

## **Appendix C**

### ***Annual Self Assessment***

# Wyoming Infant & Toddler Program Self Assessment: Child Record Review

March 2008

Record Identifying Code: \_\_\_\_\_

Region: \_\_\_\_\_

Date of Record Review: \_\_\_\_\_

Child's DOB: \_\_\_\_\_

Site: \_\_\_\_\_

Record Reviewer: \_\_\_\_\_

Check all That Apply:

The Family is Non-English Speaking or Uses Other Modes of Communication

Surrogate Parent Required

## Instructions

As part of the Wyoming Department of Health, Developmental Disabilities Division's General Supervision and Monitoring System under Part C of IDEA, each Regional Program is required to complete a self-assessment annually through a review of children's records. The child's central record, including provider notes, is needed to conduct a child record review. The self-assessment is designed to gather data from regional programs on their performance related to Wyoming's Monitoring Indicators. Data from the self-assessment will be used to respond to the State's Annual Performance Report (APR). Regional programs are required to review 10% of all child records or a minimum of 10 records, whichever is greater. For example, any program that served more than 100 children will review 10%, while programs that served less than 100 children will review 10 records. Records should be randomly selected from a list of all children who entered early intervention, received services, and exited the program between July 1 and June 30 of the previous year. Additionally, programs must ensure that at least 3 out of every 10 records selected is a child who exited Part C and transitioned to preschool special education during the year. So, for the Federal Fiscal Year 2006-2007, with the APR due February 1, 2008, programs will review 10% of records for children in the program between July 1, 2006 and June 30, 2007. Remember, this is a retrospective data collection and only those activities that occurred during FY 2006-2007 should be reviewed in the child's record.

NOTE 1: "No" should be checked if a specific item should have happened but did not.

NOTE 2: "N/A" should only be checked if a specific item has not yet occurred or is not applicable to child/family or situation.

NOTE 3: Whenever the family's native language or other mode of communication is referenced, the native language or the family's mode of communication must be used unless it is clearly not feasible to do so.

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>Timely Services - SPP/APR Indicator 1</b>	1. Was each service initiated on its respective projected date, i.e. no later than 30 calendar days following the parent's approval (signature/date) of the IFSP?  (303.344(f))				The reviewer should identify any IFSP service that was not initiated within 30 days of the date the parent signed consent for the service. <b><u>If not, calculate number of days for #2.</u></b>	
	2. If not, how long (# of days) was the service delayed beyond the projected initiation date?				If answered no to #1, <b><u>calculate number of days</u></b> from date parent consented to the service to date the service was initiated and subtract 30 days.	
	3. What were the reasons for the delay:					
	a. Due to family circumstances?					
	b. Due to CDC circumstances?					
c. Due to provider circumstances?						
d. Other (specify)_____?						
<b>Child Outcomes - SPP/APR Indicator 3</b>	4. Does the child's initial and/or exit COSF include functional evidence that is appropriate for each outcome area and that is consistent with the rating provided by the team?  (quality)				The reviewer should review COSFs completed during the fiscal year and should consider the following: <ol style="list-style-type: none"> <li>1. Is the evidence provided on the COSF functional information about the child's skills and behaviors?</li> <li>2. Is the evidence provided for each outcome clearly related to the appropriate outcome area? (Is the evidence for outcome 1 related to the child's social and emotional skills including how the child relates to adults and peer? Is the evidence for outcome 2 related to the child's thinking, reasoning and problem-solving skills? Is the evidence for outcome 3 related to how the child acts on the world to get his/her needs met?)</li> <li>3. Is there a sufficient amount of evidence provided on the COSF to support the ratings given in each outcome area?</li> <li>4. Is the evidence provided consistent with the ratings given on the COSF? (i.e. If the rating is "5", is there a mix of age appropriate and non-age appropriate skills and behaviors?)</li> <li>5. Is the evidence in the child's file consistent with the ratings given on the COSF?</li> </ol>	

