Child Outcomes Summary (COS) Implementation Guidance

An outcome is a benefit experienced as a result of services and supports provided to an infant or toddler and their family. For the Early Steps program, benefit means knowing children are making progress and families are increasing their capacity to support their child's development and learning. The purpose of Florida's Early Steps Outcomes Measurement System is to demonstrate infants and toddlers improve developmental outcomes when they exit the program and families report that their participation in the Early Steps Program enhance their capacity and confidence to support their child's development and learning.

To determine if children are making progress, the Office of Special Education Programs (OSEP) requires all state early intervention programs to report data on the following three child outcomes:

1. Children have positive social-emotional skills (including social relationships);
2. Children acquire and use knowledge and skills (including early language/ communication and early literacy); and
3. Children use appropriate behaviors to meet their needs.

A Child Outcomes Step by Step video[1] describes these three outcomes. It explains functioning necessary for each child to be an active and successful participant at home, in the community, and in other places like a child-care program or preschool. To access the video, please visit https://ectacenter.org/eco/pages/videos.asp.

Data on these outcomes serve important purposes beyond federal reporting. Local programs and state agencies need data to show how children are doing and how well programs are serving infants and toddlers and their families. Outcome data also identify opportunities for program improvement. Understanding a child's functioning and progress in the three child outcome areas allows teams to use this information for effective service and intervention planning and delivery.

Child Outcomes Summary Process (COS)

The COS process is a systematic method for a team of individuals who are familiar with a child, including parents, to summarize **multiple sources** of information about his/her functioning in each of the three outcome areas. Information could include parent report, service provider and childcare provider observations, and results from formal and informal assessments. The COS form is not an assessment instrument – it is a way to summarize information and is needed because there are no assessment instruments that directly measure the three child outcomes.

---

[1] Edelman, L. (Producer). (2011). Child Outcomes Step-by-Step (Video). Published collaboratively by ResultsMatter, Colorado Department of Education; Desired Results *access* Project, Napa County Office of Education; and Early Childhood Outcomes Center. Retrieved from https://draccess.org/videolibrary

Child Outcomes Summary (COS) Implementation Guidance

There are four key features of a quality Child Outcomes Summary process.
- The process produces a description of the child's functioning at a point in time by synthesizing multiple sources of information.
- It is a team process, involving professionals and family members contributing to decision-making.
- The process involves team members using the information gathered about a child to rate his or her functioning in each of the three outcome areas on a 7-point scale. The 7-point rating scale is used to compare the child's skills and behaviors with those expected for his or her age.
- The Child Outcomes Summary process is completed at two points in time, at a minimum-- when the child enters the program and when the child exits the program.

Essential Knowledge for Completing the COS Process

All team members bring different information and perspectives to the Child Outcomes Summary process. As a group, the team members completing the process must have the following knowledge and expertise:
- Understanding of the content of the three child outcomes
- Understanding of age-expected child development
- Knowledge of the child's functioning across settings and situations
- Understanding of age expectations for child functioning within the child and family's culture
- Understanding of how to use the 7-point rating scale

CONTENT OF THE CHILD OUTCOMES

Children Have Positive Social Relationships: This outcome means having good relationships with adults and playing well with other children. It also includes being able to separate from an adult when dropped off at childcare, expressing emotions and feelings appropriately, following rules and expectations in different settings, and sharing and taking turns.

Children Acquire and Use Knowledge and Skills: This outcome involves many skills that provide the foundation for later success in school such as thinking, reasoning, remembering, problem solving, understanding symbols, and learning new words. This outcome includes understanding the concepts of more and less and understanding the physical world, such as knowing that a ball will roll, and ice will melt. The outcome also includes being able to repeat sounds, gestures, and words; expressive language and other communication skills; and, for older children, early literacy and numeracy.

Children Take Appropriate Action to Meet Their Needs: Over the early childhood years, children become increasingly independent. This outcome includes taking care of basic needs like hand washing and going to the bathroom, getting from place to place, using tools like a fork or a toothbrush, and knowing not to run into the street. It also includes using motor skills to get something the child wants such a pulling up a stool, using words or gestures to request more crackers, and other appropriate ways to get what the child needs or wants.

