

Guiding Progress Shaping Futures

Service Provider Information Packet Exit Materials



New York State Department of Health

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Instructions for Service Providers

Introduction

Under Federal requirements, the New York State Department of Health (Department) must report information on progress made by children in the Early Intervention Program (EIP) related to three specific outcomes areas. To meet this obligation, the Department of Health is collaborating with municipal Early Intervention Programs to identify and collect child outcome information on annual samples of children participating in the EIP.

This packet has been developed to provide technical assistance for service providers who have been selected to provide early intervention services to a child for whom outcome data must be collected. For children included in the child outcomes samples, and who are found eligible for the EIP, the municipality ensured that a Child Outcomes Summary Form was completed as a part of the initial IFSP meeting. The Child Outcomes Summary Form was used by the IFSP team to agree on the child's current skills and abilities in each of the three outcome areas. The Child Outcomes Summary Form must also be completed for children in the child samples exiting the EIP who participated in the EIP for at least six months.

As a service provider, you are responsible for participating in IFSP meetings of children and families for whom you provide EI services. For children included in the child outcomes sample, you are also responsible for participating in the discussion during the IFSP meeting necessary to complete the Child Outcomes Summary Form. This will require you to offer information related to the child's current skills and abilities in each of the following three federally-required child outcomes areas if the child participated in the EIP for at least six months:

- ★ Positive social emotional skills (including social relationships)
- ★ Acquiring and using knowledge and skills (including early language/communication)
- ★ Use of appropriate behaviors to meet needs (taking appropriate action to meet needs)

See Appendix A for a further description of these three outcome areas.

Because every service provider may not have addressed all of the child outcome areas or may not have knowledge specific to a particular area, you should participate in the meeting to the extent that your clinical judgment and expertise allows. It will also be important to review your session notes, progress notes, ongoing assessment data, and other information in your records for the child for information about the child's current status in the three outcome areas. You may use the **Developmental Milestones Checklist – Service Providers Edition** to guide you and to reference during the IFSP meeting. If you conducted a formal testing as part of your ongoing monitoring and evaluation of the child, you may complete the **Evaluation Summary – Federal Child Functional Outcome Areas** instead.

This packet includes information and materials to assist you in meeting these responsibilities.

Quick overview of the Service Provider's Role in Completing the Child Outcomes Summary Form:

1. Remind parents about the new Federal requirement to report child outcome information.
2. Collect information related to child outcomes and developmental milestones during service provision to the extent that you are able.
3. Complete **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER'S EDITION** or **EVALUATION SUMMARY – FEDERAL CHILD FUNCTIONAL OUTCOME AREAS**. Bring the **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER'S EDITION** or **EVALUATION SUMMARY – FEDERAL CHILD FUNCTIONAL OUTCOME AREAS** with you to the meeting to reference during the discussion.
4. Participate in the child's IFSP meeting, including completion of the Child Outcomes Summary Form (COSF).

Step 1: Reminding Parents About the Child Outcomes Requirement

- As part of your interaction with the family, please remind the child's parent(s) of the following points:
 - ★ One of the Federal requirements for the EIP is to measure the child's functioning in three broad areas before the child begins to receive early intervention services. This was accomplished at the child's initial IFSP meeting. When the child exits early intervention services (if the child participated in the EIP for at least six months), this information must be collected again.
 - ★ Information needed to measure the child's functioning in these three broad areas will be gathered as part of the delivery of services to the child and/or as part of testing to monitor the child's progress.
 - ★ This information will be discussed at the IFSP team meeting when the child exits the EIP and will be used to assist the participants in the IFSP team meeting to come to an agreement on the child's current age level in these broad areas, and identify progress made by the child in each outcome area (any new skills or abilities the child has gained related to the outcome area).

Step 2: Evaluating the Child's Current Status in the Three Outcome Areas

- As the child's service provider, you may be able to gather information as part of your interaction with the child. In addition, this may be accomplished by observing the child.
- In some instances, you may be involved in testing the child as part of ongoing progress monitoring. As a result, you will select the assessment(s) and evaluation procedures to be used for testing the child in the child outcomes sample.
- Other assessment methods, including child observation, parent interview, clinical procedures, and other evaluation techniques should be employed, as needed to assess the child's functioning in the outcomes areas appropriate to your area of service delivery. Non-discriminatory procedures must be used to test the child, including the use of procedures appropriate for the child's language and culture (10 NYCRR Section 69-4.10(14)). Standardized tests should not be used to assess the child if the test is not appropriately normed for the child's dominant language, culture, and age.

Step 3: Documenting Child Outcomes Information

- For children in the child outcomes sample, service providers are responsible for documenting information related to the three child outcomes areas. You may use either the **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER EDITION** or the simple **SERVICE PROVIDER SUMMARY – FEDERAL CHILD FUNCTIONAL OUTCOME AREAS**, both of which are supplied in this document, for this purpose. The goal is for service providers to document the child’s functional behaviors related to the three federally-required outcome areas, using either of these tools, for use in discussion at the child’s IFSP meeting, if the child participated in the EIP for at least six months.
- ★ The **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER EDITION** is a list of yes and no questions that, once answered, help to describe the developmental level of the child.
- ★ The **SERVICE PROVIDER SUMMARY – FEDERAL CHILD FUNCTIONAL OUTCOME AREAS** is a short form that enables the service provider to note the child’s current skills and abilities in the three outcomes areas, any clinical clues or issues, and methods used to assess the child’s current skills and abilities in these three areas.
- ★ The service provider is responsible for bringing either the **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER EDITION** or **SERVICE PROVIDER SUMMARY – FEDERAL CHILD FUNCTIONAL OUTCOME AREAS** (see Appendices D and E) to the IFSP meeting.

