overview of the Army EDIS Measuring Outcomes Initiative, including why it is important and why it is needed. There are three modules.

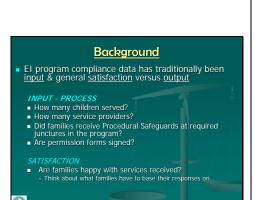
Module Two will specifically address child outcomes and use of the Child Outcomes Summary Form (COSF) and Module Three will address family outcomes and use of the Family Outcomes Survey (FOS).



SLIDE 3:

We all know that early intervention is a good program. Yet, we do not have the program wide performance data to verify the results. It is this data that we will be collecting through the Army EDIS Measuring Outcomes Initiative to make data-driven program and policy decisions, to identify program improvement opportunities, and to demonstrate program efficacy.





SLIDE 4:

Emphasis on accountability is driven by GPRA. GPRA was designed to improve Government-wide program effectiveness, Government accountability, and ultimately public confidence. GPRA requires agencies to identify measurable performance goals against which actual achievements can be compared.

With the reauthorization of IDEA in 2004 came an increased focus on improving educational results and functional outcomes for children with disabilities and an increased emphasis on associated monitoring and accountability efforts.

Accountability increasingly means looking at results not just the process, which was the focus in the past.

The Office of Special Education Programs (OSEP) in the U.S. Department of Education now requires states to report outcomes data for children served through Part C and Part B Preschool of the Individuals with Disabilities Education Act (IDEA) as part of their Annual Performance Report (APR). Many states plan to use data on child and family outcomes to improve their programs in addition to providing the required information to the federal government. (Outcomes 101: ECO Q&A) So too does Army EDIS. More information is available at www.expectmore.gov

SLIDE 5:

Reinventing Government by Osbourne and Gaebler (1992) introduced the concept of results-oriented government and emphasized the importance of measuring outcomes rather than inputs. This change emphasis became codified at the federal level in GPRA 1993.

Performance and management assessments employing a Program Assessment Rating Tool (PART), recently conducted by the U.S. Office of Management and Budget (OMB), gave both Part C and Preschool Part B Program scores of "0" in results and accountability. OMB's conclusions about both programs were "results not demonstrated" and "new measures needed"

(www.whitehouse.gov/omb/budget/fy2004/pma.html).

Accordingly, there is an increased focus on results rather than process alone. While process related input and satisfaction information is useful, this information is not results-oriented. Judging the effectiveness of any program requires looking at results, not simply at the process.

In thinking about satisfaction, consider what families use as the basis of their satisfaction rating. Early intervention is often the first experience families have in this type of program. They often do not have comparative early intervention experiences, so provided the staff is friendly and helpful satisfaction will likely be positive. Furthermore, satisfaction alone is not results-oriented.

ECO (April 2004). Considerations Related to Developing a System for Measuring Outcomes for Young Children with Disabilities and Their Families.



SLIDE 6:

Input and satisfaction data do not provide outcome data.

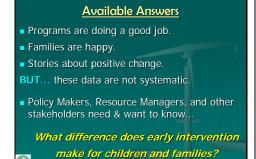
Results data is needed to address the needs identified on this slide.

IDEA 2004: Congress finds that there is an urgent and substantial need- to enhance the development of infants and toddlers with disabilities; to reduce the educational costs by minimizing the need for special education after infants and toddlers with disabilities reach school age; to maximize the potential for individuals; to enhance the capacity of families to meet the special needs of their infants and toddlers with disabilities.

SLIDE 7:

The preamble of IDEA 2004 specifically identified the areas of need included on this slide. In addition, increased emphasis was placed on early brain development and the critical importance of early development.

The data we currently capture does not provide the outcome data to address these areas.



SLIDE 8:

Anecdotically we know early intervention programs are doing good work and that families are generally pleased. We have many personal and family expressed accounts of positive changes for children and useful experiences for families participating in early intervention. However, we do not have the systematic data across the program. This is what implementation of the Army EDIS Measuring Outcomes Initiative will provide.

OUTCOMES (results)

- Statements about what early intervention strives to do for children and families.
- Benefits experienced as a result of child and family involvement in early intervention.
- Not simply measures of services received or satisfaction.



SLIDE 9:

Outcomes referenced in the Army EDIS Measuring Outcomes Initiative are not the same as IFSP outcomes that we write for individual children and families. Rather the outcomes in the Army EDIS Measuring Outcomes Initiative are broader results that provide a systematic look at what children have accomplished as a result of early intervention. This aggregated data will provide system wide information about the program.

