

## **Child Outcomes**

**WV Birth to Three Program** 

### Definitions of the Child Outcomes Summary Form Ratings

### What are the Three Child Outcomes?

### CHILD OUTCOME 1—POSITIVE SOCIAL-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS)

Raters should 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):

- Relating with adults
- Relating with other children
- Following rules related to groups or interacting with others (if older than 18 months)

#### Includes areas like:

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

### CHILD OUTCOME 2—ACQUISITION AND USE OF KNOWLEDGE AND SKILLS

Raters should 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) involving:

- Thinking
- Reasoning
- Remembering
- Using symbols and language
- Understanding physical and social words

### Includes areas like:

- Early concepts –symbols, pictures, numbers, classification, spatial relationships
- Imitation
- Object Permanence
- Expressive language and communication

### CHILD OUTCOME 3—USE OF APPROPRIATE BEHAVIORS TO MEET THEIR NEEDS

Raters should 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) involving:

- Taking care of basic needs
- Getting from place to place
- Using tools (e.g., fork, toothbrush, crayon)
- In older children—contributing to their own health and safety

Includes areas like:

- Integrating motor skills to complete tasks
- Self-help skills (e.g., dressing, feeding, grooming, toileting, household responsibility
- Acting on the world to get what one wants











# What is WV Birth to Three's Process for Capturing Early Childhood Outcome Data?

### THE CHILD OUTCOME SUMMARY FORM—(COSF)

The COSF is not an assessment instrument. The COSF is a scale for summarizing information related to a child's progress in each of the three child outcome areas. The COSF incorporates multiple sources of information to describe a child's current level of functioning in the three outcome areas including formal and informal assessment information, parent interview, observations of the child at home and within community settings and with the parent's permission, review of pertinent medical/health records.

Ratings should reflect the child's current functioning across settings and in situations that make up his/her day, not his/her capacity to function under unusual or ideal circumstances. If assistive technology or special accommodations are available in the child's everyday environments, then the rating should describe the child's functioning using those adaptations. However, if technology is only available in some environments or is not available for the child, rate the child's functioning with whatever assistance is commonly present.

If the child is from a culture that has expectations that differ from published developmental milestones for when young children accomplish common developmental tasks, such as feeding or dressing themselves, use the expectations for the child's culture to decide if the child's functioning is at the level expected for his or her age.

Individual child data is confidential and will not be reported outside WV Birth to Three. Information for all children in total will be recorded to show the percentage of children that make progress while in WV Birth to Three.

All individual child information on the COSF is confidential and will not be shared with others outside of the child's WV Birth to Three team. The entry and exit measurement for each child will be collected, added together with other ratings and then reported as the percentage of infants and toddlers who achieved or made progress toward the outcomes.

### AGE-EXPECTED AND IMMEDIATE FOUNDATIONAL SKILLS

### Typical/Atypical Infant and Toddler Development

Infants arrive in this world ready to learn. With supportive and nurturing relationships, children develop new skills and integrate them into an increasingly complex set of functional behaviors. These skills and behaviors emerge in somewhat predictable developmental sequences in most children. Because of this predictability, we can think of these skills and behaviors as "age—expected."

The concept of "foundational skills" refers to the skills and behaviors that develop earlier in the developmental continuum that serves as the base for later developing skills and behaviors. Differentiated and/or specialized instruction can be based upon identifying these earlier developing skills/behaviors and using them to move to the next higher level of functioning. All skills that lead to higher levels of functioning are considered "foundational skills." "Immediate foundational skills" are skills and behaviors that occur developmentally just prior to age-expected functioning.