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>Transition Steps - SPP/APR Indicator 8a</b>	5. Does the transition plan include the following steps to be taken to support the transition of the child? (303.344 (h)(2)):				The IFSP must include steps to be taken to support the transition of the child to preschool special education or to other services.	
	a. Discussions with and training of parents regarding future placements and other matters related to the child's transition? (303.344 (h)(2)(i))				Answer N/A <b>ONLY</b> if child is not yet age eligible for transition.	
	b. Procedures to prepare the child for changes in service delivery, including steps to help the child adjust to, and function in, a new setting? (303.344 (h)(2)(ii))				Answer N/A <b>ONLY</b> if child is not yet age eligible for transition.	
<b>Transition Conference - SPP/APR Indicator 8C</b>	6. Was the transition planning conference held? (303.148(b)(2)(ii))  If "yes", skip to Question #8.				It is the responsibility of the service coordinator to convene a transition planning conference (with parent agreement). This planning meeting can be held up to 9 months before the child's third birthday if all participants are in agreement, but must be convened no later than 90 days prior to the child's 3rd birthday (see indicator 7 below). If the LEA cannot attend, the planning conference must proceed. In the case of children who may not be eligible for preschool special education, with the approval of the family, reasonable effort should be made to convene a transition planning conference with providers of appropriate services to discuss the services that may be provided. Note: The transition planning conference should occur in the family's native language or other mode of communication.  Answer N/A <b>ONLY</b> if child is not yet age eligible for transition.	
	7. If not, what were the reasons? (indicate all that apply)				This items means that referral to Part C was made too late to schedule a transition planning conference.	
	a. Late referral to Part C					
	b. Parent did not agree to having a transition conference					

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>Transition Conference - SPP/APR Indicator 8C</b>	c. Family scheduling difficulties				Family scheduling difficulties could include parent delaying evaluations, parent rescheduling meetings, family failing to show for the conference, etc.	
	d. Child/family illness					
	e. Scheduling difficulties of LEA or provider of other services					
	f. Service Coordinator scheduling difficulties					
	g. Other (specify) _____					
	8. Did the transition planning conference occur at least 90 days (or at the discretion of the parties up to 9 months) before the child is eligible for preschool services under Part B? (303.148(b)(2)(i))				This question should only be answered yes or no for children who have been referred to preschool special education services. Answer N/A <b>ONLY</b> if child is not yet age eligible for transition.	
	9. If not, indicate why not (all that apply)				Indicates that referral was made too late to schedule a 90 day meeting.	
	a. Late referral to Part C					
	b. Parent did not agree to having a transition conference				Family scheduling difficulties could include parent delaying evaluations, parent rescheduling meeting(s), family failing to attend conference, etc.	
	c. Family Scheduling difficulties					
	d. Child/Family Illness					
	e. Scheduling difficulties of LEA					
	f. Service Coordinator scheduling difficulties					
	g. Other					

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>Evaluation and Assessment - Wyoming Indicator 11-B</b>	10. Did the initial evaluation/assessment identify present levels of functioning and the unique needs of the child in each of the following developmental domains (303.322(c)(3))					
	a. Cognitive?					
	b. Physical (e.g., gross motor, fine motor, vision, hearing and health)?				<p>Evaluation and assessment requirements specify that, for purposes of determining initial eligibility, the multidisciplinary team must, with parent consent, include a review of pertinent records from the primary care physician and other sources related to the child's current health status, physical development (<b>including vision and hearing</b>), and medical history, or arrange for participation by primary health care providers. Many times information about hearing and vision are included in these records. Vision screenings of Part C children must be conducted according to a state approved vision-screening checklist. In cases where a child fails the checklist the child shall be referred to an appropriate professional for diagnosis and treatment. Please note that hearing and vision testing required for the Part C evaluation and assessment is not for the purpose of diagnosing specific hearing and/or vision conditions, but is only for the purpose of identifying those children who need further diagnostic evaluation by a specialist. Information about the child's hearing and vision status must be recorded in the child's record and summarized in the IFSP.</p> <p>Relevant health information related to the child's participation in early intervention should be included in the IFSP. Information may include chronic medical conditions, relevant birth history, concerns expressed by the child's physician, etc.</p>	
	c. Communication (e.g., expressive and receptive language)?					
	d. Social or emotional?					
	e. Adaptive?					