Outcomes are measurable conditions desired for the population of children with disabilities and for families participating in early intervention services. These are broad statements not the refined family specific routines-based outcomes (goals) we develop and include on IFSPs.

Outcomes are the out-put data versus input data discussed earlier. That is what happens as a result of services provided.

An outcome is a benefit experienced as a result of services and supports provided for a child or family. The fact that a service has been provided does not mean that an outcome has been achieved. Likewise, an outcome is not the same as satisfaction with the services received. The impact that those services and supports have on the functioning of children and families constitutes the outcome. Consider the example of a child with autism working with a therapist to increase his communication skills (receiving a service). If that child learns words and uses them to convey his needs to others, then he has achieved an outcome. Similarly, a family may receive information about their child's disability (the service provided), but if the information enables them to assist in their child's learning and development more effectively, then the family has achieved an outcome. (Outcomes 101: ECO Q&A)

Programs Need...

- Clear indicators of child and family outcomes to make results-based program decisions.
- Programs need OUTCOME data to:
 - understand how early intervention makes a difference for the children and families they support and serve.
 - determine how to make good programs better by looking at specifically how participants benefit from the program.
 - answer stakeholders.



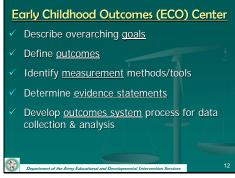
How to answer the question... What difference does early intervention make for children and families? ...this is not simple and not obvious.

SLIDE 10:

Programs have a need for outcome data for a variety of reasons, including those stated on this slide.

SLIDE 11:

Developing outcomes and an outcomes system is no doubt a daunting task. Fortunately, the Early Childhood Outcomes (ECO) Center has developed a great array of resources that we will use in implementing the Army EDIS Measuring Outcomes Initiative.







SLIDE 12:

The remainder of this module provides a review of the child outcomes and family outcomes.

SLIDE 13:

Specific to child outcomes, these topics will be addressed in the following slides.

SLIDE 14:

Stated on this slide are the overarching goal and the three child outcomes. In order to achieve this overarching goal young children need to be successful in each of the three Child Outcome areas.

The outcomes address three areas of child functioning necessary for each child to be an active and successful participant at home, in the community, and in other places like a child care program or day care. (Outcomes 101: ECO Q&A)

Q. 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.

Functionality is not domains-based, rather children function across developmental domains. Functionality can involve multiple domains and can cross domains. Functional outcomes refer to behaviors that integrate skills across domains.

Q. Should IFSP outcomes be developed for each of the three Child Outcomes?

A. No. IFSP Outcomes and strategies should still be derived from family concerns and priorities. However, IFSP teams may want to consider the three Child Outcome areas when discussing what functional areas are important.

Outcomes Are Functional Functional outcomes: Refer to things that are meaningful to the child in the context of everyday living Refer to an integrated series of behaviors or skills that allow the child to achieve the important everyday goals Department of the Army Educational and Developmental Intervention Services 15

Functional Outcomes Not domains-based, not separating child development into discrete areas (communication, gross motor, etc.) Refer to behaviors that integrate skills across domains Can involve multiple domains Emphasize how the child is able to carry out meaningful behaviors in a meaningful context **Department of the Army Educational and Developmental Internetion Services** 16

Outcomes Reflect Global Functioning ■ Each outcome is a snapshot of: ■ The whole child ■ Status of the child's current functioning ■ Functioning across settings and situations ■ Rather than: ■ Skill by skill ■ In one standardized way ■ Split by domains Department of the Army Educational and Developmental Intervention Services 17

SLIDE 15:

Q. What is a functional outcome?

A. The three child outcomes are functional outcomes in the sense that they refer to behaviors, knowledge, and skills that are meaningful to all 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. To be successful in these settings, it is important for children to be able to, for example, get along with others, follow the rules in a group, continue to learn new things, and take care of their basic needs in an appropriate way. (Outcomes 101: ECO Q&A)

SLIDE 16:

The focus is functionally meaningful actions. Many assessment tools have items that measure discrete skills that are not individually meaningful to the child. The skills are meaningful only when they are integrated with other things so that the child can accomplish something. (Outcomes 101: ECO Q&A)

Q. How are the functional outcomes different from domains?

A. Many assessment tools examine children's development in different domains. Domains are areas of development such as social, fine motor, gross motor, cognitive, or language. Functional outcomes refer to behaviors that are meaningful in the context of a child's everyday living. Sometimes domain areas on an assessment 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." Functional outcomes focus on what the child can do and needs to be able to do in the context of his or her life. These are integrated behaviors that usually cross multiple domains and allow children to achieve something meaningful. 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. (Outcomes 101: ECO Q&A)

SLIDE 17:

The three child outcomes are meaningful to the life of the child and family in the context of everyday routines and activities.

