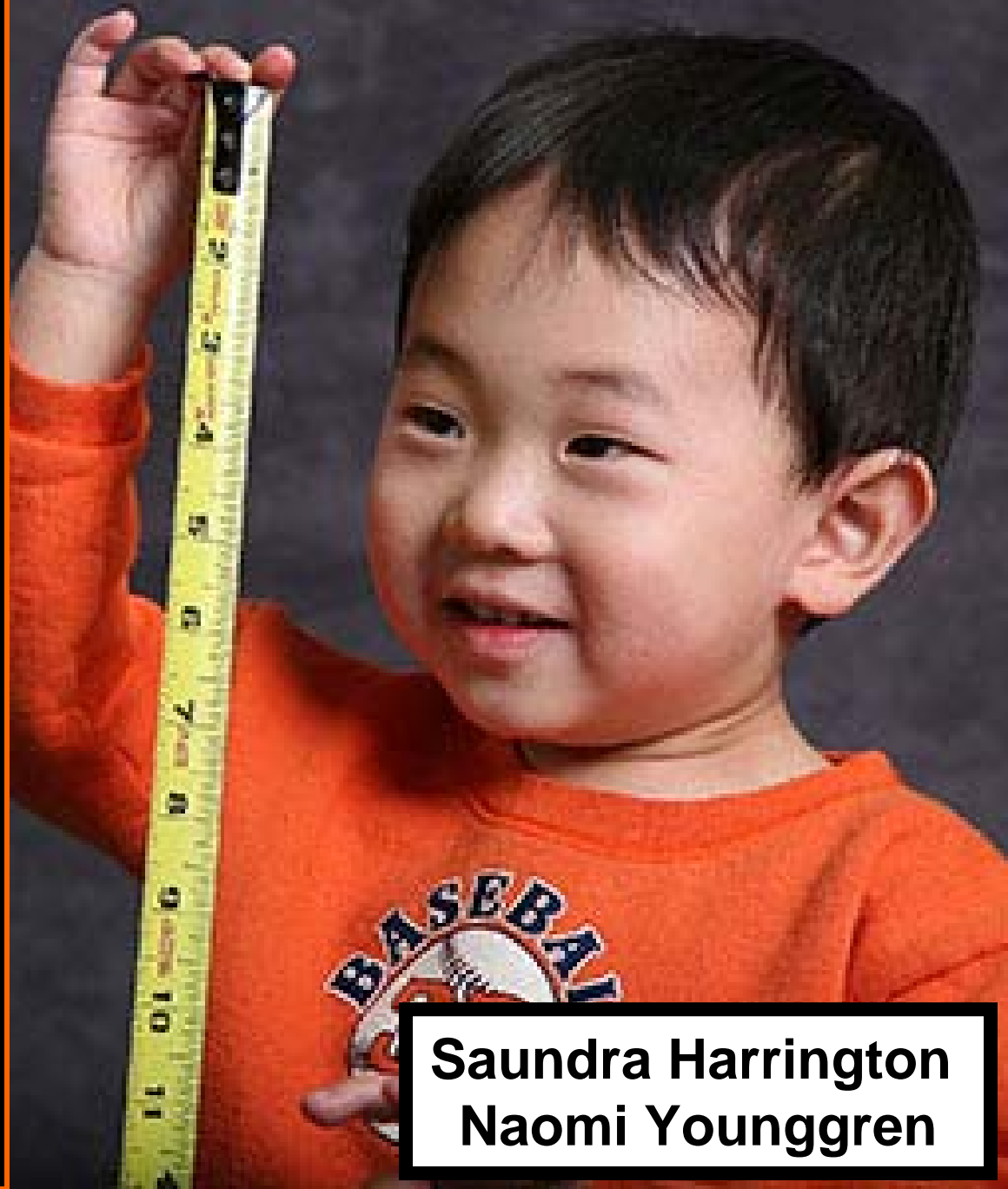


**Integrating
Child
Outcome
Measurement
into IFSP
Processes**



**Saundra Harrington
Naomi Younggren**

Objectives



- ❑ Explore **models for integrating child outcome measurement** into the IFSP process.
- ❑ Examine **advantages & disadvantages** associated with integrating child outcome measurement at different points in the IFSP process.
- ❑ Discuss **tools for easing the integration** of child outcome measurement into IFSP processes.