Step 4. Completing the Child Outcomes Summary Form at the IFSP Meeting

- When the child is ready to exit the EIP, the EIO/D or ongoing service coordinator will convene an IFSP meeting to develop a transition plan for the child.
- As a service provider, your participation in the child’s and family’s IFSP meeting is very important. If you are unable to attend the meeting, arrangements can be made for your involvement in the meeting (for example, by participating in a telephone conference call).
- The service providers who participate in the child’s IFSP meeting will be asked to help with the completion of the Child Outcomes EXIT Summary

Form for the child. It is important for the service providers to be knowledgeable about and familiar with the child's skills and abilities in the three outcome areas to participate in this process.

- In preparation for the meeting, it would be beneficial to review relevant information pertaining to the child's current skills and abilities on each of the three outcomes. This information could include notes, reports, and the child's performance on various assessment measures. Reviewing this information will assist you in determining how you would rate the child's current age level on each outcome prior to attending the meeting.
- The EIO/D or ongoing service coordinator will be responsible for facilitating the discussion to complete the Child Outcomes EXIT Summary Form. Different sources of information will be reviewed during the meeting to determine how the child currently functions in each of the outcome areas, across a variety of situations and settings and identify any new skill(s) or ability(ies) the child has gained in each outcome area since early intervention services began. These different sources of information will include your observations about the child's current behaviors and skills, as well as observations by the child's parents and/or service providers. The child's performance on different assessment measures may also be reviewed.
- Service providers must submit documentation of the child's skills and abilities in the three outcome areas (either the **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER EDITION** or **SERVICE PROVIDER SUMMARY – FEDERAL CHILD FUNCTIONAL OUTCOME AREAS**). Parents also have the option of completing a **DEVELOPMENTAL MILESTONES CHECKLIST – PARENT EDITION**. It may be helpful for service coordinators, EIO/Ds, parents, and service providers to refer to these documents during this discussion.
- After discussion, the group should reach a consensus on how to rate the child's current age level related to each outcome area using a 7-point rating scale. For your information, Appendix F provides a copy of the Child Outcomes Summary Form and Appendix G provides a copy of the instructions for completing the form.
- As a group, the goal is to reach consensus and circle only one number for each outcome. It may be helpful to keep in mind that if a child's behaviors and skills in an outcome area are near or at his or her expected age levels, the child should be rated either 6 or 7 on the scale for that outcome. If a child's behavior and skills are below what is expected for his or her age, the child's rating should be somewhere between 1 and 5 on the scale, where:

- ★ An outcome rating of 5 (Somewhat) is defined as skills and abilities like that of a slightly younger child.
- ★ An outcome rating of 3 (Emerging) is defined as skills and abilities like that of a younger child.
- ★ An outcome rating of 1 (Not Yet) is defined as skills and abilities like that of a much younger child.
- Once the rating has been completed, the group then needs to decide whether any progress has been made by the child in the outcome area since early intervention services began. Gaining at least one new skill or ability in the outcome area counts as progress. Participants should check either yes or no, and then briefly describe the new skill(s) or ability(ies) the child has achieved in the outcome area. See Appendix I for progress that OSEP considers “impossible”.
- If agreement cannot be reached, each participant can complete his or her own Child Outcomes Summary Form for the child. Under these circumstances, the EIO/D or service coordinator, in his or her role as facilitator, should ensure that each participant in the IFSP team has the opportunity to complete and submit a Child Outcomes Summary Form for the child.
- The municipality is responsible for ensuring that the Child Outcomes Summary Form is submitted for data entry. The responsibilities of service providers for this effort are met with the completion of the Child Outcomes Summary Form at the child’s IFSP meeting. If it is not possible for you to attend the IFSP meeting, you are responsible for completing and submitting the COSF for the child to the municipality.

Procedures for Completing the Child Outcomes Summary Form When No IFSP Meeting Is Convened or When You Are Unable to Participate in A Meeting

There will be some children for whom a final IFSP meeting may not be convened. When this happens, the municipality is responsible for ensuring that the Child Outcomes EXIT Summary Form is completed for the child. This may be accomplished through the following procedures, or through other means identified by the municipality:

1. The EIO/D or ongoing service coordinator may convene a conference call with the parent(s) and/or service provider(s) to complete the Child Outcomes EXIT Summary Form. If the parent does not wish to participate, a conference call with the service provider(s) to complete the Child Outcomes EXIT Summary Form will be sufficient to meet the requirement.
2. If the parent does not wish to participate in the process to complete the Child Outcomes EXIT Summary Form, a meeting may be convened by the EIO/D or service coordinator with the service provider(s) to complete the Child Outcomes EXIT Summary Form, for submission to the municipality.
3. The Child Outcomes EXIT Summary Form may be completed independently by the child's parent and/or the EIO/D, service coordinator, and service provider(s). Under this circumstance, the parent, service coordinator, and service provider(s) are responsible for submitting the form to the municipality.

The municipality is responsible for ensuring that the Child Outcomes EXIT Summary Forms and instructional materials are distributed to service providers who are required to complete the form. It is service providers' responsibility to complete and return the form to the municipality.

It is service providers' responsibility to ensure that the confidentiality of the child and family is maintained in transmitting the completed form.

Questions?

After reading the information we've provided, if you have questions you can:

- Go to the website which contains additional information and electronic copies of all materials
https://www.health.ny.gov/community/infants_children/early_intervention/outcomes_survey/child/
- Email us a specific question and we will get back to you as soon as possible.
BEIDataUnit@Health.ny.gov
- Call us with your questions.
(518) 473-7016



Thank you for your help in meeting this important Federal requirement for the Early Intervention Program!