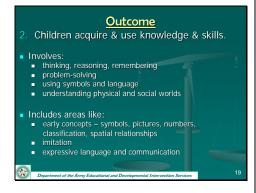
They represent an integrated series of behaviors or skills that allow the child and family to achieve the outcomes.

The three child outcomes shift the focus from domain-specific skills/behaviors to thinking about how skills and behaviors are functional and meaningful in day-to-day life.



SLIDE 18:

Outcome 1 - Positive social-emotional skills refer to how children get along with others, how they relate with adults and with other children. For older children, these skills also include how children follow rules related to groups and interact with others in group situations such as a child care center. This outcome includes the ways the child expresses emotions and feelings and how he or she interacts with and plays with other children. (Outcomes 101: ECO Q&A)

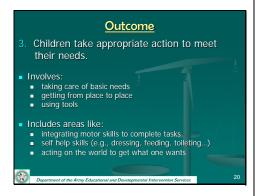


SLIDE 19:

Outcome 2 - The acquisition and use of knowledge and skills refers to children's abilities to think, reason, remember, problem solve, and use symbols and language. This outcome also encompasses children's understanding of the physical and social worlds. It includes understanding of early concepts (e.g., symbols, pictures, numbers, classification, spatial relationships), imitation, object permanence, the acquisition of language and communication skills, and early literacy and numeracy skills. This outcome also addresses the precursors that are needed so that children will experience success later in elementary school when they are taught academic subject areas (e.g., reading, mathematics). (Outcomes 101: ECO Q&A)

Q. Doesn't all functioning require the acquisition and the use of knowledge and skills (Outcome 2)?

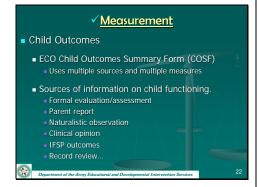
A. It is certainly true that knowledge and skills underlie functioning in each of the three outcome areas. Outcome 2 refers to the specific set of knowledge and skills that lay the foundation for more formal learning later in school settings. The specific skills referred to in Outcome 2 relate to processes like acquiring general knowledge, thinking, reasoning, problem solving, and learning new vocabulary words. Outcome 1 encompasses the skills required to get along with others and Outcome 3 encompasses the skills needed to take care of one's own needs. (Outcomes 101: ECO Q&A)

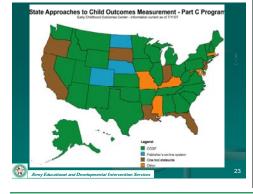


SLIDE 20:

Outcome 3 - The use of appropriate behavior to meet needs refers to the actions that children employ to take care of their basic needs, including getting from place to place, using tools (e.g., fork, toothbrush, crayon), and in older children, contributing to their own health and safety. This outcome includes how children take care of themselves (e.g., dressing, feeding, hair brushing, toileting), carry out household responsibilities, and act on the world to get what they want. This outcome addresses children's increasing capacity to become independent in interacting with the world and taking care of their needs. (Outcomes 101: ECO Q&A)







SLIDE 21:

The 3 Child Outcomes represent integrated development not domainbased areas. Robin McWilliam, Director, Center for Development at Vanderbilt University defined these foundations for learning as Engagement, Independence, and Social Relationship. The foundational or "alternate domains" of development relate to the three Child Outcome areas.

Reference: McWilliam, R.A. (1992). *Family-centered intervention planning a routines-based approach*. Communication Skill Builders, Tucson, AZ.

SLIDE 22:

Measurement refers to the method or tool used to collect the data. For the Army EDIS Measuring Outcomes initiative, we'll be using the Child Outcomes Summary Form (COSF) developed by the ECO Center.