Two Other Models



□ Virginia



□ DoD – EDIS (Army)



Virginia - overview





□ Eligibility Criteria

- **Virginia falls into the “broad” category for eligibility criteria. To be eligible to receive early intervention services in Virginia, the child must have:**
 - **A 25% delay in any of the developmental domains (based on adjusted age for premature infants <18 months); or**
 - **A diagnosed condition (seizures, IVH, hearing loss, visual disabilities, chromosomal abnormalities, brain/spinal cord trauma, microcephaly, FTT, ASD, severe attachment disorder, CNS anomaly, etc.) **Prematurity is NOT considered a diagnosed condition for eligibility; or**
 - **Atypical development affecting sensory-motor responses, behavior, social-emotional or a combination of social, communication and behavior.**



□ Population Served

- **There are 40 local systems in Virginia which are a part of the Infant and Toddler Connection of Virginia. Each local system includes components providing Service Coordination, education, therapy, medical, education, etc.**
- **Each local system operates a little differently in regard to how service providers are employed. In Norfolk, the Local Lead Agency employs our System Manager, Service Coordinators and Educators. We contract with 4 pediatric therapy groups and several individuals for all other entitled services.**

Virginia



- ❑ Virginia uses the primary provider model for services.
 - Emphasis is on coaching the parents, furthering the belief that the parent/guardian is the child's first and best teacher.
 - We work to ensure that families are not overwhelmed with the number of providers in their home. (Who is invited to the birthday party?)
- ❑ Children are “age-eligible” to go to public school at 2 years old if they are 2 by Sept. 30th of that school year.

Norfolk, VA



- ❑ In Norfolk, we utilize a dedicated Service Coordinator model.
 - We bill Medicaid for those children who are eligible for MR Targeted Case Management.
 - Service Coordinators are responsible for oversight of the IFSP, ensuring therapists' compliance with the IFSP frequency/intensity, ensuring the family is satisfied and the child is progressing.
 - Service Coordinators see the child at least every 60 days. IFSP goals are generally reviewed that often.

Norfolk, VA



- ❑ 11 set evaluation slots / week. An OT, ST or PT is paired with an Educator. 10 Service Coordinators rotate teams based on scheduling & caseload size.
- ❑ On average, 37 evals/month – increasing now
- ❑ We bill 3rd party payors whenever possible. Payor mix today is 68% Medicaid, 30% TRICARE (military)
- ❑ Average length of stay is 9 months
- ❑ Average age at enrollment is 16.75 months
- ❑ Currently, we have 270 children enrolled in the Infant Program. Last year, we served 532 children.

DoD More Specifically



ARMY

- Ft. Bragg, NC
- Ft. Knox, KY
- West Point, NY
- Ft. Benning, GA
- Ft. Campbell, TN
- Ft. Jackson, SC
- Ft. Rucker, AL
- Ft. Stewart, GA
- Ft. Buchanan, PR