Expand each of the outcomes here for additional information.

Child Outcomes Summary (COS) Implementation Guidance

FUNCTIONAL OUTCOMES

A key characteristic of the three child outcomes is that they are functional. Functional outcomes refer to skills and behaviors that are meaningful to infants and toddlers in the context of everyday living. They also reflect how the child functions throughout the day at home and wherever the child spends time. The outcomes cross developmental domains to capture how children integrate the skills and behaviors needed to participate in everyday activities, so the team must understand the outcomes well enough to be able to translate information from domain-based assessments into functioning in each of the three outcomes. This emphasis on functioning aligns with recommended practice for identifying individualized outcomes.

Discussion Prompts for Child Outcomes can be used to expand the discussion of child outcomes, ensure that IFSP team members are considering all aspects of development, and engage the family in the discussion of outcomes

AGE EXPECTED FUNCTIONING

The COS process requires an understanding of the timing and sequences of development that enable infants and toddlers to have positive social relationships, acquire knowledge and skills, and take action to meet their needs. For example, children typically play next to their peers before they meaningfully interact with them. In addition to child development occurring in typical sequences, we also know that children typically acquire skills within a certain time frame. For example, most children learn to walk around 12-15 months of age. The rating process requires that team members understand both the sequence in which children acquire skills and the age range in which they are acquired. Team members will be asked to think about how the child's functioning compared with what would be expected for a child his/her age and how a family's culture may affect what is considered age expected.

AGE ANCHORING

Age anchoring examines a child's functional abilities, skills, and behaviors to determine how close that functioning is to the functioning expected for the child's chronological age. It is important to focus on functional abilities rather than isolated (or discrete) skills that a child may have demonstrated only during assessment. Each of the 7 points on the COS rating scale is defined by specific criteria. These criteria are grounded in three categories of functional levels: age-expected, immediate foundational, and foundational.

> • Age-expected skills - The skills and behaviors that are seen in children of a particular chronological age. For example, if a child is 24 months old, age-expected skills are what a 22-24-month-old would be expected to do. We would describe a 24-month-old with 22-24-month-old skills as showing age-expected skills.
> • *Immediate Foundational Skills* - The skills and behaviors that come just before age-expected skills in development. Consider the example of walking. The skills needed just before walking include cruising from one piece of furniture to another and taking a few unsteady steps on their own. These are examples of immediate foundational skills for walking. If a child is not showing

age-expected skills but is showing the skills that come immediately before the skills expected for the age, we would describe the child as showing "immediate foundational skills."

• Foundational skills – These occur much earlier in the developmental progression of skills. They are called foundational because they form the foundation for later skill development. When considering the example of walking above, consider the skills needed before cruising and initial wobbly steps. Examples include pulling to stand, crawling or scooting, going from a sitting position to all fours in preparation for crawling, or, in younger infant development, pushing up while in tummy time.

Part of every child outcomes rating discussion should include an assessment of the child's functioning relative to age expectations. If a child's functioning is not age-expected, the team needs to determine the extent to which immediate foundational and foundational skills are present.

The Early Childhood Outcomes Center created a list of age-anchoring tools located at https://ectacenter.org/eco/assets/pdfs/Age-expected_resources.pdf. These resources will assist Individualized Family Support Plan (IFSP) teams determine the extent each child is demonstrating age-expected skills in each of the three child outcome areas.

It is important teams have a comprehensive understanding of age-anchoring. It is highly recommended local programs and providers review and become familiar with the Age Anchoring Guidance for Determining Child Outcomes Summary (COS) Ratings developed by ECTA.

