

The Decision Tree

Child Indicator Seeds for Success



What Will Be Your Legacy?

August is What Will Be Your Legacy Month. Leaving behind a legacy can be simple. You don't have to succeed at ensuring world peace, or single handedly solve the world's issues. Nor do you have to possess something tangible of great value to pass on to your descendants. Your positive actions can make a lasting impact to the people you interact with each day whether it's a kind word, gesture or idea!

We are blessed because we work in early intervention and have the opportunity to leave behind the most important legacy. One that has a lasting impact on the children and families we work with. Families begin what is often a long, difficult journey with us. Early intervention supports and services lay the foundation for that journey.

I came across a blog written by a parent from Virginia. Here is an excerpt from her post:

Ethan loved to jump, at first it was precious, we called him our little bunny. But then he started missing developmental milestones. The tickle and play you would expect from a young child was replaced by a constant need to jump and flap, an aversion to noise and a fascination with things that spin. With great trepidation, I called Virginia's early intervention services office for an evaluation.

The staff was phenomenal. Under the Part C IDEA program, the evaluators, coordinator and service providers worked with me to identify Ethan's needs, ensure he received the needed services and ultimately to communicate those needs to the school district. His growth was magnificent and I started to feel hopeful again. The Part C program was one of the very first steps I would make in my journey into services for my child, and those steps have forever changed our lives.

Today Ethan is 7 years old and in 2nd grade and now gets services under Part B of the IDEA. While he still has a long way to go, he has an amazing sense of humor and communicates not only his needs and feelings but has learned to joke. Ethan, who was once seemingly without the need for company, is learning to develop friendships and loves to play games with his peers. Everyone who knows him and has worked with him comments on how far he's come. Our family is stronger because Ethan's education is built on the roots established through the Part C early intervention services he received.

And one of the comments left to her post:

My experience was equally phenomenal although my son was "simply" born prematurely and had difficulty with breathing, swallowing, and eating. Each of these essential elements have been difficult and we still struggle with them but he is wonderful and without EI, he would not be close to walking at 36 months, giggling and enjoying his environment. As a mother, I would be a total and utter basket-case without the wonderful support from the staff I have worked with.

There's nothing better than receiving a thank you note from a family to remind us of how important our work is and how it really does make a difference for families at their child's most critical time of development. So on those days when you've spent way too much time on the road, pull out one of those thank you notes you've received and reflect back on how that family's journey has been positively impacted through your work in early intervention, and know your work has made a difference!



**Thank you for making
The Infant & Toddler Connection of Virginia
part of your professional legacy!**

Test Your Inter-rater Reliability



**Our state's focus on child indicator ratings has led many to wonder,
"Are we all rating children similarly?"**

As part of our efforts to improve results for children, we will be focusing each month on increasing our statewide inter-rater reliability. We will be using examples of narratives from around the state that ideally will include observations of functional behaviors, parent/caregiver input, results from assessment tools and informed clinical opinion. Below is an example of a narrative from a recent Assessment for Service Planning. Using the limited information provided in the narrative and the process outlined in the Child Indicator Booklet talk thru the scenario with your colleagues to determine a rating. The ratings given by the assessment team can be found at the end.

Disclaimer: This activity is for learning purposes only and is not intended to be an endorsement of any particular narrative. It is intended to help you reflect on the questions that follow.

Questions to Consider:

1. Was there enough information provided to determine a rating? What additional information did you need?
2. Was there input into the narrative from all members of the assessment team including the family?
3. Was the child's functioning across settings in each indicator clear?
4. Were functional skills listed under the correct indicator?
5. How close were your ratings compared to the ratings given by the assessment team? One or two off, in the same color family or way off? Did you agree with the ratings given by the team? Why or Why not?