NAVY

- Beaufort, SC
- Quantico, VA
- Camp Lejeune, NC

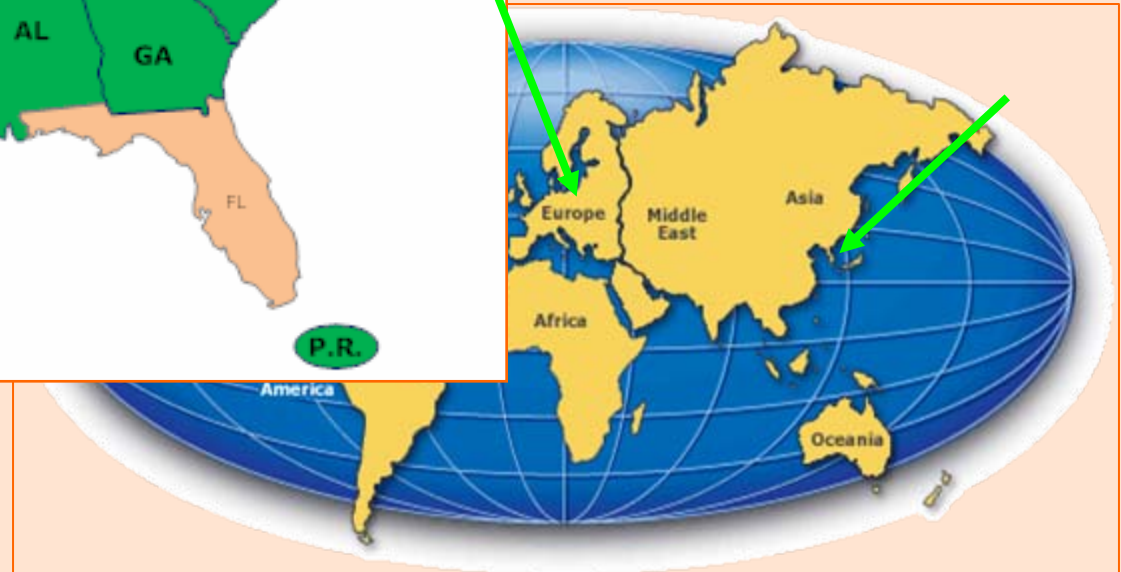
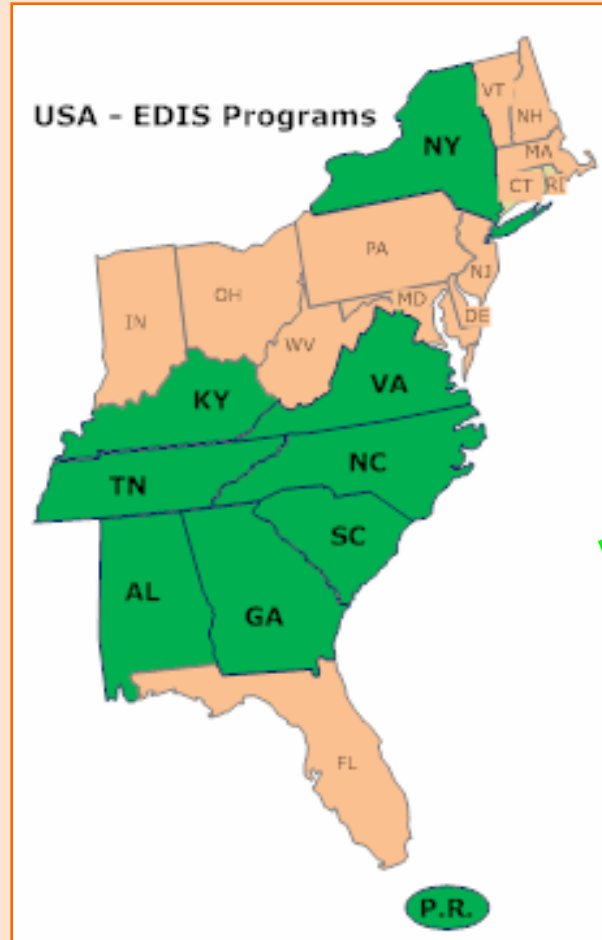
AIR FORCE