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>Procedural Safeguards - Wyoming Indicator 12a</b>	11. Is there evidence that the parent was given written prior notice before each of the following events and that the content of the notice clearly described the action that will be taken and its purpose: (303.403(b)),				Written prior notice must be given to the parents in a reasonable time before the early intervention program proposes, or refuses, to initiate or change the identification, evaluation or placement of the child, or prior to providing early intervention services. The notice must be in sufficient detail to inform the parents about the action that is being proposed or refused; the reasons for the action; all procedural safeguards; and the state's complaint procedures. <b>Notice must be provided in family's native language or other mode of communication.</b> For (a) through (j) below, the reviewer should compare the date on the copy of the written prior notice with each of the actions that occurred and required written prior notice.	
	a. Screening following referral to Part C, if provided?				In some situations, infants and toddlers may need to be screened following referral to Part C to determine if evaluation and assessment is appropriate. Under these circumstances, written notice must be provided to families. Providing written prior notice is NOT required if screening is conducted as a child find activity for Part C.	
	b. Initial evaluation and assessment?					
	c. Initial IFSP meeting?					
	d. Initiating of services on the IFSP?					
	e. IFSP reviews?					
	f. Initiating of new services on the IFSP?					
	g. Subsequent evaluations?					
	h. Annual IFSP meetings?					
	i. Transition Conference?					
j. Discontinuing/exiting services?						
<b>Procedural Safeguards - Wyoming Indicator 12b</b>	12. Was parental consent obtained prior to conducting the initial evaluation and assessment? (303.345(a))				The reviewer should compare the date on the copy of the consent for initial evaluation and assessment with the date the initial evaluation and assessment was provided.	

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<b>Service Implementation - Wyoming Indicator 13a</b>	13. Were the following services identified on the IFSP provided as specified: <div style="text-align: right;">(303.12)</div>				For (a) through (j) below, the reviewer should compare the services listed on each IFSP and its frequency, intensity, and duration with the service notes to determine if each of the services were provided in accordance with the IFSP. If the services is not on the IFSP mark N/A. Then, for services not provided as specified on the IFSP, check all of the applicable reasons.	
	a. Occupational Therapy					
	If not, check all of the following reasons that apply:					
	i. Due to family circumstances?				Family circumstances could include family/child illness, parent unable to scheduling appointments according to frequency/intensity of services on the IFSP, family failing to keep scheduled appointments, etc.	
	ii. Due to CDC circumstances?				CDC circumstances may be related to staff case load at capacity, staff vacancies, staff illness, staff vacation, etc.	
	iii. Due to provider circumstances?				Provider circumstances may be related to provider case load at capacity, no provider available, provider illness, provider vacation, etc.	
	iv. Other (specify) _____?					
	b. Physical Therapy					
	If not, indicate which of the following reasons apply:				See above	
	i. Due to family circumstances?					
	ii. Due to CDC circumstances?					
	iii. Due to provider circumstances?					
	iv. Other (specify) _____?					
	c. Speech Language					
	If not, indicate which of the following reasons apply:				See above	
	i. Due to family circumstances?					
ii. Due to CDC circumstances?						
iii. Due to provider circumstances?						
iv. Other (specify) _____?						

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<b>Service Implementation - Wyoming Indicator 13a</b>	d. Nutrition				See above	
	If not, indicate which of the following reasons apply:					
	i. Due to family circumstances?					
	ii. Due to CDC circumstances?					
	iii. Due to provider circumstances?					
	iv. Other (specify) _____?					
	e. Medical				See above	
	If not, indicate which of the following reasons apply::					
	i. Due to family circumstances?					
	ii. Due to CDC circumstances?					
	iii. Due to provider circumstances?					
	iv. Other (specify) _____?					
	f. Special instruction				See above	
	If not, indicate which of the following reasons apply:					
	i. Due to family circumstances?					
	ii. Due to CDC circumstances?					
	iii. Due to provider circumstances?					
	iv. Other (specify) _____?					
	g. Psychology				See above	
	If not, indicate which of the following reasons apply:					
i. Due to family circumstances?						
ii. Due to CDC circumstances?						
iii. Due to provider circumstances?						
iv. Other (specify) _____						
h. Audiology				See above		
If not, indicate which of the following reasons apply:						
i. Due to family circumstances?						
ii. Due to CDC circumstances?						
iii. Due to provider circumstances?						