Appendices of Supplemental Materials



New York State Department of Health

Appendix A

Description of Child Outcomes

It is important to have a foundation of knowledge concerning the three outcomes of interest before beginning the summary form completion. The three outcomes of interest include: 1) Positive Social Emotional Skills (including social relationships, 2) Acquiring and Using Knowledge and Skills (including early language/communication), and 3) Using appropriate behaviors to meet needs (taking appropriate action to meet needs). Outcome 1 involves relating with other children and adults and following group rules in order to appropriately interact with others. Areas included under outcome 1 are attachment/separation/autonomy, the expression of emotions and feelings, learning rules and expectations, and social skills. Outcome 2 is concerned with thinking/reasoning/remembering/problem solving and understanding symbols and physical and social words. Encompassed under outcome 2 are areas such as early concepts, imitation, object permanence, and expressive communication. Involved in outcome 3 are basic needs skills, personal health and safety, and motility and the use of tools. These outcomes fall under the areas of integrating motor skills to complete tasks, self-help skills, and acting on the environment.

Outcome 1: Positive Social Emotional Skills (including social relationships)

Involves:

- Relating with adults (e.g., babbling, imitates parents, shows affection, uses small sentences)
- Relating with other children (e.g., plays with other children for a few minutes, waves bye-bye, uses small sentences)
- Following rules related to groups or interacting with others (if older than 18 months; e.g., follows simple directions)

Includes areas like:

- Attachment/separation/autonomy
- Expressing emotions and feelings
- Learning rules and expectations
- Social interactions and play

Outcome 2: Acquiring and Using Knowledge and Skills (including early language/communication)

Involves:

- Thinking, reasoning, remembering, and problem solving (e.g., recognizes familiar faces and pictures, says names of toys, builds towers of blocks)
- Understanding symbols
- Understanding the physical and social worlds (e.g., turns head toward bright colors and lights, reacts to sudden sounds or voices, likes to pull/push/dump things)

Includes areas like:

- Early concepts (e.g., symbols, pictures, numbers, classification, spatial relationships)
- Imitation
- Object permanence (e.g., understands that objects do not disappear when they leave the child's field of vision)
- Expressive language and communication

Outcome 3: Uses Appropriate Behaviors to Meet Needs (taking appropriate action to meet needs)

Involves:

- Taking care of basic needs (e.g., helps hold bottle during feeding, drinks from a cup, can feed self, is toilet trained, puts on shoes, knows 5 or 6 words, uses small sentences)
- Contributing to own health and safety (if older than 24 months; e.g., follows rules, assists with hand washing, avoids inedible objects, holds out arms and legs while being dressed)
- Getting from place to place (mobility; e.g., wiggles and kicks with arms and legs, pulls to a standing position, walks without help, walks up steps) and using tools (e.g., forks, pencils, strings attached to objects, reaches for objects and picks them up)

Includes areas like:

- Integrating motor skills to complete tasks
- Self-help skills
- Acting on the world to get what one wants

Appendix B

Using Assessment Tools in The Child Outcomes Measurement Process

The information gathered as part of ongoing assessment and evaluation of a child in the EIP is one important source of information that can be used to help the IFSP team complete the Child Outcomes Summary Form.

Standardized tests or norm-referenced tests are assessments in which a child's performance is compared to a larger group or "norm group". Standardized tests can be helpful because:

- They provide information on development in relation to other children
- They use standardized administration procedures
- Many of them may already be used for determining (EIP) eligibility

Criterion-referenced tests are assessments in which a child's performance is compared to a specific performance standard rather than the performance of a norm group comprised of other children. Criterion-referenced tests can be helpful because they:

- Measure a child's performance of specific objectives
- Allow for a direct link between assessment and intervention
- Provide information on children's strengths and emerging skills
- Help teams plan and meet individual children's needs
- Meet recommended assessment practice standards
- Measure intra-child progress
- May be used to measure program effectiveness

Most developmental assessments are domain-based and are 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 this information should be used in conjunction with other information that is known about the child, including parent observation and evaluator observations and clinical assessments.

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 be beneficial in helping you to decide how close a child's functioning is to typical. However, a child should not be given a lower summary outcome rating if he or she does not "pass" a particular assessment item (e.g., uses speech) but has an alternative way to accomplish an outcome (e.g., sign language).

In completing the Child Outcomes Summary Form, you should consider the three functional outcomes rather than discrete developmental domains (e.g., communication, cognitive, motor). Functional outcomes emphasize integrated series of behaviors or skills across multiple domains that are meaningful in the context of everyday living. For example:

Not only does the child...

- Know how to make eye contact, smile, and give a hug
- Know how to imitate a gesture when prompted by others
- Use finger in pointing motion
- Show a skill in a specific situation

But does the child...

- Initiate affection toward caregivers and respond to others' affection
- Watch what a peer says or does and incorporate it into his/her own play
- Point to indicate needs or wants

Categorized List of Developmental Assessments

Below is a list of developmental assessments categorized into the three categories.

Standardized	Criterion-referenced	Screening Measures
Adaptive Behavior Assessment System	Assessment, Evaluation, and Programming System for Infants and Children	Movement Assessment of Infants
Ages and Stages Questionnaires	Autism Diagnostic Interview – Revised	
Ages and Stages Questionnaires: Social-Emotional	Autism Diagnostic Observation Scale	
Alberta Infant Motor Scale	Brazelton Neonatal Behavioral Assessment Scale	
Arizona Articulation Proficiency Scale – 3 rd Ed	Brigance Inventory of Early Development	
Battelle Developmental Inventory – 2 nd Ed	Caregiver-Teacher Report Form	
Bayley Scales of Infant and Toddler Development – 3 rd Ed	The Carolina Curriculum for Infants and Toddlers – 3 rd Ed	
Behavior Assessment System for Children – 2 nd Ed	Developmental Observation Checklist	
Carey Temperament Scales	Early Coping Inventory	
Child Behavior Checklist for Ages 1 1/2 to 5	Early Learning Accomplishment Profile – Revised	
Communication and Symbolic Behavior Scales Developmental Profile	Hawaii Early Learning Profile	
Clinical Linguistic and Auditory Milestone Scale	High/Scope Child Observation Record Form for Infants and Toddlers	
Denver II Development Screening Test	Humanics National Infant-Toddler Assessment	
Developmental Assessment of Young Children	Infant-Toddler Developmental Assessment	