FUNCTIONING ACROSS SETTINGS AND SITUATIONS

The review of multiple sources of information assists teams to understand a child's functional abilities, determine functional IFSP outcomes based upon family priorities, and inform the identification of intervention strategies and implementation. When using the three global child outcomes as a framework for summarizing assessment results, providers assist families in thinking about how their child brings together his/her skills across domains to function in specific situations, rather than talking about skills from a particular domain in isolation. For example, how does a child bring skills related to asking for things she wants, holding a cup, and picking up small objects to a meal or snack situation or routine? Discussion regarding the three global child outcomes should focus on the child's functioning in the context of the activities and routines assessed. This promotes conversations about possible IFSP outcomes to support participation and enhanced competence in the everyday activities and routines that were prioritized by the parent.

To assign an accurate COS rating at entry, the team needs to have a complete picture of the child's skills and behaviors across multiple settings. In addition to information gathered during assessment, it is critical to get a picture of the child in places where the child spends time, including at home, in child-care, and in other community settings. The team needs to understand how the child interacts with adult family members, siblings, extended family, and other people in the child's life. This information can be gathered from parent report, discussion with others who are regularly involved in the child's life, observations by providers during home visits, and observations in places where the child spends time.

TEAM-BASED PROCESS

Part of an effective COS process is effective teaming, which includes engaging all members of the team when discussing a child's current level of functioning compared to same-age peers. The COS team needs a complete picture of the child's functioning to decide on outcomes ratings. The team should include families, Service Coordinators, early intervention providers, and others involved in a child's daily routines and activities. The team members contribute different information. Professional team members are skilled at helping to anchor children's skills to age expectations and developmental sequences. Family members know what the child does in different settings and with different people. By sharing what they know about the child, each member of the team helps establish a complete picture of the child's functioning, which helps to ensure that the COS process and the outcomes ratings accurately reflect what the child can do.

Identifying a COS rating is a consensus process. Determining the indicator ratings requires teams to summarize multiple sources of information about a child's functioning across different settings to identify an overall sense of the child's functioning at a given point in time in three outcome areas. Family members are a critical part of the team. The team should consider the way the child interacts with each of the team members, including the family, at home, in the community and in assessment situations with professionals. It takes some practice for teams to become comfortable with the COS process. Once the process is used, however, teams report the process is valuable and meaningful. Sometimes teams identify a rating too quickly without describing the evidence influencing the rating or thinking through the decision points that led them to that rating. Rushing to a rating quickly without multiple sources of supporting evidence and discussion of rating criteria will not result in a meaningful COS process or rating. It's important for teams to be comfortable with the rating descriptions and criteria.

The Child Outcomes Summary Process Team Collaboration (COS-TC) Quality Practices Checklist and Descriptions checklist provides a mechanism for those who implement, supervise, or train on the COS process to identify, observe, and assess recommended team collaboration. It includes a description of each of the quality practices, what it is, and two examples of ways to introduce the different COS discussion points with team members. Resources on the COS-TC include the COS-TC Quality Practices Checklist and Guidance on Using the COS-TC Checklist.

FAMILY ENGAGEMENT

It is very important to provide families with background information about the Child Outcomes Summary process before the assessment for intervention planning and the initiation of services, so that they can fully participate in discussions. This will support families to be active and engaged team participants. The Service Coordinator should explain the three outcome areas, the purpose of the COS process, the rating scale, and the Decision Tree. This preparation should also include letting the family know what to expect to allow an opportunity for questions. It is important families are aware that the information they provide is critical to accurately understanding their child's functioning in different settings and with different people.

Child Outcomes Summary (COS) Implementation Guidance

Resources to support family engagement in the COS process are: Including Families in the Rating Discussion (ECTA/DaSy) and Family Guide Participating in the Child Outcomes Measurement Process (National Parent Technical Assistance Center at PACER Center in collaboration with ECTA)

RATINGS

7-Point Rating Scale
The Child Outcomes Summary (COS) process is a team process for summarizing information on a child's functioning in each of the three child outcome areas using a 7-point scale. The COS Ratings Definitions defines the criteria for each of the seven points on the rating scale.

Sources of information are used by the team during the process. A list of examples is located at http://www.cms-kids.com/families/early_steps/documents/COSSourcesofInformation.pdf (Please note this is not an exhaustive list).