HANDOUT 1.2: Child Outcomes Summary From (COSF)

Q. What is the Child Outcomes Summary Form (COSF)?

The COSF is a process developed by the Early Childhood Outcomes Center 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)

Q. What sources of information can be used to determine a child's level of functioning on each of the three outcomes?

A. Multiple sources of information can and should be used. The determination of a child's level of functioning for each outcome area on the COSF, relative to age expectations, can be based on observations in the child's home, in the classroom, or in other settings where that child usually spends time; criterion- or curriculum-based instruments, or norm-referenced scales; interviews with family members, child-care providers, and caregivers; informed clinical opinion; and work samples. (Outcomes 101: ECO Q&A)

Module Two will specifically address the COSF and how it is completed.

SLIDE 23:

This slide illustrates the states that have elected to use the COSF to measure child outcomes. Clearly, the majority of the states are using the COSF or a modification of it.



SLIDE 24:

The COSF uses a 7-point scale for rating a child's functioning in each of the three outcome areas. To determine a rating someone on the team must be familiar with the child's functioning in the outcome across a variety of situations and settings. The team needs to think about the many skills and behaviors that allow the child to function in an age-expected way in each outcome area.

The COSF requires information from a variety of sources to rate each outcome area. In this sense, it is like a funnel taking information from a variety of sources then condensing it into a score for each outcome. The COSF provides a snap shot – a reduction of rich data.

The rating conveys the child's standing relative to age-expected development. Seven is the highest rating on the scale and conveys typical development – the child shows functioning expected for his/her age in all or almost everyday situations that are part of the child's life. Functioning is considered appropriate for his/her age. One on the scale conveys farthest from age-expected development.

Q. What does a team need to know to complete the COSF?

A. To determine a COSF rating, one or more members of the team must be able to describe/discuss each of the following: the child's functioning across settings and situations, age-expectations for children's development and functioning in the general population, the content of the three child outcomes, guidelines for using the Child Outcomes Summary Form, and appropriate age expectations for child functioning within the child's culture. (Outcomes 101: ECO Q&A)



SLIDE 25:

Evidence statements are statements that incorporate a statistic and provide- evidence as to whether or not an outcome has been achieved.

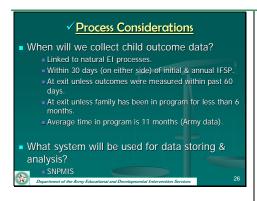
With the child outcomes, we are measuring change, so at least two data points are needed. Minimally, this will be entry and exit.

The three evidence statements identified here are the Office of Special Education Program (OSEP) reporting requirements that the Army EDIS programs have adopted.

There are five reporting categories for each of the three Child Outcomes. Three outcomes times five measures equal 15 numbers. For each evidence statement there will be five responses.

Using the entry and exit data from the Child Outcomes Summary (COSF) form entered into the Special Needs Management Information System (SNPMIS) will provide us the data needed for these reporting requirements.

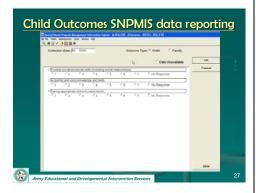
SNPMIS has an embedded formula that uses the COSF data to figure the five reporting categories. The COSF calculator at the ECO web site is a resource that can help people see how the calculations work. http://www.fpq.unc.edu/~eco/pdfs/COSF_to_OSEP_Calculator_Analytic.xls



SLIDE 26:

Child outcome data will be collected initially, annually, and at discharge for families that have been in the program at least six months from their initial IFSP. Exit data will not be gathered for children in the program less than 6 months from the date of their initial IFSP.

HANDOUT 1.3: Army EDIS Measuring Outcomes Responses to Anticipate Questions October 2007



SLIDE 27:

This slide illustrates the SNPMIS screen where data will be entered.



SLIDE 28:

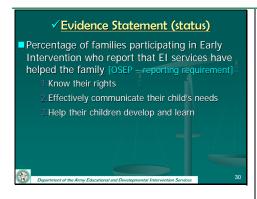
Specific to family outcomes in the following slides will cover these areas.



SLIDE 29:

The overarching goal for families is stated on this slide.

The five family outcomes were developed by ECO. Even though programs are not required by OSEP to examine each of these outcomes, many states are interested in learning about all of these family outcomes. So too is the Army EDIS Program. Accordingly, data relative to these outcomes will be collected via the ECO Family Outcomes Survey (FSO).

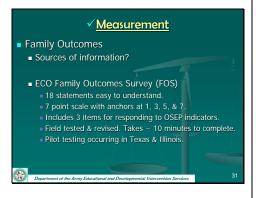


SLIDE 30:

The three OSEP reporting requirements related to families for early intervention are stated here. These are status measures versus change measures. Therefore, two data points are not required.