Standardized	Criterion-referenced	Screening Measures
Developmental Profile II	The Ounce Scale	
Devereux Early Childhood Assessment	Pediatric Evaluation of Disability Inventory	
Differential Ability Scales	Pervasive Developmental Disorder Behavior Inventory	
Early Language Milestone Scale	Prechtl	
Expressive One Word Picture Vocabulary Test	Pre-speech Assessment Scale	
Functional Emotional Assessment Scale	Rossetti Infant-Toddler Language Scales	
Functional Independence Measure for Children	Stuttering Severity Instrument for Children & Adults – 3 rd Ed	
Gesell Developmental Schedules	Toddler Infant Motor Evaluation	
Goldman-Fristoe Test of Articulation – 2	Transdisciplinary Play Based Assessment	
Infant Toddler Checklist for Communication and Language Development	Westby Play Scale	
Infant Toddler Social-Emotional Assessment		
Infant Toddler Symptom Checklist		
Learning Accomplishment Profile – D		
Leiter International Performance Scale – Revised		
MacArthur Communicative Development Inventories		
Mullen Scales of Early Learning		
Neurobehavioral Assessment of the Preterm Infant		

Standardized	Criterion-referenced	Screening Measures
Peabody Developmental Motor Scales – 2		
Peabody Picture Vocabulary Test – III		
Preschool Evaluation Scale		
Preschool Language Scale – 4		
Receptive-Expressive Emergent Language Test – 2 nd Edition		
Receptive One Word Picture Vocabulary Test		
Reynell Developmental Language Scales		
Sensory Profile Checklist		
Sequenced Inventory of Communication Development – Revised		
Stanford-Binet Intelligence Test		
Test of Sensory Function in Infants		
Test of Early Language Development		
Vineland Adaptive Behavior Scales – 2 nd Edition		
Vineland Social Emotional Early Childhood Scales		
Wechsler Preschool and Primary Scale of Intelligence – III		
Woodcock-Johnson III		

Appendix C



New York State Department of Health – EIP State Performance Plan Child Outcomes Initiative Developmental Assessment Tools for Use with Children Birth – 3 Years

The following are developmental tests that can be used to obtain supporting evidence for the three OSEP functional child outcomes that must be measured and reported by state early intervention programs. These tests are not required for use in measuring these outcomes and this list is not exhaustive; however, these tests are commonly used and have items related to children’s functioning in the areas of positive social relationships, acquisition and use of knowledge and skills, and taking action to meet needs.

This list will not be updated each time a tool is reissued, however the most recent edition of an assessment instrument should be used as soon as it is available.

Number Code	Developmental Assessment Tool	Age Can Be Used With	Outcome 1: Positive Social Relationships	Outcome 2: Acquire and Use Skills and Knowledge	Outcome 3: Takes Action to Meet Needs
01	Adaptive Behavior Assessment System	0 to 5 yrs			X
02	Ages and Stages Questionnaires	4 to 48 months	X	X	X
03	Ages and Stages Questionnaires: Social-Emotional	3 to 66 months	X	X	X
04	Alberta Infant Motor Scale	Birth to 18 months		X	
05	Arizona Articulation Proficiency Scale – 3 rd Ed	1-5 to 18-0 yrs		X	
06	Assessment, Evaluation, and Programming System for Infants and Children	0 to 6 yrs	X	X	X
07	Autism Diagnostic Interview – Revised	Mental Age >2 yrs	X	X	X
08	Autism Diagnostic Observation Scale	Dev Age >12 months	X	X	X
09	Battelle Developmental Inventory – 2 nd Ed	Birth to 7-11 yrs	X	X	X
10	Bayley Scales of Infant and Toddler Development – 3 rd Ed	1 to 42 months	X	X	

Number Code	Developmental Assessment Tool	Age Can Be Used With	Outcome 1: Positive Social Relationships	Outcome 2: Acquire and Use Skills and Knowledge	Outcome 3: Takes Action to Meet Needs
11	Behavior Assessment System for Children – 2 nd Ed	2-6 to 18	X		X
12	Brazelton Neonatal Behavioral Assessment Scale	0 to 2 months		X	X
13	Brigance Inventory of Early Development	Birth to 7 yrs	X	X	X
14	Caregiver-Teacher Report Form	1-6 to 5 yrs	X		
15	Carey Temperament Scales	0 to 12 yrs	X		
16	The Carolina Curriculum for Infants and Toddlers – 3 rd Ed	Birth to 3 yrs	X	X	X
17	Child Behavior Checklist for Ages 1 1/2 to 5	Ages 1-6 to 5 yrs	X		
18	Communication and Symbolic Behavior Scales Developmental Profile	6 months to 6 yrs		X	X
19	Clinical Linguistic and Auditory Milestone Scale	1 to 36 months		X	
20	Denver II Development Screening Test	0 to 6 yrs	X	X	
21	Developmental Assessment of Young Children	Birth to 5-11 yrs	X	X	X
22	Developmental Observation Checklist	0 to 6 yrs	X	X	
23	Developmental Profile II	0 to 7 yrs	X	X	X
24	Devereux Early Childhood Assessment	2 to 5 yrs	X		X
25	Differential Ability Scales	2-6 to 17 yrs		X	
26	Early Coping Inventory	4 to 36 months	X		X
27	Early Language Milestone Scale	0 to 3 yrs		X	X
28	Early Learning Accomplishment Profile – Revised	0 to 36 months	X	X	