Entry and Exit Ratings
An entry rating is completed for every child who is eligible for Early Steps by 30 months of age. All children who receive an entry COS rating must receive an exit rating, regardless if they have received 6 months of services. At exit, a question about the child's progress since the last rating must also be answered.

COS Decision Tree
The decision tree was created as a tool for training in the use of the COS process. The tree is a series of questions about the extent to which a child exhibits age-appropriate skills and behaviors in each outcome area. The decision tree helps teams understand and apply the 7 points on the scale – responses guide the user to a specific rating category on the 7-point scale. The English version is found at https://ectacenter.org/eco/assets/pdfs/Decision_Tree.pdf. The Spanish version can be accessed at https://ectacenter.org/~pdfs/eco/COS-Decision%20Tree-Spanish_11-7-17.pdf. A more detailed explanation of each of the points on the rating scale is available at https://ectacenter.org/eco/pages/cos-module/story_content/external_files/S04-TranscriptThe7-PointScale.pdf

Annual/Periodic IFSP Meetings

Currently, teams are not required to identify a COS rating at periodic and/or annual IFSP meetings; however, teams are encouraged to do so to support linkages from IFSP services, IFSP outcomes, intervention, and the COS process to monitor progress periodically. This supports families to be more active participants in the COS process, particularly at exit, if they have had more than one opportunity from entry to participate in the process. COS ratings completed at periodic and/or annual IFSP meetings will not be reported on the COS Progress Category Calculator Data Spreadsheet.

Child Outcomes Summary (COS) Implementation Guidance

Re-referrals

If a child was previously eligible for Early Steps, received an entry COS rating, was closed, and later re-referred, the team should review the previous entry rating and determine if it is still an accurate reflection of the child's functioning. If not, the entry rating should be changed to reflect the child's current status.

Transfers

If a child transfers from one local program to another, the transferring program should explain to the parent(s) the importance of transferring the record, including the entry COS rating, to the new local program. Following receipt of consent, the transferring program should send the receiving program the entry rating, along with the rest of the Early Steps record. The receiving program should maintain the initial entry rating from the transferring program.

Child exits program before exit rating

If the team cannot meet in-person, the team should consider alternate means to meet. Considerations for teams when meeting in person is not feasible has been developed by ECTA and can be found at https://ectacenter.org/~pdfs/eco/cos-distance.pdf.

When a child exits unexpectedly (i.e. an unplanned move, lost to follow-up), the available team members must convene to review the most current information available to assign an exit rating.

Transition to Full Implementation of the COS Child Outcomes Summary Process (COS)

Effective December 1, 2020, Florida's Early Steps program will use the COS process, rather than a single standardized tool (i.e., the BDI-2), for child outcomes entry data. Full implementation of the COS will be a transition process, as the same method of measurement must be used for both entry and exit outcomes data. Instructions and guidance related to the transition process can be found at: http://cms-kids.com/families/early_steps/ChildOutcomesMeasurementSystem.html. The table below identifies the required methods for entry and exit outcomes data:

Entry	Exit
Entry outcomes data measured by administering the BDI-2 *(prior to December 1, 2020)*	The BDI-2 must be administered for exit outcomes data
Entry outcomes data identified using the COS *(after December 1, 2020)*	The COS must be used for exit outcomes data

As the process is implementation, questions related to implementation can be submitted to the Early Steps State Office at: CMS_EarlySteps_COS_Questions@flhealth.gov

Child Outcomes Summary (COS) Implementation Guidance

Data Collection, Documentation, and Submission

DATA COLLECTION

Entry Rating

All children eligible for Early Steps by 30 months of age must receive an entry COS rating. This includes children eligible based on developmental delay or an Established or At-Risk Condition. The rating must be identified within 30-days of the initial IFSP meeting. A rating can be identified at the initial IFSP meeting or during the first initial sessions with the Primary Service Provider. Please note – it is important that the team identifying the entry and exit ratings are a consistent team with knowledge and involvement with the child and family.

