

# Rhode Island Early Intervention Certification Standards

## Policies and Procedures

### X. Child and Family Outcomes

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In order to ensure positive outcomes for children and families, certified EI providers are required to measure the impact of their work. Rhode Island uses a child and family outcomes measurement process supported by the Early Childhood Technical Assistance Center. This process assesses the effectiveness of individual EI programs and system as a whole. Rhode Island uses data resulting from this process to guide practice and support program improvement.

The Child Outcomes Summary Process measures progress in the following areas:

Children will:

- Have positive social emotional development, including positive social relationships
- Acquire and use knowledge and skills
- Use appropriate behaviors to meet their needs

Families will:

- Know their rights
- Effectively communicate their child's needs
- Help their children develop and learn

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#### Child Outcomes

#### Child Outcomes Measurement System

- EI providers must use the *Early Intervention/Early Childhood Special Education Global Child Outcomes Measurement System* to measure child progress related to the three global child outcomes. This process outlines a common system by which child outcome data is collected, reported, and used by Early Intervention (EI) and Early Childhood Special Education (ECSE) providers across the state.
- *The Early Intervention/Early Childhood Special Education Global Child Outcomes Measurement System* can be found at: <http://www.ric.edu/sherlockcenter/eicfoutcomes.html>
- The Child Outcomes Measurement System includes:
  - A process for collecting, organizing, summarizing and assessing a child's progress in Early Intervention.
  - Information relative to a child's development and functioning is gathered utilizing:
    - multiple sources such as the child's family and others who know the child, and
    - multiple measures, including observation, interviews, and direct assessments that are appropriate for the child's level of development and individual characteristics.
  - Individuals (including the family) who contribute information about the child and participate collectively in discussion(s) that:
    - Consider the child's functioning across settings and situations

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- Compare the child’s functioning to same age peers
- Culminate in an overall statement of child functioning comparing the child to typically developing peers. The statement is then converted into a numerical “rating”.
- Consensus building conversations with families that include a verbal description of key phrases and characteristics (foundational, immediate foundational and age expected skills) of child functioning re: the three global child outcomes and not the numerical ratings.
- Documentation on the designated section of the RI Child Outcomes Summary Form that provides supporting evidence for the overall statement of functioning and corresponding rating in each outcome area (where applicable):
  - Age expected functioning
  - Immediate foundational skills/functioning that is not age expected
  - Foundational skills/functioning that is not yet age expected
- The Child Outcomes Summary process occurs at entry to EI and is completed for:
  - All children who are referred to Early Intervention
  - Children enrolled in Early Intervention in second or third episodes as new referrals
- The Child Outcomes Summary Process is not completed at entry for:
  - Children who transfer from another EI Provider where an initial rating was already determined (new Provider will use original entry rating.)
- Child Outcomes Summary Process is completed at exit from EI:
  - For all children who have been in early intervention for at least 6 months (Calculation of time in EI begins from the initial IFSP start date).
  - For all children potentially eligible for special education services in coordination with Part B 619 (Early Childhood Special Education)
- Child Outcomes Measurement is not completed at exit from EI:
  - For children enrolled less than 6 months, or who have left early intervention services suddenly, and a rating cannot

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be completed due to lack of assessment information (via an assessment tool; family interview; and/or child observation)

- The provider must document why a rating was not obtained on the RI Child Outcomes Summary Form.

#### Family/Caregiver Participation

- Input from families and other important sources such as caregivers, EI service providers, EI/ECSE providers who may have recently evaluated the child, early care and education providers, the child's early childhood teacher, and any other individual who knows the child must be effectively sought and included in the assessment process. If sources other than the family cannot be present at a meeting with the IFSP team to discuss and reach consensus about how a child is functioning across settings, the EI provider must find an alternative method for obtaining the individual's input to ensure a complete picture of the child's development and functioning.

#### Staff Training Requirements

- Staff must participate in documented training regarding the child outcomes summary process before participating in child outcomes measurement in order to guarantee valid and reliable data.
- Staff must demonstrate
  - an understanding of age-expected child development
  - an understanding of functional versus developmental skills
  - an ability to collect and review appropriate assessment information from multiple sources
  - an ability to differentiate child functional skills into 3 areas: foundational skills, immediate foundational skills, and age expected skills for each outcome
  - knowledge of how the family's culture, the child's use of assistive technology, the child's degree of sensory impairment or prematurity, if any, may impact age expectations
  - an understanding of the content of each outcome
  - an understanding of how to use the 7 point scale in relation to foundational, immediate foundation and age expected skills.

#### Transition to Part C

- Child Outcomes Measurement for children exiting Early Intervention transitioning from EI to ECSE occurs within the structure of the ECSE system of referral, eligibility determination, and IEP development. At the end of the process EI and ECSE determine collaboratively a single summary statement for each of the outcome areas.

