

EI Data and Monitoring Q&A

The EI Data and Monitoring team has received many questions over the past year about data, monitoring, documentation, and other topics. Many of these questions came up during the Data and Monitoring “Road Show” trainings during late 2016. These questions, along with answers to each, are provided subsequently. Please note that this document is not intended to be exhaustive and you should contact your TA consultant with any additional questions.

Case Notes

Q: When using Early Track to document case notes, since they are date stamped, should the actual activity date be included at the beginning of the case note?

A: If the case note is not being entered on the same day the activity occurred, the person documenting the note should enter the date of the actual activity at the start of the note or integrate the date directly in the note. For example, “On January 2, 2017 I met with the Jones family regarding...”

Q: Does DODD refer to case notes in ET for non-compliance reasons? Do case notes need to be entered in ET? If yes, what?

A: If a record is selected for verification, non-compliance reasons may be verified within case notes. Each program can determine its own method for recording case notes, whether that is in Early Track, Gatekeeper, handwritten, or other. It will be up to each program to supply case notes to document NCRs at the time of verification. DODD does *not* pull case notes from Early Track as part of verification. Case notes are not required to be entered into Early Track.

Q: Can two people use the same case note form for documentation?

A: There is nothing that specifically prohibits two individuals from using the same case note as long as the note contains all of the necessary information for each person (who, what, when, etc. with separate signatures and dates). When documenting service delivery, it must be very clear what each individual did. In addition, notes need to meet the relevant licensure requirements for each professional.

Child Outcomes Summary (COS)

Q: When is the COS required to be completed?

A: The COS must be completed within 45 days of program referral; annually; and when a child is exited from the EI program, unless: 1) no IFSP has been completed for the child prior to being exited from EI or 2) the exit reason is that the child is deceased or there was a loss of contact with the family. When a child is transferred from one county to another, the receiving county should perform a COS if a functional assessment is completed, as the COS is part of that process. COS analyses are specific to each county.

Note: In Early Track, the following COS drop down option should be chosen *only* when performing a periodic IFSP review: “Not applicable: IFSP is not an initial or annual IFSP.” It is never appropriate to use this drop down option on the exit page in Early Track.

Q: Where are the DaSy COS Process modules located?

A: The DaSy COS Process modules can be accessed at the following link: <http://dasycenter.org/child-outcomes-summary-cos-process-module-collecting-using-data-to-improve-programs/>. For reference, this link is also included in each edition of the bi-weekly EI Program Updates communication.

Q: Are COS scores displayed in Early Track?

A: Only the COS statements, not the scores, are displayed and selected in Early Track. However, each statement corresponds to a score of 1 through 7 for reporting purposes (see Appendix A). DODD sends COS data files to counties that include the scores on a quarterly basis and will continue to do so until COS reports are available in Early Track.

Documentation of Diagnosis

Q: What are the required components for documentation of a diagnosis on the list?

A: At a minimum, documentation of the specific diagnosis—along with a signature from a professional licensed to diagnose and treat mental or physical conditions—must be obtained. This information, including the signature, can be obtained electronically. Discharge summary paperwork is also acceptable documentation, as long as it includes an acceptable diagnosis and a signature from an appropriate person. If you have specific questions about whether particular items are acceptable for documentation of a diagnosis on the list, contact your EI program consultant.

Q: What are the required components for documentation of a diagnosis on the form (not on the list)?

A: Rule 3701-8-07(B)(2)(b) specifies that, for infants and toddlers who have a diagnosed physical or mental condition not listed on Appendix 07-A, form 8024 must be filled out *completely*. This includes, at minimum, the child's name; child's date of birth; parent name; parent contact information; child's diagnosis/condition; information regarding the potential impact(s) of the diagnosis/condition in at least one of the areas of development; professional's name; professional's specialty; and professional's signature. If any of these components are missing, documentation of the diagnosis is not considered to be valid. If you have specific questions about whether particular items are acceptable for documentation of a diagnosis on the form, contact your EI program consultant.

