



Infant & Toddler Connection of Virginia August 2013 Update

August 2013

The Decision Tree

Child Indicator Seeds for Success

Hard to Rate

We all know that the key to completing Child Indicator ratings is to collect and synthesize information from multiple sources, including how the child functions across settings and situations. But what happens when a child has a diagnosis that impacts their function from day to day? See the following question that just came in from the field.

We have had a very interesting situation come up that we haven't had before. We have a 27 month old little girl who has juvenile rheumatoid arthritis. She qualifies for EI services. When she is having a flare-up, she cannot walk and has very limited mobility. When she is having a reprieve from the pain, she readily moves about. Now the question, when the indicator ratings are being determined for entry, how are we viewing this child related to her ability to use appropriate behaviors to meet her needs? Since her abilities vary, do we consider when she is at her lowest degree of movement or at her highest?

Thanks for your question--here's what we think:

We'd actually look at scoring the child a 5 or a 4, depending on the mix of age expected skills and not age expected skills. Looking at the child across time is very similar to looking at a child who displays different levels of functioning across settings, it's just an additional dimension.

Questions you might consider are: which is more prevalent-when symptoms of her RA are active, or when they are quiet? Or is it about the same? Since she is displaying age expected development, the decision tree would guide the team on the right hand side of the tree. Using that as a tool should help the team accurately rate her skills.

Outcomes for Children Served Through IDEA's Early Childhood Programs (2012)

Do you ever wonder what becomes of the Child Indicator data once it has been submitted to the state? If so, check out the following report that summarizes the child outcomes data submitted by states to OSEP in February 2012.

<http://ecoutcomes.fpg.unc.edu/sites/ecoutcomes.fpg.unc.edu/files/resources/OutcomesforChildren-FFY2010.pdf>

Looking for a fun team building activity that tests your team's knowledge of the essential elements needed in determining ratings and increase interrater reliability at the same time? Check out this crossword puzzle?

<http://www.infantva.org/documents/InterraterPZL-7-16-13.pdf>

"The best way to understand the development of children is to observe their behavior in natural settings while they are interacting with familiar adults over prolonged periods of time."

Urie Bronfenbrenner



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Note about This Update:

This Update is prepared by the Infant & Toddler Connection of Virginia State Team at the Department of Behavioral Health and Developmental Services as a means of sharing current information from the Part C Office.

Enrollment of Children in the Medicaid Data System (VAMMIS)

Please note the following contact information for questions about enrollment of children in the Medicaid Data System (VAMMIS).

Irene Scott 804-786-4868 irene.scott@dbhds.virginia.gov

Beth Tolley 804-371-6595 beth.tolley@dbhds.virginia.gov

Early Intervention Certification

For questions about certification of practitioners, contact Irene Scott 804-786-4868

irene.scott@dbhds.virginia.gov.

For questions related to completing the online application, contact David Mills 804-371-6593

david.mills@dbhds.virginia.gov



The Comprehensive System of Personnel Development section of the Infant & Toddler Connection of Virginia Technical Assistance Update has a new look and is being sent as a separate document. You should have received your copy earlier this week.

We welcome your feedback on this change!

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