Number Code	Developmental Assessment Tool	Age Can Be Used With	Outcome 1: Positive Social Relationships	Outcome 2: Acquire and Use Skills and Knowledge	Outcome 3: Takes Action to Meet Needs
29	Expressive One Word Picture Vocabulary Test	2 to 18 yrs		X	
30	Functional Emotional Assessment Scale	7 to 48 months	X	X	X
31	Functional Independence Measure for Children	6 months to 7 yrs		X	
32	Gesell Developmental Schedules	0 to 72 months	X	X	X
33	Goldman-Fristoe Test of Articulation – 2	2-0 to 21-11 yrs		X	
34	Hawaii Early Learning Profile	0 to 3 yrs	X	X	X
35	High/Scope Child Observation Record Form for Infants and Toddlers	6 weeks to 3 yrs	X	X	X
36	Humanics National Infant-Toddler Assessment	0 to 3 yrs	X	X	X
37	Infant-Toddler Developmental Assessment	0 to 42 months	X	X	X
38	Infant Toddler Checklist for Communication and Language Development	6 to 24 months		X	
39	Infant Toddler Social-Emotional Assessment	1 to 4 yrs	X	X	
40	Infant Toddler Symptom Checklist	7 to 30 months	X	X	
41	Learning Accomplishment Profile – D	30 to 72 months	X	X	
42	Leiter International Performance Scale – Revised	2 to 20-11 yrs		X	
43	MacArthur Communicative Development Inventories	8 to 30 months		X	X
44	Movement Assessment of Infants	0 to 12 months		X	

Number Code	Developmental Assessment Tool	Age Can Be Used With	Outcome 1: Positive Social Relationships	Outcome 2: Acquire and Use Skills and Knowledge	Outcome 3: Takes Action to Meet Needs
45	Mullen Scales of Early Learning	Birth to 68 months		X	
46	Neurobehavioral Assessment of the Preterm Infant	0 to 32 weeks post-conception age		X	X
47	The Ounce Scale	Birth to 42 months	X	X	X
48	Peabody Developmental Motor Scales – 2	Birth to 5 yrs			X
49	Peabody Picture Vocabulary Test – III	2-6 to 90 yrs		X	
50	Pediatric Evaluation of Disability Inventory	8 months to 6 yrs	X	X	X
51	Pervasive Developmental Disorder Behavior Inventory	1-6 to 12-5 yrs	X		X
52	Prechtl	Infants		X	X
53	Preschool Evaluation Scale	Birth to 72 months	X	X	X
54	Preschool Language Scale – 4	Birth to 6-11 yrs		X	X
55	Pre-speech Assessment Scale	0 to 2 yrs		X	
56	Receptive-Expressive Emergent Language Test – 2 nd Edition	0 to 3 yrs		X	X
57	Receptive One Word Picture Vocabulary Test	2 to 18 yrs		X	
58	Reynell Developmental Language Scales	1 to 6-11 yrs		X	X
59	Rossetti Infant-Toddle Language Scales	Birth to 3 yrs	X	X	
60	Sensory Profile Checklist	Birth to 3 yrs			X
61	Sequenced Inventory of Communication Development – Revised	4 months to 4 yrs		X	X
62	Stanford-Binet Intelligence Test	2 to 23 years		X	

Number Code	Developmental Assessment Tool	Age Can Be Used With	Outcome 1: Positive Social Relationships	Outcome 2: Acquire and Use Skills and Knowledge	Outcome 3: Takes Action to Meet Needs
63	Stuttering Severity Instrument for Children & Adults – 3 rd Ed	2 to adult		X	
64	Test of Sensory Function in Infants	4 to 18 months		X	
65	Test of Early Language Development	2 to 7 yrs		X	X
66	Toddler Infant Motor Evaluation	Birth to 3.5 yrs	X	X	X
67	Transdisciplinary Play Based Assessment	Infancy to 6 yrs	X	X	X
68	Vineland Adaptive Behavior Scales – 2 nd Edition	0 to 18-11 yrs	X	X	X
69	Vineland Social Emotional Early Childhood Scales	Birth to 5-11 yrs	X	X	X
70	Wechsler Preschool and Primary Scale of Intelligence – III	2-6 to 7-3 yrs		X	
71	Westby Play Scale	9 months to 5 yrs		X	
72	Woodcock-Johnson III	2 to 90 yrs		X	

Appendix D

Developmental Milestones Checklist – Service Provider Edition

Service providers can document the child’s developmental status in the three outcome areas, by completing the **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER EDITION**. The behaviors that are typically present in each of the three outcome areas from birth to 36 months are listed. Service providers are asked to evaluate whether or not the child has attained each milestone by selecting yes, no, or inconsistent. The rating on this scale can be the result of direct observation, parent report, or extrapolation.

COMPLETING THE DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER EDITION

- Begin at the child’s current age level and check ONE box under the heading titled “Has Child Attained Milestone?” for each behavior or skill listed.
 - Check the “Yes” box if the child typically displays the behavior or skill across different settings and situations.
 - Check the “No” box if the child does not display the behavior or skill.
 - Check the “Inconsistent” box if the child displays the behavior or skill in some situations or settings but not all situations or settings.
- If you do not check “Yes” to all of the behaviors listed for the child’s age level move backwards and check the items for the previous age level.
 - Continue moving backwards until you answer “Yes” to all of the items in an age level.
- Under the heading titled “Ratings Based On” check the box corresponding to the information that was used to decide whether or not the child has attained each developmental milestone (i.e., direct observation, parent report, extrapolation).
 - If the behavior was directly assessed or observed during the assessment session, check the “Direct Observation” box.
 - If the rating was based on information provided by the parent or caregiver during the assessment session, check the “Parent Report” box.
 - If the rating was based on clinical judgment and not directly observed or reported by the parents or caregivers, check the “Extrapolation” box.
 - You may check as many boxes as apply to that rating. Repeat this process for each of the three child outcomes. Please see the example of the partially completed form below:

Age	Outcome 1: Positive Social Emotional Skills	Has Child Attained Milestone?			Rating Based On:		
		Yes	No	Inconsistent	Direct Observation	Parent Report	Extrapolation
by 3 months	Smile	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Make cooing sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Enjoy playing with people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Age	Outcome 1: Positive Social Emotional Skills	Has Child Attained Milestone?			Rating Based On:		
		Yes	No	Inconsistent	Direct Observation	Parent Report	Extrapolation
by 3 months	Smile	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Make cooing sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Enjoy playing with people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 6 months	Recognize familiar faces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Babble	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Smile at self in mirror	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 12 months	Wave bye - bye	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Know five of six words	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Play peek-a-boo and patty cake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Repeat sounds or gestures for attention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 18 months	Follow simple directions (e.g., "Bring the ball")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Act out a familiar activity in play (e.g., taking a bath)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Bring toys to share with parent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 24 months	Use two-to-three word sentences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Likes to imitate their parent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Show affection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Play alone (independently)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Comfort a distressed friend or parent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 36 months	Play with other children for a few minutes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Use three-to-five word sentences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Understands the concept of 'mine'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Spontaneously shows affection for familiar playmates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Takes turns in a game	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Imitates adults and playmates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Use Appendix C to specify the number code(s) from the test(s) used to complete ratings above:

Test No.	Test No.	Test No.	Test No.

Age	Outcome 2:	Has Child Attained Milestone?			Rating Based On:		
	Acquiring and Using Knowledge and Skills	Yes	No	Inconsistent	Direct Observation	Parent Report	Extrapolation
by 3 months	Turns their heads toward bright colors and lights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Move both eyes in the same direction together	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Recognize bottle or breast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	React to sudden sounds or voices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Make fists with both hands to grasp toys or hair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 6 months	Recognize familiar faces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Follow moving objects with eyes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Turn toward the source of normal sound	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Play with their toys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 12 months	Stack two blocks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Put objects in a container	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 18 months	Like to pull, push, and dump things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 24 months	Say names of toys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Recognize familiar pictures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Identify hair, eyes, ears and nose by pointing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Turn 2-3 pages at a time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Build a tower of four blocks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 36 months	Turn one page at a time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name at least one color correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Repeat common rhymes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Use Appendix C to specify the number code(s) from the test(s) used to complete ratings above:

Test No.	Test No.	Test No.	Test No.

Age	Outcome 3: Taking Appropriate to Meet Needs	Has Child Attained Milestone?			Rating Based On:		
		Yes	No	Inconsistent	Direct Observation	Parent Report	Extrapolation
by 3 months	Lift Head and chest when on stomach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Recognize bottle or breast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Wiggle and kick arms and legs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 6 months	Reach for objects and pick them up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Switch toys from one hand to the other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Help hold the bottle during feeding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 12 months	Sit without support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Pull to a standing position	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Drink from a cup	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Hold out their arms and legs while being dressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Know five of six words	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 18 months	Pull off shoes, socks, and mittens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Feed themselves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Make marks on paper with crayon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Walk without help	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Step off a low object and keep balance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 24 months	Use two-to-three word sentences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Carry something while walking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Feed themselves with a spoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
by 36 months	Walk up steps (alternating feet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Put on their shoes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Open door	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Use three-to-five word sentences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Are toilet trained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Ride a tricycle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Use Appendix C to specify the number code(s) from the test(s) used to complete ratings above:

Test No.	Test No.	Test No.	Test No.

Appendix E

Service Provider Summary – Federal Child Functional Outcome Areas

As an alternative to the **DEVELOPMENTAL MILESTONES CHECKLIST – SERVICE PROVIDER EDITION**, service providers may comment on each child's development by completing the **SERVICE PROVIDER SUMMARY – FEDERAL CHILD FUNCTIONAL OUTCOME AREAS**. Service providers should comment on a child's functioning in each of the three outcomes in the appropriate area. Specifically, they should provide information about which milestones a child has achieved, clinical concerns, and assessment methods in each outcome area.





New York State Department of Health - Early Intervention Program
 Service Provider Summary – Federal Child Functional Outcome Areas

This form is for use by service providers to document information on the three federally-required child outcome areas, gathered through testing or ongoing service provision process, *for children included in child outcomes samples who are exiting the EIP*. Provide specific information about the child's current developmental status, behaviors, and skills in each of the three outcome areas; and briefly describe assessment methods used (clinical assessments, observations, parent report, developmental assessment tools, etc). Be sure to specify the Number Codes of any tests used at the end of this form.

1. Positive social-emotional skills (including social relationships): Initiating/maintaining social interactions, attachment to primary caregivers and family members, expressing emotions and feelings, learning rules and expectations, social interactions and play (social-emotional milestones)		
Developmental Milestones Achieved	Clinical Clues of Problems/Concerns	Assessment Methods (include tests used, if any, to assess the outcome)
2. Acquisition and use of knowledge and skills (including early language/communication): Arousal, orientation, and attention, thinking, reasoning, remembering, problem-solving, using symbols and language, and understanding the physical and social worlds (cognition and language milestones)		
Developmental Milestones Achieved	Clinical Clues of Problems/Concerns	Assessment Methods (include tests used, if any, to assess the outcome)



New York State Department of Health - Early Intervention Program
Service Provider Summary – Federal Child Functional Outcome Areas

3. Use of appropriate behavior to meet needs: Skills and abilities to interact with the social and physical environment to get their basic needs met (e.g., using gestures, sounds, words, signs, or other means to communicate wants/needs; using objects as tools in appropriate ways; seeking help when necessary to meet basic care or other needs; taking care of basic needs mobility; gross and fine motor skills) (motor and adaptive milestones).