Exit Rating

All children who receive an entry COS rating must receive an exit rating, regardless if they have received 6 months of services. The exit rating must be obtained no more than 45 days before the child's exit from Early Steps, or within 30 days following the child's exit from Early Steps. A formal assessment is not required. The team should identify a rating based on input from the family on the child's current functioning within everyday routines, progress notes, the most recent assessment(s) for the child, and any other sources of information that reflect the child's current functioning. The sources that are used should be indicated on the COS rating form. Team are encouraged not to review the entry rating at the time of an exit rating to prevent any bias.

 Progress Question: At the time of the exit rating, the team must also answer a question on whether the child has shown any new skills or behaviors (yes/no) since the last rating for each of the outcomes.

DOCUMENTING THE RATINGS

Data from the COS process will be used to address the OSEP Reporting Requirements for Indicator 3. LESs must provide valid and reliable data for the measurement of State Performance Plan/Annual Performance Report (SPP/APR) Indicator 3. This requirement is a factor in the annual LES determination processes and in the annual federal determination process for the State of Florida.

Documentation is important because it serves as a way to verify the accuracy of the Child Outcomes Summary rating. It shows whether teams are applying the rating criteria appropriately. Documentation stands as a record of the team's decision-making, showing the evidence and rationale for the selected rating.

The Florida Child Outcomes Summary Form is located at: http://cms-kids.com/families/early_steps/documents/FLCOSForm.pdf.

DATA REPORTING/SUBMISSION

For consistency, all LESs are required to collect and report data using the COS Progress Category Calculator Data Spreadsheet. LES staff will complete the "Data" worksheet only. The spreadsheet is formatted to calculate and populate the remaining worksheets.

 LES staff will use the unique identifier that is assigned to each child in the UF data system on the spreadsheet.

Designated LES staff will compile the data from all child-specific COS forms using the COS Progress Category Calculator Data Spreadsheet and submit to the state office at CMS_EarlySteps_COS_DataSubmission@flhealth.gov. ESSO will combine COS data submitted by LESs for the purpose of APR reporting and has provided an Excel template for reporting.

The 2020-2021 COS data collection period is from December 1, 2020 through June 30, 2021. LESs must report COS data for all children who meet the Entry and Exit criteria from December 1, 2020 and June 30, 2021.

Data must be submitted on a quarterly basis, using the COS Progress Category Calculator Data Spreadsheet to CMS_EarlySteps_COS_DataSubmission@flhealth.gov, no later than 30 days following the end of the quarter:

- By January 30, 2021 for December 2020
- By April 30, 2021 for the quarter ending March 31, 2021
- By July 30, 2021 for the quarter ending June 30, 2021

The last day to submit COS ratings for the 2020-2021 fiscal year (covering December 1, 2020 through June 30, 2021) will be July 30, 2021.

Corrections to data for the 2020-2021 fiscal year can be made between August 1 – August 31, 2021 only.

A COS Data Spreadsheet Training Guide has also been developed that provides specifics on the COS Progress Category Calculator Data Spreadsheet and offers guidance on how to convert the information and scores recorded on the COS Form into the COS Data Spreadsheet. Questions related to data should be submitted to CMS_EarlySteps_COS_DataSubmission@flhealth.gov.

Requirements For Conducting COS Rating

Early Steps personnel and providers must receive training, guidance and instruction on the COS process prior to determining ratings for a child, completion of the COS Form for any child or submission of a COS Calculator to the state office. It is the responsibility of the LES to ensure that staff and providers in their local areas receive training required by the state.

Child Outcomes Summary (COS) Implementation Guidance

All Early Steps service coordinators and providers who will be involved in the COS process must complete the COS training within 60 days of their initial hire or contract date.