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>Service Implementation - Wyoming Indicator 13a</b>	iv. Other (specify) _____?					
	i. Social Work				See above	
	If not, indicate which of the following reasons apply:					
	i. Due to family circumstances?					
	ii. Due to CDC circumstances?					
	iii. Due to provider circumstances?					
	iv. Other (specify) _____?					
	j. Other (Specify) _____					
	If not, indicate which of the following reasons apply:					
	i. Due to family circumstances?					
	ii. Due to CDC circumstances?					
	iii. Due to provider circumstances?					
	iv. Other (specify) _____?					
	<b>Service Implementation- Wyoming Indicator 13b</b>	14. If the following services were identified as necessary to meet the needs of the child and family in the IFSP, were they provided by qualified personnel? (303.361)				For the services listed below, (i) through (x), the reviewer should compare the names/credentials of personnel providing services with the personnel/contractor list submitted with the application for funds (using the most recent updated list). Check N/A <u>only</u> if the service is <u>not</u> on the IFSP.
i. Occupational Therapy						
ii. Physical Therapy						
iii. Speech Language						
iv. Nutrition						
v. Medical						
vi. Special Instruction						
vii. Psychology						
viii. Audiology						
ix. Social Work						
x. Other _____						

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>IFSP Outcomes and Strategies- Wyoming Indicator 15</b>	15. Does the IFSP include outcomes (or statements of measurable results) that are expected to be achieved, including pre-literacy and language as developmentally appropriate?					
	If yes, answer (a) through (d) below.				For (a) through (d) below, the reviewer should provide a “yes” response to the following questions, <u>ONLY</u> if the reviewer can answer <u>yes</u> that <b>all IFSP outcomes (or strategies) for the child comply with the item/question.</b>	
	a. Are IFSP outcomes measurable? (303.12 (a)(1), 303.344 (c))				IFSP outcomes should include criteria, procedures, and timelines for determining progress and whether modifications or revisions are necessary. Outcomes should state what the child will do or have, under what circumstances, and when. Outcomes should be specific enough to be able to determine when the outcome is achieved.	
	b. Are the IFSP outcomes stated to reflect family priorities, concerns and resources?  ((303.12(a)(2))				A yes response to this question is if all child and family IFSP outcomes are clearly based on family concerns and priorities (e.g. there are clear connections between information on family Information section of the IFSP and the IFSP outcomes).	
	c. Are the IFSP outcomes functional and stated in terms of the child’s participation in everyday routines and activities?  (quality)				In determining if child IFSP outcomes are functional, a yes response would mean that they reflect what the child will do in everyday routines and activities. Child outcomes are not functional if they are written: <ul style="list-style-type: none"> <li>• as services to be provided, and/or</li> <li>• in discipline-specific therapeutic language, and/or</li> <li>• in vague terms, and/or</li> <li>• without relevance to everyday routines and activities.</li> </ul>	

Topic Area	Question	Yes	No	N/A	Guidance for Record Reviewer	Reviewer Comments
<b>IFSP Outcomes and Strategies- Wyoming Indicator 15</b>	d. Do the strategies/activities support the capacity of the family/caregivers to enhance the child's development and achieve each IFSP outcome? (quality)				A yes response should be made if strategies and activities reflect the professional supporting the family/caregivers to implement intervention strategies, which take place in the home and community settings. If strategies and activities reflect only what the professional will do with the child and only include specialized places and equipment, then strategies are not designed to support the capacity of the family/caregiver.	
<b>Clinical Opinion: Eligibility - Wyoming Indicator 17</b>	16. Is there documentation showing evidence that informed clinical opinion was used during evaluation and assessment? (303.322 (c)(2))				The reviewer should review the evaluation and assessment reports (MDT) and eligibility statements to determine if informed clinical opinion was used to determine eligibility.  The evaluation report(s) should contain information beyond test scores, including a description of developmental skills and evidence that informed clinical opinion was used to determine eligibility. (See NECTAC Notes: Informed Clinical Opinion)	