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<b>Summary of the RI EI/ECSE Child Outcomes Process</b>		
<b>Entry RI COS</b>		
<b>Timelines</b>	<b>Process</b>	<b>Documentation</b>
<b>Between Intake and multidisciplinary evaluation/assessment</b>	Discussion with the family (and others with whom the child spends significant amount of time) regarding child functioning within each of the three child outcomes across settings and situations.	Document observed and reported skills and behaviors and information gathered from Guiding Questions on Section A of the RI COS.
<b>At the Eligibility/IFSP Meeting</b>	Discuss information gathered between intake and evaluation/assessment and compare child functioning to same age peers using the framework of: age expected, immediate foundational, and foundational in each of the outcome areas.	Document child’s functioning, behavior and skills relating to each outcome area using the framework of age expected; immediate foundational; and foundational skills on Section B of the RI COS.
<b>At IFSP Development</b>	After considering information from all sources (including the Routines Based Interview ) and across settings the team applies the criteria of the 7 point scale and selects an overall statement of functioning based on supporting evidence documented on the RI COS Section B.	Supporting evidence derived from the RBI is added to Section B prior to the completion of Section C  Document the overall statement of functioning on Section C of the RI COS  The corresponding numerical rating is recorded Section C of the RI COS and submitted for data purposes.

<b>Exit RI COS for children not transitioning to Part B</b>		
<b>Timelines</b>	<b>Process</b>	<b>Documentation</b>
<b>Prior to Discharge</b>	Discussion with the family (and others with whom the child spends significant amount of time) regarding child functioning within each of the three child outcomes across settings and situations.	Document observed and reported skills and behaviors and information gathered from Guiding Questions on Section A of the RI COS.
	Discuss information gathered and compare child functioning to same age peers using the framework of: age expected, immediate foundational, and foundational in each of the outcome area.	Document child’s functioning, behavior and skills relating to each outcome area using the framework of age expected; immediate foundational; and foundational skills on Section B of the RI COS.
	After considering information from all sources and across settings the team applies the criteria of the 7 point scale and selects an overall statement of	Document the overall statement of functioning on Section C of the RI COSF.  The corresponding numerical rating is

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	functioning based on supporting evidence documented on the RI Child Outcomes Summary Form B.	recorded Section C of the RI COS.
	The team answers the additional Progress Question for each outcome.	Document the answer to the additional Progress Question for each outcome on Section C of the RI COS and submit the completed form to data entry.

#### Exit RI COS Transition from EI to Part B

Timelines	Process	Documentation
<b>ECSE Referral Meeting 32 Months</b>	In preparation for ECSE Referral Meeting, EI discusses child functioning within each of the three child outcomes across settings and situations, with the family (and others with whom the child spends significant amount of time).	<p>EI prepares draft of Section A with family and sends draft to ECSE.</p> <p>At the ECSE Referral Meeting EI facilitates discussion of child’s skills, behaviors and functioning with the team.</p> <p>ECSE adds to the EI draft of COS Section A at the ECSE Referral Meeting and provides copy to EI.</p>
<b>ECSE Eligibility Meeting 34 Months</b>	EI prepares for the ECSE Eligibility Meeting by consulting age anchoring tools regarding information gathered on section A and prepares to lead discussion with family and ECSE of child functioning in comparison to same age peers using the framework of: age expected, immediate foundational, and foundational in each of the outcome areas.	<p>At the ECSE Eligibility Meeting, ECSE updates the RI COSF A with any new information by participants.</p> <p>EI facilitates discussion with team regarding child’s skills in comparison to same age peers using the framework of age expected, immediate foundational, and foundational in each of the outcome areas.</p> <p>ECSE documents on Section B of the RI COS and provides copy to EI.</p>
<b>ECSE IEP Meeting by 36 Months</b>	After considering information from all sources and across settings the team applies the criteria of the 7 point scale and selects an overall statement of functioning based on supporting evidence documented on RI COS Section B.	<p>At the ECSE IEP Meeting ECSE updates Section A and B with any new information from participants; Section C is completed by team and ECSE provides a copy to EI.</p> <p>The corresponding numerical rating is documented on Section C.</p>
		EI documents the answer to the additional Progress Question for each outcome area on Section C of the RI COSF and submits the completed form to data entry.

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#### Use of Child Outcomes Measurement Data

- State and/or local outcomes measurement is publicly reported in the SPP/APR.

#### Data Quality and Analysis

- The Child Outcomes Summary Form must be entered into the Welligent system within 10 business days of determining the rating.
- Providers must develop and oversee an internal quality assurance process, approved by the lead agency, to ensure data that is valid and reliable.
- Providers must provide a timely response to the lead agency relative to questions of data collection, accuracy, analysis, and use.

Providers must participate with the lead agency regarding efforts related to the interpretation, reporting, and dissemination of child outcomes measurement.

#### Family Outcomes

##### Family Outcomes Measurement

- EI providers must participate in the distribution and collection of a statewide family outcomes measurement tool
- Participation includes:
  - Survey Promotion: (letters, newsletters and flyer reminder activities);
  - Distribution: (direct mail, hand deliver by providers or other);
  - Follow-up: (strategies to assist or encourage participation); and
  - Collection (return mail, hand collect or other).
- A family outcomes survey must be distributed to each parent who has a child participating in Early Intervention Services.
- EI providers must ensure that staff understand the three family outcomes and how these outcomes are incorporated into interactions with families.
- Providers must have a written process to review and analyze family outcomes data and use this data for program improvement.
- State and/or local survey results are publicly reported in the SPP/APR.