Q: Can the team move forward with required 45-Day components if they have been informed the child has a diagnosed condition with a high probability of resulting in a developmental delay, but documentation has not yet been received?

A: The eligibility information and functional assessment, together, help to determine whether a child has a Need for Services (NFS). If the team knows the child has a diagnosis with a high probability of resulting in a developmental delay, the team can move on to the child and family assessment. Prior to moving on to establishing the NFS, though, the documentation of the diagnosis must be received or a developmental evaluation must be administered, as all prerequisites must be completed prior to establishing a NFS.

Q: Can referrals from a doctor or hospital with a listed diagnosis count for diagnosis on the list?

A: A referral from a physician or a hospital does not automatically make a child eligible for Early Intervention. In order for the child to be eligible, proper documentation of a diagnosis must be received, as described in the two previous answers.

Q: Can HEA 8024 be used to document a diagnosis on the list?

A: HEA 8024 can be used to document a diagnosis on the list. However, when entering the diagnosis into Early Track, in order for the data system to recognize it correctly, the “diagnosis on the list” drop down option on the Eligibility page must be chosen.

Services

Q: How do I add a new outcome in Early Track?

A: Each service-outcome combination should be entered separately in the data system. So, if multiple services are needed to meet the same outcome, or one service is needed to meet multiple outcomes, users must make separate entries for each unique combination. When it comes to an IFSP review, an end date should be entered for any service-outcome combinations that are no longer continuing, and any new outcomes should be added as new service-outcome combinations. As such, the data system will require start dates for each service-outcome combination and will prompt for an NCR if the start date is more than 30 days from the IFSP review. However, only the *first instance of service delivery for each service type* is included in TRS analyses.

Q: If a service will take place in both the home and the community, how should we enter the location in Early Track?

A: If a service is delivered to meet the same outcome in more than one location, the location where services are planned to take place the majority of the time should be listed as the location in Early Track. This guidance remains the same if a service is being provided via technology in addition to a physical location.

Q: Can a service start with a childcare provider or family member other than the parent?

A: The delivery of services must be planned, intentional, and support an outcome. Thus, a service can start with a childcare provider or someone other than the parent if the team decides that is what is best.

Q: When should a service be listed on the grid/what should be on the grid?

A: A service should be listed in the grid (IFSP Section VI) when all information about the service is known. The service listed must be within the listed provider’s scope of practice and the provider must have agreed to provide the service in accordance with Early Intervention rules and regulations. Each column on the grid needs to be filled out: EI Service Type, Method, Location/Setting, How Often, Session Length, Provider Agency, Funding Source, Projected Start Date, and Duration of Service. If a service is being provided outside of the EI system, it should *not* be listed on the grid.

Q: When should the secondary service provider (SSP) be listed on the grid?

A: A secondary service provider should be listed on the grid when a service outside of the primary service provider’s (PSP) scope of practice is needed to meet an outcome and all information listed in the

grid is known. The role of the SSP may include sharing additional knowledge, conducting further functional assessment, or providing support to the PSP. See EI Program Update #1618 for additional information about joint visits.

Q: If a service is scheduled to be delivered with a provider who has a waitlist, and the scheduled appointment is past the required 30 days from the signed IFSP, should the service go on the grid? If so, what noncompliance reason (NCR) should be used?

A: Any service for which you know all of the information needed to complete the grid and the provider has agreed to deliver services in accordance with EI rules and regulations is considered to be coordinated, and should be documented on the grid. The family should be receiving options for access to services within 30 days. If the family is provided other options and chooses a specific provider that has a waitlist, "Parent/Child reason" is the proper NCR, and it should be clearly documented in case notes that the family chose that provider, despite being offered other options. If the family was not provided with other options, the proper NCR is "HMG system reason;" however, if the Service Coordinator is still searching for providers who will agree to deliver the EI service within the required timeframe, the service is not yet considered to be coordinated and should not yet be listed on the grid.