Status is measured because "family outcomes may not be developmental in nature (i.e., the natural progression of change over time may not always move forward). In fact, some have described a cyclical nature for family challenges and adaptation at different point of child and family development" (Bailey & Bruder, 2005, p. 5). Accordingly, measuring status at exit is more realistic than measuring change.

Bailey, D., & Bruder, M. B., (January 2005). Family Outcomes of Early Intervention and Early Childhood Special Education: Issues and Considerations. Early Childhood Outcomes Center. P. 5.



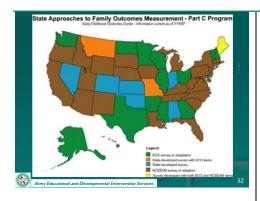
SLIDE 31:

Clearly, the source of information on family outcomes is families. Accordingly, family completed surveys are being used to gather this information. Specifically, the Army EDIS have adopted the Early Childhood Outcomes Center Family Outcomes Survey (FOS).

HANDOUT 1.4:Family Outcomes Survey (FOS)

Q. What is the Family Outcomes Survey (FOS)?

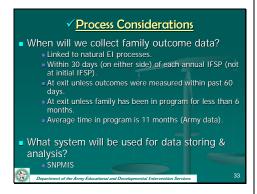
A. The Family Outcomes Survey (FOS) was developed by the ECO Center to provide an assessment tool for states and programs to use to determine the extent to which the five family outcomes were attained. Even though programs are not required by OSEP to examine these outcomes, many states are interested in learning about family outcomes. The tool consists of 18 items. Fifteen of these items address the five family outcome statements recommended by the ECO Center. The last three items provide the data that programs are required to report to OSEP about families. These three questions differ on the Part C and the Part B Preschool versions of the survey because the programs have different OSEP reporting requirements. Parallel versions of the FOS have also been developed for families of children birth to 3 years or 3 through 5 years participating in general early childhood services who may not have children enrolled in Part C or Part B Preschool services. All versions of the survey are available on our website (see link below) and can be downloaded and reproduced free of charge. On survey reproductions, include the following citation: "Developed by the Early Childhood Outcomes Center with support from the Office of Special Education Programs, U.S. Department of Education."



SLIDE 32:

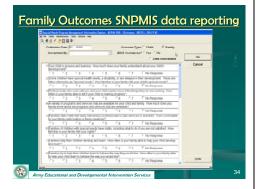
This slide illustrates the different approaches states are taking to address family outcomes measurement.

Many states have chosen to use the survey developed by the National Center for Special Education Accountability Monitoring (NCSEAM).



SLIDE 33:

Family outcome data will be collected annually and at discharge for families that have been in the program at least six months from their initial IFSP. Exit data will not be gathered for families in the program less than 6 months from the date of their initial IFSP.



SLIDE 34:

This slide illustrates the SNPMIS screen where family outcome data will be entered.



SLIDE 35:

The Early Child Outcomes Center continues to update the webpage with useful resources.



Army Educational and Developmental Intervention Services (EDIS)

Module One

Army EDIS Measuring Outcome Initiative

Handouts

- 1.1 Army EDIS Measuring Outcomes Initiative tri-fold

1.1 Army EDIS Measuring Outcomes Initiative tri-fold

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

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

Family Outcomes

- Families understand their children's strengths, abilities and special needs.
- Families know their rights and effectively communicate their children's needs
- children's needs.
 3. Families help their children develop and learn.
- Families feel they have adequate social support.
- 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



1.2 Child Outcomes Summary Form (COSF)

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2. ACQUIRING AND USING KNOWLEDGE AND SKILLS

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

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

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

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

Supporting evidence for answer to Question 2a

Source of Information	Date	Summary of Relevant Results

2b. (if Question 2a has been answered previously): Has the child shown any new skills or behaviors related to acquiring and using knowledge and skills since the last outcomes summary? (Circle one number)

Yes	1+	Describe progress:
No	2	

Draft under development by the Early Childhood Outcomes Center (ECO) - revised: 4/20/06

3. TAKING APPROPRIATE ACTION TO MEET NEEDS

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

- Taking care of basic needs (e.g., showing hunger, dressing, feeding, tolleting,
- Contributing to own health and safety (e.g., follows rules, assists with hand washing, avoids inedible objects) (if older than 24 months)
 Getting from place to place (mobility) and using tools (e.g., forks, 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? (Circle one number)