#### **Determining a Rating**

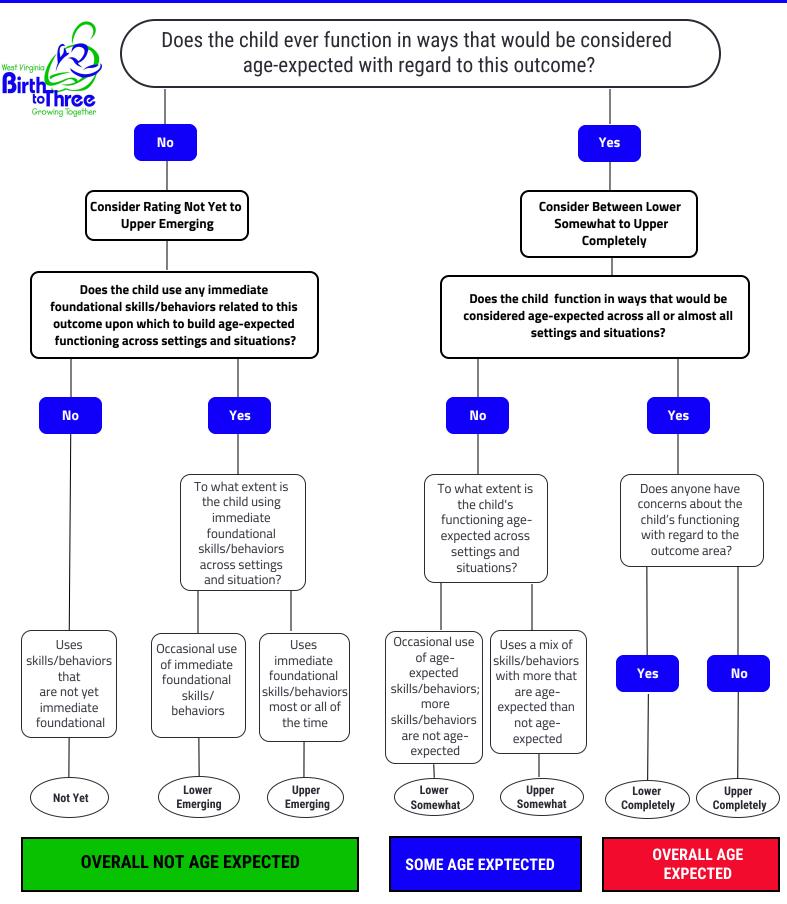
To determine a rating, the team must:

- Understand the developmental continuum
- Think about the many skills and behaviors that allow the child to function in age-expected ways
- Be familiar with the child's functioning in the outcome area across a variety of situations and settings
- Identify the age expected skills, immediate foundational skills and foundational skills/behaviors the child is displaying

## Definitions for Outcome Ratings: For use with the Child Outcomes Summary Form (COSF)

OVERALL AGE-EXPECTED FUNCTIONING	COMPLETELY means:	<ul> <li>Child functions in ways that are age-expected in all or almost all everyday situations that are part of the child's life. No one on the team has concerns about the child's functioning in this outcome area.</li> <li>Child's functioning generally is considered age-expected, but there are some significant concerns about the child's functioning in this outcome area. Although age-expected, the child's functioning may border on not keeping pace with age expectations.</li> </ul>
SOME AGE-EXPECTED FUNCTIONING	SOMEWHAT means:	Child functions using a mix of skills/behaviors, with more skills/behaviors that are age-expected than not age-expected, across settings and situations in this outcome area. Child's functioning might be described as like that of a slightly younger child.
		Child occasionally uses age-expected skills/behaviors across settings and situations in this outcome area. More functioning is not age-expected than is age-expected.
NOT YET AGE-EXPECTED FUNCTIONING	EMERGING means:	Child uses immediate foundational skills/behaviors most or all of the time across settings and situations. Child does not yet function in ways that would be considered age-expected in this outcome area. Functioning might be described as like that of a younger child.
		Child occasionally uses immediate foundational skills/behaviors across settings and situations. Child does not yet function in ways that would be considered age-expected in this outcome area. More functioning reflects skills/behaviors that are foundational than are immediate foundational.
	NOT YET means:	Child only uses foundational skills/behaviors across settings and situations. These foundational skills/behaviors are crucial to build immediate foundational skills/behaviors. Child does not yet function in ways that would be considered age-expected or immediate foundational in this outcome area. Child's functioning might be described as like that of a much younger child.

### **Decision Tree for Summary Rating Discussions**



WV Birth to Three services are administered by the West Virginia Department of Health, Bureau for Public Health, Office of Maternal, Child and Family Health.