Q: Are provider notes required to identify which activities are addressing which outcomes?

A: It is best practice for provider notes to identify which outcomes are addressed. To meet Timely Receipt of Services (TRS) standards, provider notes must clearly document *which* service was provided and that *an* outcome on the IFSP was addressed, at minimum (in addition to other TRS requirements).

Redetermination

Q: When is redetermination due?

A: Redetermination is due to be completed one year from the initial IFSP or the most recently completed annual IFSP, unless the child's third birthday is less than 90 days from that date. *Redetermination due dates remain the same regardless of whether a child is exited from and re-referred to EI, or if a child transfers from one county to another.*

Q: What needs to be completed as part of redetermination?

A: As part of redetermination, the following must be completed: eligibility, if determined via Informed Clinical Opinion (ICO), Diagnosis on the Form, or Out of State Eligibility; Child Assessment; Family Assessment; Need for Services; and an IFSP.

Q: Where can I find out when redetermination is due for a particular child?

A: Redetermination due dates can be found in a few different places in the data system. In the upper right corner of the child record under the "Status" heading, the date redetermination is due or "Redetermination Not Needed" is always displayed. Additionally, starting 180 days before redetermination is due, the needed components and due dates are displayed in a red message at the top of the child's record. Finally, redetermination due dates for all children currently served in EI can be found at any time by running the EI Redetermination report.

Note: There is a known issue in Early Track regarding redetermination for transferred children. Though the due dates *do not change* upon transfer, redetermination messages are not displayed in a transferred child's record and transferred children are not included on the EI Redetermination report. If you need assistance determining when redetermination is due for a child who has been transferred to your county, send an e-mail to ETDS@odh.ohio.gov.

Transition outcomes

Q: How should transition outcomes be written? Are they meant to be focused on school preparation or can they remain child and family centered?

A: Transition outcomes are meant to ensure that parents and their children experience a smooth transition from EI to other services and supports at age three and answer the question: "What steps and services are needed to support the smooth transition of the child?" The IFSP team should develop outcomes that address the parent and child needs related to the transition, including transition to preschool special education services (as appropriate), or other community services. Transition outcomes, like all outcomes, should be developed using the following ECTA six step criteria:

1. Outcomes are necessary to meet the family needs;
2. Outcomes reflect real life settings;
3. Outcomes are discipline free;
4. Outcomes are jargon free;
5. Outcomes emphasize the positive; and
6. Outcomes avoid the use of passive words.

See the Ohio IFSP guidance document for additional information.

Q: How should transition outcomes be documented in Early Track when no interventionist is needed?

A: Transition outcomes should be entered into Early Track exactly how any other outcome should be entered (See Question in the "Services" section for further details). There are occasional situations where Service Coordination is the only service needed to meet a transition outcome. In these infrequent scenarios, the "N/A – No interventionist needed to meet transition outcome" should be selected and only the "Outcome" field will be required in addition to service type. If there are multiple transition outcomes, they should each be entered separately, like all other outcomes.

Q: Does the TPC have to occur as part of an IFSP review?

A: No, a TPC may occur separately from an IFSP review, but they most often occur together.

Q: Is the signature page of the IFSP required for transition?

A: The Transition Planning Conference (TPC) needs to be documented on Section IX of the IFSP, but since a TPC does not have to occur with an IFSP review, the Signature page (Section X) is not part of TPC verification.

Choosing the appropriate LEA

Q. How do I know whom to contact at an LEA, especially if it is out of the county?

A. ODE has an online database that allows users to identify contact information for each school district in the state at <https://oeds.ode.state.oh.us/SearchOrg>. You can also generate data extracts of specific organization types by category (e.g., all service centers) at <https://oeds.ode.state.oh.us/DataExtract>.

Q. How do I determine which LEA to list when a child is homeless? In foster care? Parent is incarcerated? Bio parent is living out of state?