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

Supporting evidence for answer to Question 3a

Source of Information	Date	Summary of Relevant Results

3b. (If Question 3a has been answered previously): Has the child shown any new skills or behaviors related to taking appropriate action to meet needs since the last outcomes summary? (Circle one number)

Yes	1→	Describe progress:
No	2	

Draft under development by the Early Childhood Outcomes Center (ECO) - revised: 4/20/05

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.
 - 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.
 - Within 30 days (on either side) of each annual IFSP. Generally completed as part of the annual reevaluation.
 - 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.
 - At exit unless child outcomes were measured within the past 60 days (i.e., as part of an initial or annual IFSP).
 - SNPMIS will <u>require</u> 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.)
 - 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
 - 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.

- 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.
 - 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
 - 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
 - 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.

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).

1.4 Family Outcomes Survey (FSO)

Family Outcomes Survey

Part C Version

The Family Outcomes Survey is designed to provide a way for you to describe your family and the ways you support your child's needs.

Instructions:

- . This survey should be filled out by the person in your family who has the most interaction with early intervention.
- All of the responses include the word "we" or "our." This refers to your family. Usually this means parents and others who support and care
 for your child. But every family is different, so think of what "family" means to you when answering.
- . On every page, you will be asked to answer questions like the example below:

How much does your family know about dinosaurs?

1	2	3	4	5	6	7
We know a little about dinoszurs		We know some about dinosaurs		We know a good amount about dinosaurs		We know a great deal about dinosaurs

- . Read each question and circle the number that best describes your family right now.
- If a statement almost describes your family, but not quite, circle the number just to the left or the right. For example if you feel that the statement 5 "We know a good amount about dinosaurs" almost describes your family, but not quite—circle the 4.

If you do not know how to answer a question, or if you are not comfortable answering the question, skip it and go to the next question.

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Family Outcomes Survey

UNDERSTANDING YOUR CHILD'S STRENGTHS, ABILITIES, AND SPECIAL NEEDS

1. Your child is growing and learning. How much does your family understand about your child's development?

1	2	3	4	5	6	7
We are just beginning to		We understand some about our		We understand a good amount about		We understand a great deal about
understand our child's development		child's development		our child's development		our child's development

Some children have special health needs, a disability, or are delayed in their development. These are often referred to as "special needs."
How familiar is your family with your child's special needs?

1	2	3	4	5	6	7
We are just beginning to understand our child's special needs		We understand some about our child's special needs		We understand a good amount about our child's special needs		We understand a great deal about our child's special needs

 Professionals who work with you and your child want to know if the things they do are working. How often is your family able to tell if your child is making progress?

1	2	3	4	5	6	7
We seldom can tell if our child is		We sometimes can tell if our child is		We usually can tell if our child is		We almost always can tell if our child
making progress		making progress		making progress		is making progress

Part C version 2

KNOWING YOUR RIGHTS AND ADVOCATING FOR YOUR CHILD

4. A variety of programs and services may be available to help your child and family. How much does your family know about the programs and services that are available?

1	2	3	4	5	6	7
We are just beginning to learn about the programs and services that are available		We know some about the programs and services that are available		We know a good amount about the programs and services that are available		We know a great deal about the programs and services that are available

 Families often meet with early intervention professionals to plan services or activities. How comfortable is your family participating in these meetings?

1	2	3	4	5	6	7
We are just beginning to feel comfortable participating in meetings		We are somewhat comfortable participating in meetings		We are generally comfortable participating in meetings		We are very comfortable participating in meetings

6. Families of children with special needs have rights, including what to do if you are not satisfied. How familiar is your family with your rights?

1		2	3	4	5	6	7
We are just beginning to understand or rights	-		We understand some about our rights		We understand a good amount about our rights		We understand a great deal about our rights

Part C version 3

HELPING YOUR CHILD DEVELOP AND LEARN

7. Families help their children develop and learn. How much does your family know about how to help your child develop and learn?

1	2	3	4	5	6	7
We are just beginning to know how to help our child develop and learn		We know some about how to help our child develop and learn		We know a good amount about how to help our child develop and learn		We know a great deal about how to help our child develop and learn

 Families try to help their children learn to behave the way they would like. How much does your family know about how to help your child learn to behave the way your family would like?