- Maxwell AFB, AL
- Robins AFB, GA

OVERSEAS

Army, Navy, AF

- Germany
- Italy
- Belgium
- Netherlands
- Spain
- UK
- Turkey
- Korea
- Japan

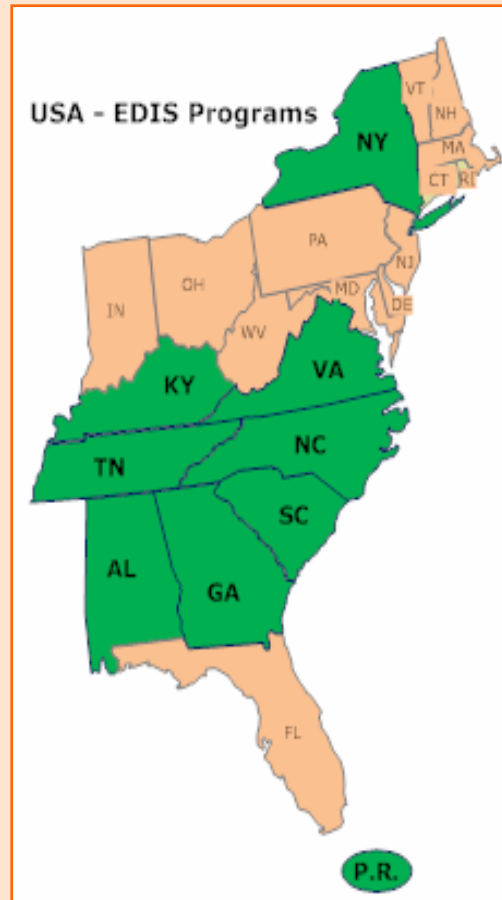


EDIS (Army)



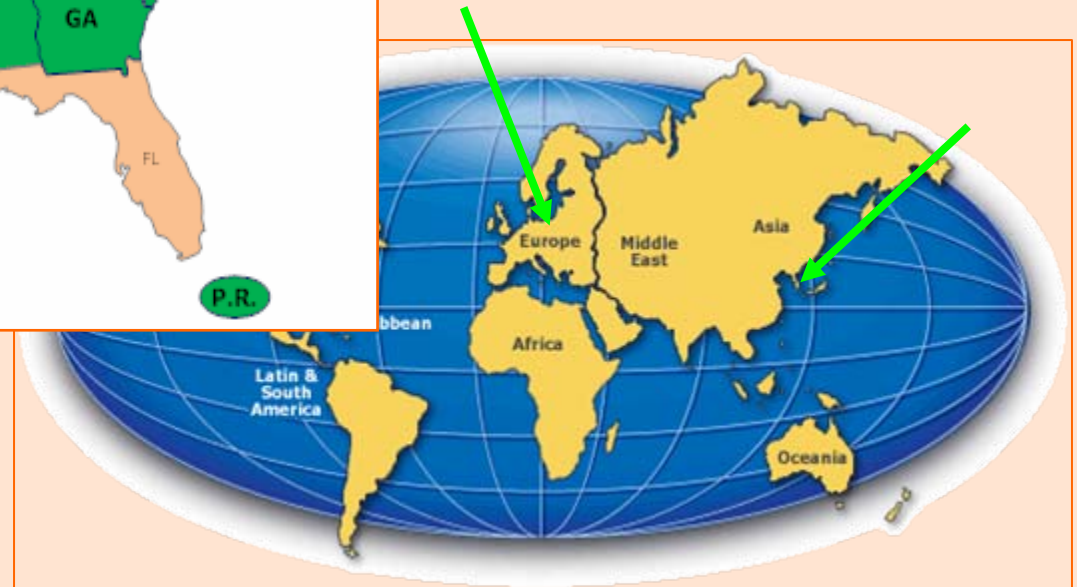
CONUS

- Ft. Bragg, NC
- Ft. Knox, KY
- West Point, NY
- Ft. Benning, GA
- Ft. Campbell, TN
- Ft. Jackson, SC
- Ft. Rucker, AL
- Ft. Stewart, GA
- Ft. Buchanan, PR



OCONUS

- Germany
- Italy
- Belgium
- Netherlands
- Korea



DOD EDIS (Army)-overview



❑ Population Served

- US: Military families residing on military installations with a DoD school system
- Overseas: Military & DoD Civilian families working with the military overseas

❑ Eligibility Criteria

- 25% delay or -2 SD in one area or 20% delay or -1.5 SD in two+ areas
- Diagnosed condition

❑ PSP Approach with all providers “under one roof”