A. DODD and ODE are in the process of revising the Part C to Part B transition document, which will provide additional guidance regarding some of these issues. Service Coordinators can contact their local LEA or Educational Service Center (ESC) for specific situations. A directory of Educational Service Centers is posted at <https://education.ohio.gov/Topics/Data/Ohio-Educational-Directory-System-OEDS/Ohio-Educational-Directory-Data>, along with a map of all Ohio school districts.

In addition, regional contact information for Special Ed Preschool Programs is available at <http://education.ohio.gov/getattachment/Topics/Early-Learning/Preschool-Special-Education/Contact-Information/Preschool-Special-Education-Contacts-by-Region.pdf.aspx>.

Coordinating with LEA/ODE

Q. How can we work with the LEAs to increase their involvement in transition and TPCs?

A: DODD and ODE are currently revising the “Transition from Part C to Part B” document, which will outline each entity’s requirements and best practice for the transition process, along with provide guidance and recommendations. Local inter-agency agreements can provide a framework for the transition process, with agreed upon roles and responsibilities. The ECTA website also has numerous examples and tools for developing transition agreements at <http://ectacenter.org/topics/transition/stateex.asp>.

Q: How long should LEA reports be retained at the county level?

A: LEA reports are not considered part of the child record and are therefore not subject to a DODD retention policy. Retention of LEA Reports should follow the policy of the local agency.

Reports

The following are the specific questions received during the Road Show trainings regarding EI Reports. For additional information about EI reports, which fields are included, and how they can be used, refer to the EI Report Uses document. This document was included with EI Program Updates #1702 sent on January 20, 2017 and is also accessible on the “ET Info” tab of Early Track.

Q: Can I access a report showing the total number of children referred to a county for the year?

A: The “Program Referral Extract” includes all program referrals made to EI and Home Visiting within a user-specified time period.

Q: Is there a report that generates a master list of children served in a specified time period that includes the information needed for mailing labels?

A: There currently is no report available that includes all children served in a specified time period and also includes families' addresses. However, you can submit a request to ETDS for this information at any time.

Q: How can I get a cumulative report of all children served over a specified date range to compare to those who did not have an established NFS?

A: The "Children Receiving Services" report provides a list of all children served over the user-specified time range. However, the "Program Referral Extract" is ideal for identifying the number of children served (had an IFSP) to those who did not end up going on to have a NFS, among those referred within the user-specified time period. This report includes fields for IFSP date and NFS date; a date in either field means that component did occur for the child in the referral period, and lack of date means it did not.

Q: Can I access a report that includes the child's name, DOB, ETID, most recent IFSP date, eligibility date, and services listed on the IFSP for all services funded by Title XX?

A: The "EI Services" report includes all of these fields. You can utilize sorting, filtering, and de-duplicating and/or pivot tables to narrow down the data to include only the fields you need. See the "Using Data in Excel" handout for more details which can be found on the Data and Monitoring page of the EI website on the "Data and Monitoring Resources" tab and also on the ET Info tab of Early Track.

Q: Where can I find a redetermination compliance log?

A: The "EI Redetermination" report includes redetermination due dates for all children served in EI at the time the report is run who have redetermination due at some point before they turn three. At this time, children who have been transferred are not included on this report, which is a known issue.

Q: Can I access a report to gather the information that will be displayed on my county's Annual Performance Report (APR) report?

A: The APR is a compilation of data from a variety of different sources, some of which requires more complex analyses than others, so there is not one specific report that includes all of the APR data. The state sends county APR reports to each county's FCFC Coordinator and Contract Manager every year, as well as posting them online. Data related to APR indicators can be accessed as follows. See the "APR Indicator Descriptions" document for more information regarding specific data used for each indicator analysis.