Understanding Federal Reporting Requirements

As part of the State Performance Plan/Annual Performance Report (SPP/APR), states are required to report on the percent of infants and toddlers with Individualized Family Service Plans who demonstrate improved:

1. Positive social-emotional skills (including social relationships);
2. Acquisition and use of knowledge and skills (including early language/communication [and early literacy]); and
3. Use of appropriate behaviors to meet their needs.

a. Did not improve functioning
b. Improved functioning but not sufficient to move nearer to that of same-aged peers (no change in trajectory)
c. Improved functioning to a level nearer to same-aged peers but did not reach it
d. Improved functioning to that of same-aged peers
e. Maintained functioning like that of same-aged peers

One way to measure improvement is through progress categories, which represent developmental changes between a child's entry to and exit from the program. States report annually to OSEP on the percentage of children in each of five progress categories (a to e). These five progress categories may be illustrated as developmental trajectories as seen below:
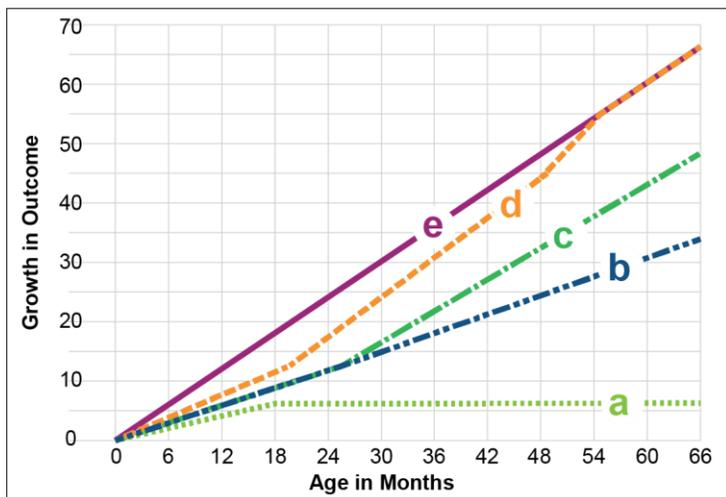
From the progress category data, two summary statements are calculated to provide an overall view of the progress made by groups of children.

Summary Statement 1: Of those children who entered the program below age expectations in the outcome, the percent who substantially increased their rate of growth by the time they exited the program.

The summary statement is calculated from the progress categories as: (c + d) / (a + b + c + d)

Summary Statement 2: The percent of children who were functioning within age expectations in the outcome by the time they exited the program.

The summary statement is calculated from the progress categories as: (d + e) / (a + b + c + d + e)

Resources

Several resources developed by the ECTA Center and the DaSy Center are available to better understand the relationship between COS data, progress categories and summary statements:

An [Interactive Guide to Converting COS Data to OSEP Progress Categories/Summary Statements](#) is a video that explains how the data obtained from the COS process is converted to the progress categories and summary statements that states report annually to the federal government.

A [Progress Category Calculator (Tutorial version)](#) assists users in calculating OSEP categories from the COS data. This tutorial is an Excel file designed to show how OSEP reporting categories are generated from all possible combinations of COS ratings at entry and exit. The tutorial allows you to experiment with various combinations of outcomes ratings and progress question answers to see what OSEP progress category each combination produces.

The [Summary of Rules for OSEP categories from COS data](#) also shows what OSEP progress reporting categories are generated from all possible combinations of COS ratings at entry and exit. It includes a useful table that shows impossible combinations of entry and exit data and explanations for why.

[Graphing templates](#) are also available to assist programs or states to graph their data in various ways.

OTHER RESOURCES

Key Quality Practices – A resource guide to assist states in identifying ways to improve results for children and families participating in early intervention services through implementation of quality practices (ECTA, ECO, Regional Resource Center Program): https://ectacenter.org/~pdfs/eco/QualityPracticesOutcomes_2012-04-17.pdf.

The Division for Early Childhood (DEC) Recommended Practices - The DEC Recommended Practices were developed to provide guidance to practitioners and families about the most effective ways to improve the learning outcomes and promote the development of young children, birth through five years of age, who have or are at-risk for developmental delays or disabilities. The purpose of the document is to help bridge the gap between research and practice by highlighting those practices that have been shown to result in better outcomes for young children with disabilities, their families, and the personnel who serve them: https://ectacenter.org/decrp/decrp.asp

Guidance subject to change via policy following public participation