❑ Evaluations per month: Range 1-27 depending on program

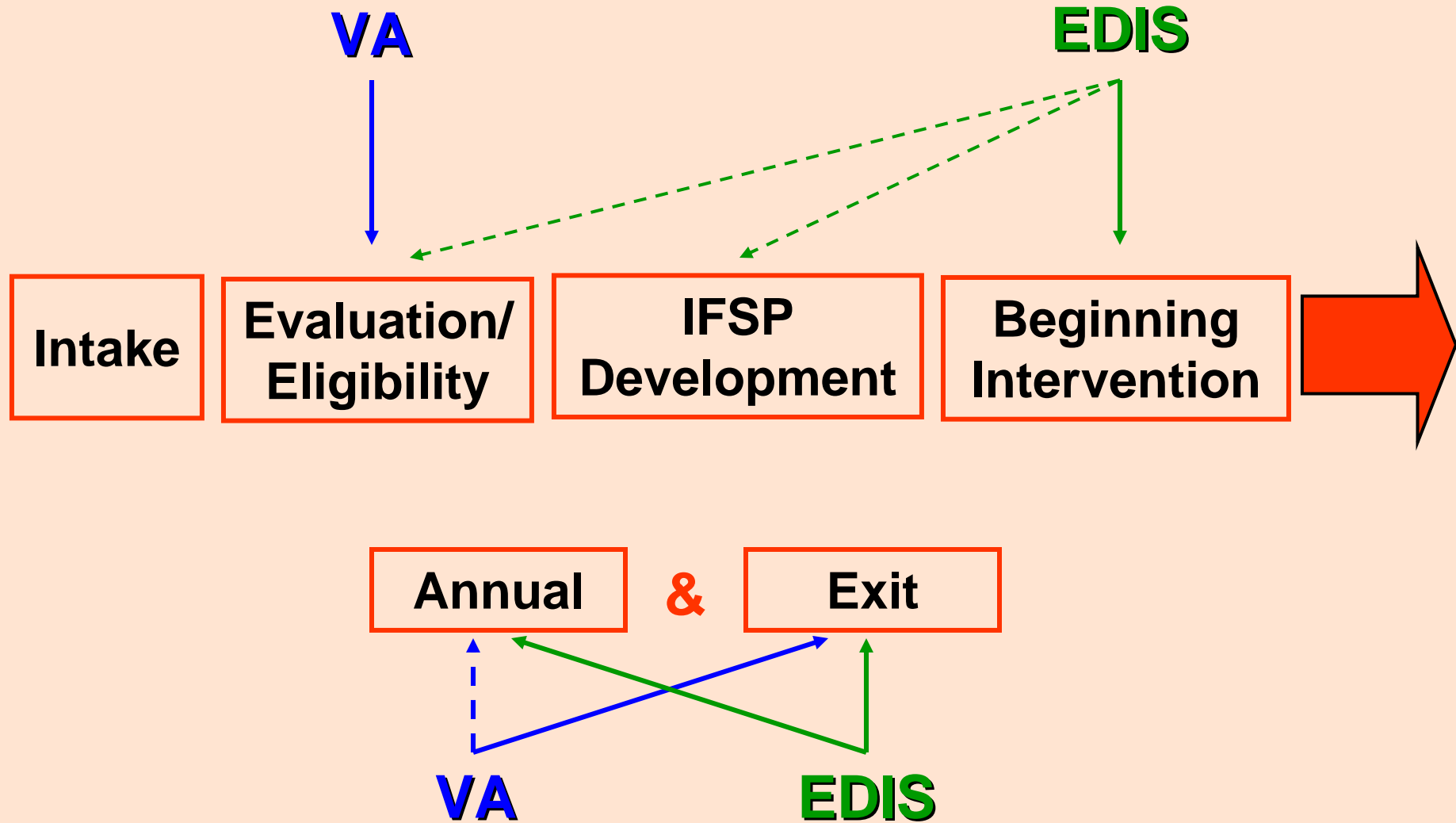
❑ Time in program: Mean 10.6 months

❑ Age at entry: Mean 19 months

❑ EI Population: 484 enrolled as of 31 July 2008

719 served last year

Integrating COSF Ratings





□ General Timelines

- @ initial evaluation / IFSP for all children < 30 months old
- completed at most annual assessments/ IFSP (not a state requirement)
- @ exit unless enrolled < 6 months OR unless annual completed within 6 months. Can use Part B scores at exit, however, there are some inherent problems with this.