Developmental Milestones Achieved	Clinical Clues of Problems/Concerns	Assessment Methods (include tests used, if any, to assess the outcome)

Use Appendix C to specify the number codes(s) from the test(s) used to complete summary above:

Test No.	Test No.	Test No.	Test No.

Appendix F

Reproduction of the Department of Health Child Outcomes Summary Form



New York State Department of Health - Early Intervention Program

Child Outcomes Summary EXIT Form

All fields are required to be completed

Child's NYEIS Identifier: _____

1. Date Assessed: ____/____/____
Mo Day Year

2. Child's Name: _____
First Last

3. Child's Date of Birth: ____/____/____
Mo Day Year

4. Child's Sex: M

5. County/Borough/Residence: _____
(FIPS No.)

6. **IFSP Team Members:** Check all members who participated and completed this form. If individual forms are being completed by each participant, please check only the box for the participant completing *this* form:

Parent(s) Evaluator(s) EIO/D Service Coordinator Service Provider(s) Other: _____

7. Please rate the child's *STATUS* in each of the three functional areas, by **circling the number** which *BEST DESCRIBES THE CHILD'S CURRENT BEHAVIORS AND SKILLS*:

7A. (1) To what extent does this child show **POSITIVE SOCIAL EMOTIONAL SKILLS (INCLUDING RELATIONSHIPS)** APPROPRIATE FOR HIS OR HER AGE and ACROSS A VARIETY OF SETTINGS AND SITUATIONS?

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

(2) Has the child shown ANY new skills or behaviors related to **POSITIVE SOCIAL EMOTIONAL SKILLS (INCLUDING RELATIONSHIPS)** since the ENTRY outcomes form was completed? Please choose Yes or No below.

YES NO

If Yes, briefly describe progress made, including new skills, behaviors, and/or functional abilities:

7B. (1) To what extent does this child **ACQUIRE AND USE KNOWLEDGE AND SKILLS** APPROPRIATE FOR HIS OR HER AGE and ACROSS A VARIETY OF SETTINGS AND SITUATIONS?

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

(2) Has the child shown ANY new skills or behaviors related to **ACQUIRING AND USING KNOWLEDGE AND SKILLS** since the ENTRY outcomes form was completed? Please choose Yes or No below.

YES NO

If Yes, briefly describe progress made, including new skills, behaviors, and/or functional abilities:

7C. (1) To what extent does this child **TAKE APPROPRIATE ACTION TO MEET NEEDS** APPROPRIATE FOR HIS OR HER AGE and ACROSS A VARIETY OF SETTINGS AND SITUATIONS?

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

(2) Has the child shown ANY new skills or behaviors related to **TAKES APPROPRIATE ACTION TO MEET NEEDS** since the ENTRY outcomes form was completed? Please choose Yes or No below.

YES NO

If Yes, briefly describe progress made, including new skills, behaviors, and/or functional abilities:

Appendix G

Reproduction of the Department of Health Child Outcomes Summary Form Instructions



New York State Department of Health - Early Intervention Program (EIP) Instructions for Completing the Child Outcomes Summary Form – Child Status on EXIT from the EIP

These instructions are designed to assist IFSP teams in completion of the Child Outcomes Summary Form – Child Status on EXIT from the EIP.

The following demographic information is needed to identify the child, link the child outcome ENTRY and EXIT data for the child, and link outcome data to other demographic data in NYEIS. Please make sure to include the child's NYEIS ID. This is necessary to report descriptive aggregate data to the U.S. Department of Education, Office of Special Education Programs, to describe the sample of children for whom outcome data are collected:

1. Date Assessed: Enter the date that the IFSP team (or individual team members) assessed the child's scores for the Child Outcome Summary Form (mm/dd/yyyy).
2. Child's Name: Enter the child's first and last name *as the name appears on the child's EIP record and in NYEIS*.
3. Child's Date of Birth: Enter the child's date of birth (mm/dd/yyyy).
4. Child's sex: Check male or female to record the child's sex.
5. County/borough of Residence: Enter the FIPS code from the list of FIPS codes provided for the child's county of residence.

IFSP Team Members – Question 6

6. Please check the IFSP team members who completed the Child Outcomes Summary form. If IFSP team members agree on the child's status, only one form should be completed and all appropriate boxes should be checked. If IFSP team members have different views about the child's current status, each IFSP team member can complete a separate form. In this case, separate forms should be completed and each form should indicate which member of the team completed each form by checking the appropriate box.

Functional Child Outcomes - Questions 7a(1), 7b(1), and 7c(1)

The Child Outcomes Summary Form asks you to think about and report on how the child behaves across many different settings and situations, and with different people in three functional outcome areas: positive social-emotional skills; acquiring and using knowledge and skills; and taking appropriate actions to meet his/her needs. For each of the three summary questions, the IFSP team needs to decide the extent to which the child displays behavior and skills expected for his or her age related to each outcome area. See the chart regarding progress that OSEP considers "Impossible".

The 7-point summary scale to be used is based on a developmental framework that assumes:

- ★ Children develop new skills and behaviors and integrate those skills and behaviors into more complete behaviors as they get older.
- ★ Children’s skills and behaviors emerge in a predictable sequence in most children.
- ★ Some of the skills and behaviors that develop early serve as the foundation for later skills and behaviors, or expressed another way, later skills build on earlier skills to help children move to the next higher level of functioning. The earlier skills serve as the base or “foundational skills” and are linked to later skills.
- ★ Some children’s development is characterized by delays, meaning they acquire skills and behaviors at a substantially slower pace than other children.
- ★ Some children’s development is atypical in that their functioning is so different from that of other children their age that it is considered outside the limits of age expected behavior for children of that age.