- Indicator 1 – TRS: The "EI Services Report" provides all information related to services, including the date the service was added to an IFSP and the date the service started.
- Indicator 2 – Settings: The "EI Services Report" also includes location where service is planned to be delivered.
- Indicator 3 – Early Child Outcomes: The state will send COS data on a quarterly basis until reports are available for use in Early Track.
- Indicator 4: Family Involvement: These data are collected through the first three questions of the annual Family Questionnaire. Summary reports are sent to each county every year.

- Indicator 5: Child Find (Birth to One): The “Children Receiving Services” report provides a snapshot of number of children served on the user-specified date, including the age range of each child on that date.
- Indicator 6: Child Find (Birth to Three): The “Children Receiving Services” report provides a snapshot of number of children served on the user-specified date.
- Indicator 7: 45-Day Timeline: The “45-Day Compliance Monitoring Report” includes all of the components required to be completed within the 45-Day timeline for children referred in the user-specified time range.
- Indicator 8: Early Childhood Transition
 - 8A: Transition Steps: Transition Steps data are currently not entered into Early Track, so these data come from physical IFSPs. For baseline compliance analyses, a Self-Assessment of a sample of records is utilized.
 - 8B: Notification to LEA: The “Quarterly LEA Report” includes all children turning three within one year from the specified date. For baseline compliance analyses, the February 1 reports are used.
 - 8C: TPC: The “Transition Compliance” report includes all children with TPCs due in the user-specified time range.

Miscellaneous

Q: How is the SSID assigned and why don't all children have one?

A: SSIDs are assigned by a third party vendor contracted by ODE and linked to children who are in Early Track. Early Track takes certain demographic information (approximately ten fields) about the child and mother that has been entered and then attempts to match this information with Vital Statistics. If a match can be performed, then additional demographic information from the child's birth certificate—information that is required by ODE's third party vendor in order to create an SSID—is obtained and then sent to ODE's third party vendor that assigns SSIDs. If a match cannot be made with Vital Statistics, no information will be sent to the third party vendor and an SSID will not be assigned through EI in Early Track. However, Early Track will continue to attempt to match with Vital Statistics. Thus, if a child's name is updated, for example, Early Track may subsequently be able to match with Vital Statistics and then send the information to the third party vendor.

Q: Why isn't “No Screening completed” a drop down option for “Taking a Look” in Early Track like it used to be?

A: That option was intentionally removed as the vision screening requirement has to be met in some way, and ET was incorrectly counting this as being completed when the “No screening completed” option was chosen. If the vision screening requirement is met via another screening type or a diagnosis related to vision, the appropriate option should be chosen from the screening drop down in ET, as such.

Q: What is a related requirement?

A: These are requirements in the federal regulations that go beyond just timelines and address the quality of the EI process (such as timelines for the review of an IFSP). They take into account how parents are informed of their rights, how procedural safeguards are implemented, the extent to which children's unique strengths and needs are identified, and whether services are provided appropriately to

address those needs, for example. There are related requirements for each of the three compliance indicators.

Q: When meeting TRS or the 45 Day timeline, how are the number of days counted?

A: For the 45 day timeline, required components must be completed within 45 *calendar* days of the child's referral to Early Intervention. Calendar days include weekends and holidays. *Calendar* days are also used for TRS compliance, in which services must begin 30 days after the IFSP has been signed. If you would like assistance setting up an Excel spreadsheet to help you calculate the number of days please send a request to ETDS@odh.ohio.gov.

Q: If a Service Coordinator is out sick for a few days and has an IFSP review scheduled that is due soon, can another Service Coordinator complete the IFSP review in his/her place? If so, does the originally assigned SC have to then re-review the IFSP when he/she gets back?

A: Yes, another credentialed Service Coordinator or Service Coordinator Supervisor can attend an IFSP review in place of the assigned Service Coordinator. If this happens, make sure the family knows whom to contact and also be sure to document on the signature page and in case notes who attended the IFSP meeting in place of the assigned Service Coordinator. No additional documentation is needed in Early Track.

Q: How do I document that a child is not eligible in Early Track? How do I document that a child does not have a need for services?