□ Process (Norfolk)

- Information gathered from intake, initial home visit and evaluation.
- Immediately following the "testing", the evaluation team reports the results in the 3 outcome areas. After each outcome, a determination is made. *this is the model many systems are moving towards.
- Decision tree and discussion guide are used to facilitate the rating discussion.
- Family is involved in discussion. (not state requirement)

EDIS (Army)



❑ Outcome Timelines

- Within 30 days on either side of initial and annual IFSP
- @ exit unless measured within past 60 days
- Children in the program for > six months

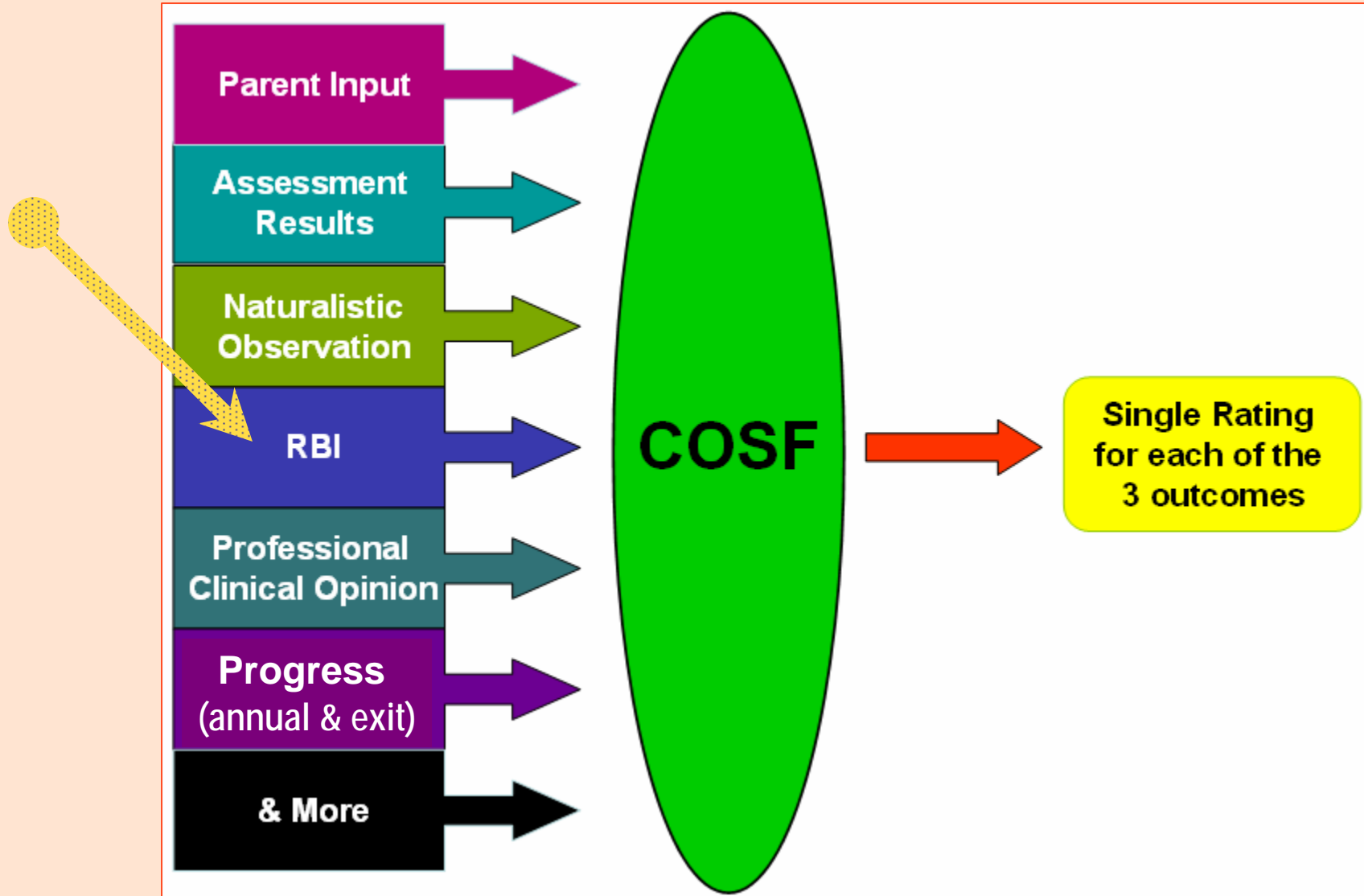
❑ Family Involvement

- Through information sharing
- Physical presence for COSF rating not required

❑ COSF

- *Evaluation/Eligibility (with RBI)*
- *IFSP development (with RBI)*
- Immediately following IFSP development within 30 days

COSF Information Sources



The Routines-Based Interview



- ❑ Functional intervention planning process
- ❑ RBI structure - go through each routine
 - How does your day begin... what happens next...
 1. What is everyone else doing?
 2. What does the child do?
 - **Engagement?**
 - **Independence?**
 - **Social relationships?**
 3. How satisfactory is this routine?

Association



Foundations of Learning McWilliam

Social Relationships

Engagement

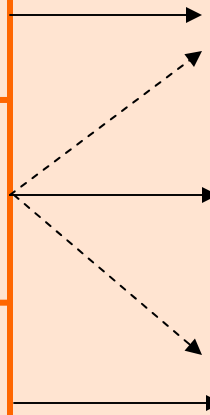
Independence

Child Outcome Measures OSEP

Social Relationships

Acquire & Use
Knowledge & Skills

Take Action to
Meet Needs





The
Routines-Based Interview
(McWilliam)
&
Child Outcomes
(OSEP)

IFSP Guides Process



□ SC/PSP Model

- Need for information hand-off reduced
- See child and family over time

□ Intake

- Early thinking in terms of three functional areas

□ Evaluation/Eligibility

- Condensed write-up reduces deficit-based domain focus

□ IFSP

- RBI - required
- PLOD described in three functional areas
- Contextually meaningful & measurable outcomes
continued focus on functionality

Advantages & Disadvantages



The good news is that we've been removed from the endangered species list.
The bad news is that we've been removed from the endangered species list.



Intake