1	2	3	4	5	6	7
We are just beginning to know how to help our child behave the way we want		We know some about how to help our child behave the way we want		We know a good amount about how to help our child behave the way we want		We know a great deal about how to help our child behave the way we want

 Families work with professionals to help their children learn and practice new skills at home or in their communities. How often does your family help your child learn and practice these new skills?

1	2	3	4	5	6	7
We are just beginning to help our child learn and practice these skills		We sometimes help our child learn and practice these skills		We usually help our child learn and practice these skills		We routinely help our child learn and practice these skills

Part C version 4

HAVING SUPPORT SYSTEMS

10. Many people feel that talking with another person helps them deal with problems or celebrate when good things happen. How often does your family have someone your family trusts to listen and talk with when they need it?

1	2	3	4	5	6	7
We seldom have someone to talk with about things when we need it		We cometime: have comeons to talk with about things when we used it		We usually have someone to talk with about things when we need it		We almost always have someone to talk with about things when we need it

11. Families sometimes must rely on other people for help when they need it, for example to provide a ride, run an errand, or watch their child for a short period of time. How often does your family have someone you can rely on for help when your family needs it?

1	2	3	4	5	6	7
We seldom have someone we can rely on for help when we need it		We sometimes have someone we can rely on for help when we need it		We usually have someone we can rely on for help when we need it		We almost always have someone we can rely on for help when we need it

12. Most families have things they enjoy doing. How often is your family able to do the things your family enjoys?

1	2	3	4	5	6	7
We seldom are able to do the things we enjoy		We sometimes are able to do the things we enjoy		We usually are able to do the things we enjoy		We almost always are able to do the things we enjoy

Part C version

5

ACCESSING YOUR COMMUNITY

13. All children need medical care. How well does your family's medical care meet your child's special needs?

1	2	3	4	5	6	7
Our medical care meets few of our child's needs		Our medical care meets some of our child's needs		Our medical care meets many of our child's needs		Our medical care meets almost all of our child's needs

- 14. Many families have a need for quality childcare. By this, we do not mean occasional babysitting, but regular childcare, either part-day or full-day. How well does your family's childcare meet your child's needs?
 - ☐ CHECK HERE IF YOUR FAMILY HAS NOT WANTED CHILD CARE, AND GO TO QUESTION 15.
 - ☐ CHECK HERE IF YOUR FAMILY HAS WANTED CHILD CARE BUT IT IS NOT CURRENTLY AVAILABLE, AND GO TO QUESTION 15.

1	2	3	4	5	6	7
Our childcare meets few of our child's needs		Our childcare meets some of our child's needs		Our childcare meets many of our child's needs		Our childcare meets almost all of our child's needs

- 15. Many families want their child to play with other children or participate in religious, community, or social activities. How often does your child participate in these activities right now?
 - ☐ CHECK HERE IF YOUR FAMILY HAS NOT WANTED YOUR CHILD TO PARTICIPATE IN SUCH ACTIVITIES AND GO TO QUESTION 16.

1	2	3	4	5	6	7
Our child seldom participates in the activities we want		Our child sometimes participates in the activities we want		Our child usually participates in the activities we want		Our child almost always participates in the activities we want

Part C version

6

THE HELPFULNESS OF EARLY INTERVENTION

The next questions ask how well early intervention has helped your family. When answering, think about the early intervention services you have received.

16. To what extent has early intervention helped your family know and understand your rights?

1	2	3	4	5	6	7
Early intervention has done a poor job of helping us know our rights		Early intervention has done a fair job of helping us know our rights		Early intervention has done a good job of helping us know our rights		Early intervention has done an excellent job of helping us know our rights

17. To what extent has early intervention helped your family effectively communicate your child's needs?

1	2	3	4	5	6	7
Early intervention has done a poor job of helping us communicate our child's needs		Early intervention has done a fair job of helping us communicate our child's needs		Early intervention has done a good job of helping us communicate our child's needs		Early intervention has done an excellent job of helping us communicate our child's needs

18. To what extent has early intervention helped your family be able to help your child develop and learn?

1	2	3	4	5	6	7
Early interventi has done a poor of helping us he our child develo and learn	job p	Early intervention has done a fair job of helping us help our child develop and learn		Early intervention has done a good job of helping as help our child develop and learn		Early intervention has done an excellent job of helping us help our child develop and learn

Thank you for completing this survey!

Part C version