A: If an evaluation has been completed and shows no delays and there are no other means for determining a child eligible, enter the evaluation results on the eligibility page, and then proceed with exiting the child using the reason "Child/Family not eligible." If a child has been found eligible via any of the allowed means, but the team has determined the child is not in need of early intervention services, first enter the appropriate eligibility and child and family assessment information. Then, go to the Need for Services page and choose the option that the child and family "DO NOT have a need for Early Intervention services at this time." Finally, enter the exit information, choosing the exit reason, "Child/Family not in need of services."

Q: If a child has been determined eligible in multiple ways, do we need to enter them all?

A: All forms of eligibility should be entered in the record. This helps the data system to reflect the physical record and may also help at redetermination. Eligibility redetermination is only due for children made eligible via ICO or the Diagnosis on the Form. However, only information consistent with rule should be entered into the data system. In short, if you have all of the information required by rule for any of the eligibility categories, it should be entered into Early Track.

Q: On the IFSP form, should we document the score or level of delay from the developmental evaluation?

A: Best practice would be to include the score in some format as well as the level of delay; however, the score, score range, or level of delay would be acceptable documentation individually. Most importantly, ensure that whatever method you choose to utilize to record this information is meaningful to the family and allows you to choose the correct drop down options to reflect the results in Early Track. Eligibility information should be documented on both Section IV and Attachment A.

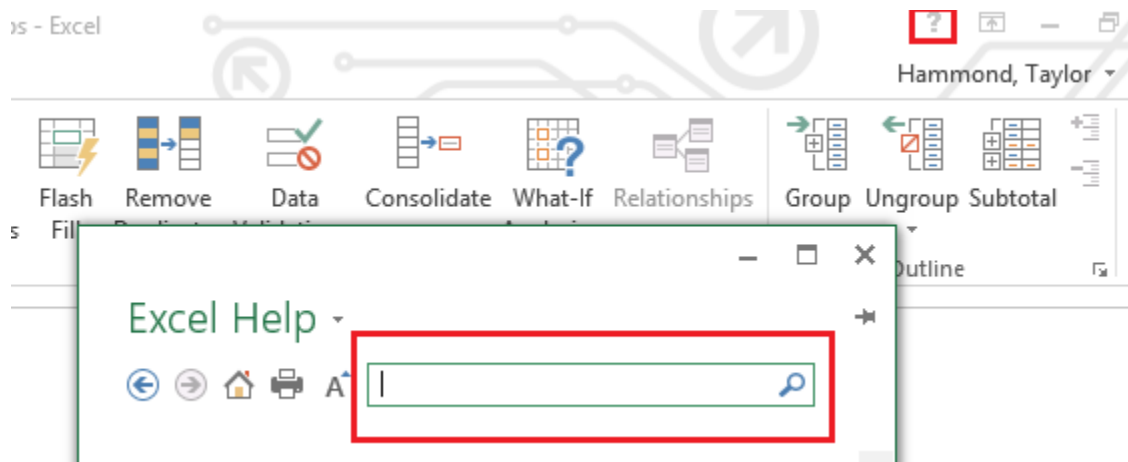
Q: How should I edit an error on the IFSP form?

A: Correcting an error on the IFSP depends on what was discussed with and understood by the family at the time the IFSP was written. An edit to correct an error in documentation, which is consistent with what was discussed with and understood by the family can be made without holding an IFSP review. Once the correction is made, it should be initialed by the person who made the change and then a copy should be sent to the family. If an edit is needed to change something that was not discussed with or understood by the family, an IFSP review needs to be completed to make the change and prior written notice may need to be given to the family. If you are unsure of whether an IFSP review is needed to make a change or whether prior written notice is needed, contact your TA consultant for assistance.