Advantages

- Early progress in IFSP process does not play into rating decision

Disadvantages

- Eligibility may be unknown
- Too early in process to understand child's functioning

Evaluation/Eligibility



□ Advantages

- Reinforces focus on functional development
- Expedites outcome rating before intervention
- ~ If core evaluation team all children evaluated from that common lens
- ~ If using RBI as part of evaluation increased functional information is gathered

□ Disadvantages

- Raters may not have enough information to make rating
- ~ Evaluation alone might not yield functional information
- ~ Rating with family can create a “mega meeting”

IFSP Development



Advantages

- Reinforces focus on functional development
- Provides increased opportunities to gather information about child's functioning
- ~ If using RBI increased functional information is gathered systematically

Disadvantages

- Raters may still need additional information to make rating
- ~ Rating with family may result in “mega meeting”

Immediately Following IFSP



□ Advantages

- 45-day timeline does not pressure process
- Provides opportunity to go back & gather any needed information
- ~ Provides opportunity for ongoing service providers to contribute their expertise in the rating (*good for subsequent ratings*)

□ Disadvantages

- Does not account for possible progress influenced by initial process
- ~ If done as meeting with family may seem like one more meeting before intervention

Helpful Tools



□ Virginia

- Booklet – typical development, outcome prompts, guidelines
- Online training videos/ powerpoints
- Requirement to have the discussion with the family
- Set eval teams – educator + therapist in child's greatest need area

Helpful Tools



□ EDIS (Army)

- Uniform Training – Three initial modules and Published Q&A
- Routines-Based Interview
- Outcome prompts (handout)
- *Flip Video*

Helpful Tools



□ Shared discoveries

- IFSP - PLOD described in terms of functional areas
- Two practitioners involved in COSF rating process
- ECO Resources & Assistance

**Questions,
Comments,
Discussion?**



Thank you



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