To rate the child in each of the three functional outcome areas, please use the following definitions:

Overall age-appropriate	Completely means:	7	Child shows functioning expected for his or her age in 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 concerns about the child’s functioning in this outcome area.
Overall not age-appropriate	Somewhat means:	5	Child shows functioning 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 appropriate functioning. Functioning might be described as like that of a slightly younger child.
		4	Between somewhat and emerging
	Emerging means:	3	Child does not yet show functioning expected of his or her age in any situation. Child’s behaviors and skills include immediate functional skills upon which to build age-appropriate functioning. Functioning might be described like that of a younger child.
		2	Between emerging and not yet
	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 immediate foundational skills upon which to build age-appropriate functioning. Child’s functioning might be described as that of a much younger child.

Functional Child Outcomes - Questions 7a(2), 7b(2), and 7c(2)

For each of the three outcome areas, the person or person(s) completing the Child Outcome EXIT Summary form should circle one number to indicate whether the child has made progress since early intervention services began. Progress means the acquisition of at least one new skill, behavior, or functional ability related to the outcome. If the answer is YES, the team should BRIEFLY describe the progress that has been made, including any new skills, behaviors, or functional abilities the child has gained since beginning early intervention services.

Please note: The outcomes summary form was not designed to determine eligibility for services and should not be used for this purpose.

Appendix H

Reproduction of the Department of Health Supplement Codes for Child's County of Residence



New York State Department of Health Early Intervention Program Child Outcomes Summary Form – Instructions Supplement Codes for Child's County of Residence

County	FIPS Code	County	FIPS Code
Albany	001	Orange	071
Allegany	003	Orleans	073
Broome	007	Oswego	075
Cattaraugus	009	Otsego	077
Cayuga	011	Putnam	079
Chautauqua	013	Rensselaer	083
Chemung	015	Rockland	087
Chenango	017	St. Lawrence	089
Clinton	019	Saratoga	091
Columbia	021	Schenectady	093
Cortland	023	Schoharie	095
Delaware	025	Schuyler	097
Dutchess	027	Seneca	099
Erie	029	Steuben	101
Essex	031	Suffolk	103
Franklin	033	Sullivan	105
Fulton	035	Tioga	107
Genesee	037	Tompkins	109
Greene	039	Ulster	111
Hamilton	041	Warren	113
Herkimer	043	Washington	115
Jefferson	045	Wayne	117
Lewis	049	Westchester	119
Livingston	051	Wyoming	121
Madison	053	Yates	123
Monroe	055	New York	061
Montgomery	057	Bronx	005
Nassau	059	Kings	047
Niagara	063	Queens	081
Oneida	065	Richmond	085
Onondaga	067		
Ontario	069		

Appendix I

OSEP "Impossible" Progress

*Sometimes providers mistakenly answer the progress question "No" for a child who has the same rating of entry and exit. The progress question refers to the acquisition of any new skills. Children who maintain a rating of 2 or higher over time are acquiring new skills to be able to keep the same rating because what is expected of older children developmentally is more than what is expected of younger children. For more information and OSEP calculators please see this website: DaSy/ECTA Online Interactive (<http://dasyonline.org/cos-osep-reporting>)

Entry Rate	Exit Rate	New Skills?	OSEP Category
1	1	No	a: Children who did not improve functioning
1	2 or 3 or 4 or 5 or 6 or 7	No	Impossible*
1	1	Yes	b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers
1	2 or 3 or 4 or 5	Yes	c: Children who improved functioning to a level nearer to same-aged peers but did not reach it
1	6 or 7	Yes	d: Children who improved functioning to reach a level comparable to same-aged peers
2	1	No	a: Children who did not improve functioning
2	2 or 3 or 4 or 5 or 6 or 7	No	Impossible*
2	1 or 2	Yes	b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers
2	3 or 4 or 5	Yes	c: Children who improved functioning to a level nearer to same-aged peers but did not reach it
2	6 or 7	Yes	d: Children who improved functioning to reach a level comparable to same-aged peers
3	1 or 2	No	a: Children who did not improve functioning
3	3 or 4 or 5 or 6 or 7	No	Impossible*
3	1 or 2 or 3	Yes	b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers
3	4 or 5	Yes	c: Children who improved functioning to a level nearer to same-aged peers but did not reach it
3	6 or 7	Yes	d: Children who improved functioning to reach a level comparable to same-aged peers
4	1 or 2 or 3	No	a: Children who did not improve functioning
4	4 or 5 or 6 or 7	No	Impossible*
4	1 or 2 or 3 or 4	Yes	b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers
4	5	Yes	c: Children who improved functioning to a level nearer to same-aged peers but did not reach it
4	6 or 7	Yes	d: Children who improved functioning to reach a level comparable to same-aged peers
5	1 or 2 or 3 or 4	No	a: Children who did not improve functioning
5	5 or 6 or 7	No	Impossible*
5	1 or 2 or 3 or 4 or 5	Yes	b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers
5	6 or 7	Yes	d: Children who improved functioning to reach a level comparable to same-aged peers
6	1 or 2 or 3 or 4 or 5	No	a: Children who did not improve functioning
6	6 or 7	No	Impossible*
6	1 or 2 or 3 or 4 or 5	Yes	b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers
6	6 or 7	Yes	e: Children who maintained functioning at a level comparable to same-aged peers
7	1 or 2 or 3 or 4 or 5	No	a: Children who did not improve functioning
7	6 or 7	No	Impossible*
7	1 or 2 or 3 or 4 or 5	Yes	b: Children who improved functioning but not sufficient to move nearer to functioning comparable to same age peers
7	6 or 7	Yes	e: Children who maintained functioning at a level comparable to same-aged peers