Excel

We have received several requests and suggestions for Excel-specific trainings to help manage EI data. We are still exploring ways to provide additional support in this area, but, in the meantime, the following strategies should help you get the information you need:

- 1. Use the Microsoft Excel Help function.** You can access the Help function by pressing the “F1” key or by clicking on the question mark in the upper right corner of the Excel file. An “Excel Help” box will pop up (see screen shot below) where you can type whatever you need help with in the search box. You will be provided with a variety of helpful links that offer step by step instructions, screen shots, and videos to help you do what you need to do.



- 2. Use your search engine of choice to find what you need.** There are plentiful resources available on the internet to help you more effectively use data, from more general tutorials, to websites and message boards that answer very specific questions.
- 3. Utilize local community resources.** Lots of places such as libraries and community colleges offer classes on different topics such as Excel.

Appendix A – COS Crosswalk with Scores

Conclusion from <i>Decision Tree</i>	Characteristics and Observations	COS Descriptors in <i>Early Track</i>	Rating for APR Reporting
Completely means:	<ul style="list-style-type: none"> Child shows functioning expected for his or her age in all or almost all everyday situations that are part of the child's life. Functioning is considered appropriate for his or her age. No one has any concerns about the child's functioning in this outcome area. 	Relative to same age peers, child has all of the skills that we would expect of a child his age in the area of this outcome	7
Between Completely and Somewhat	<ul style="list-style-type: none"> Child's functioning generally is considered appropriate for his or her age but there are some significant concerns about the child's functioning in this outcome area. These concerns are substantial enough to suggest monitoring or possible additional support. Although age-appropriate, the child's functioning may border on not keeping pace with age expectations 	Relative to same age peers, child has the skills that we would expect of his age in regard to this outcome; however, there are concerns	6
Somewhat means:	<ul style="list-style-type: none"> Child shows functioning expected for his or her age some of the time and/or in some setting and situations. Child's functioning is a mix of age-appropriate and not age-appropriate behaviors and skills. Child's functioning might be described as like that of a slightly younger child*. 	Relative to same age peers, child shows many age expected skills, but continues to show some functioning that might be described like that of a slightly younger child in the area of this outcome	5
Between Somewhat and Nearly	<ul style="list-style-type: none"> Child shows occasional age-appropriate functioning across settings and situations. More functioning is not age-appropriate than age-appropriate. 	Relative to same age peers, child shows occasional use of some age expected skills, but more of his skills are not yet age expected in the area of this outcome	4
Nearly means:	<ul style="list-style-type: none"> Child does not yet show functioning expected of a child of his or her age in any situation. Child uses immediate foundational skills, most or all of the time, across settings and situations. Immediate foundational skills are the skills upon which to build age-appropriate functioning. Functioning might be described as like that of a younger child*. 	Relative to same age peers, child is not yet using skills expected of his age. He does however use many important and immediate foundational skills to build upon in the area of this outcome	3
Between Nearly and Not Yet	<ul style="list-style-type: none"> Child occasionally uses immediate foundational skills across settings and situations. More functioning reflects skills that are not immediate foundational than are immediate foundational. 	Relative to same age peers, child is showing some emerging or immediate foundational skills, which will help him to work toward age appropriate skills in the area of (outcome).	2
Not yet means:	<ul style="list-style-type: none"> Child does not yet show functioning expected of a child his or her age in any situation. Child's functioning does not yet include immediate foundational skills upon which to build age-appropriate functioning. Child functioning reflects skills that developmentally come before immediate foundational skills. Child's functioning might be described as like that of a much younger child*. 	Relative to same age peers, child's functioning might be described as like that of a much younger child. He shows early skills, but not yet immediate foundational or age expected skills in the this outcome area	1

* The characterization of functioning like a younger child only will apply to some children receiving special services, such as children with developmental delays.

Adapted from the Early Childhood Outcomes Center and from materials developed by Naomi Younggren, DoD for EDIS May 2011 and Maryland Early Intervention: The Early Childhood Intervention and Education Branch/Division of Special Education/Early Intervention Services/MSDE