Yamir's Age: 6 months

Adjusted Age: 3 months



Referral Information, Medical History, Health status: Yamir was referred to Sunnyside Infant and Toddler Connection by Dr. Meadow at Sunnyside Pediatrics due to concerns with Yamir's prematurity. Mother's water broke when she was 26 weeks along and Yamir was born then. He was born at Sunnyside Medical Center. When Yamir was born, he weighed 1 pound and 15 ounces. He passed his newborn hearing screening. The MRI completed showed that he had a grade 1 intraventricular hemorrhage. He was transferred to Cloudyside Children's Hospital shortly after birth. He finally came home from the hospital late summer. Yamir is diagnosed with left vocal cord paresis and subglottic stenosis with laryngomalacia. He had a Nissen procedure completed. He also had his G-Tube placed. Dr. Gastric is the doctor following up on this. Yamir has dysphagia. He had a swallow study completed which showed aspiration to all liquids. He is scheduled to have a pharyngeal function study at Cloudyside Children's hospital. Yamir has left ventricular hypertrophy and an Echo completed showed a mild left ventricular hypertrophy. Yamir has right nephrocalcinosis. Yamir sees Dr. Meadow at Sunnyside Pediatrics for routine health care.

Daily Activities and Routines: Yamir lives with his parents. His dad works at a nail salon and his mom is currently looking for a job. Yamir's grandparents help watch Yamir occasionally. Yamir loves bath time and he will cry when he is taken out of the bath. He also loves his mom talking to him. Sleep is currently a difficult time because Yamir will sometimes wake up mad, and his family is concerned that he might be having nightmares. Yamir's family would like for him to learn both Hindi and English. They would like for Yamir to attend child care when he is around one year old. Currently, Yamir has many doctor appointments and Mother has to bring him to Sunnyside Medical Center or Cloudyside Children's hospital often. It can be difficult for Yamir's family to communicate with doctors because Mother does not speak English.

Family Concerns: Yamir's family is concerned about his prematurity and his overall development. They are concerned that he keeps his head turned to the right and that he does not like to be on his tummy. They are concerned that he is using a G-Tube.

Family Priorities: Yamir's family would like for him to learn how to eat. They would like for him to tolerate being on his tummy and turning his head to both sides. They would also like for him to continue to gain skills and meet developmental milestones.

Developmental Levels: Cognitive- 4 months Gross Motor- 1 months Fine Motor- 2 months
Receptive Language- 4 months Expressive Language- 4 months
Social/Emotional- 3 months Adaptive/Self Help- 2 months

Social/Emotional Skills including Positive Social Relationships: Yamir loves when his mom talks to him. He will smile when she holds him and talks. When he hears his giraffe sing the ABCs, he will smile, kick his legs, and wave his arms. Yamir is not yet recognizing the differences between people. When someone walks into the room, he does not react differently depending on the person. Mother calms Yamir by carrying him, and patting his bottom. He will follow people with his eyes when they walk around the room. Yamir enjoys looking at his mobile and bright lights.

Child's Development in Relation to Other Children the Same Age:

Acquiring and Using Knowledge and Skills, including early language/communication: Yamir loves to listen to his giraffe stuffed animal that sings the ABCs. He will turn his head when he hears his mom's voice. Yamir's airway is too narrow so he is constantly making heavy breathing sounds. His family hopes that his airway will correct on its own. He is very vocal, but is not yet making babbling noises or vowel sounds. Yamir loves to see himself in the mirror. When he is in his swing, he will look at his mobile. His mobile also has a mirror and he will watch himself. He will watch his hands and also put them in his mouth. Yamir is not yet reaching for toys or his parents. He keeps his hands closed and will grab his mom's finger if she places it near his hand. He is not yet holding briefly onto a rattle or other objects.

Child's Development in Relation to Other Children the Same Age:

Use of Appropriate Behaviors to Meet Needs: Yamir is not yet rolling over. He does not like being on his tummy because of his G-Tube. His family does not put him on his tummy because they are afraid that it will hurt him. He will kick his feet while on his back. Yamir moves a lot and wiggles his body. He wiggled so much one time that his feeding tube was dislodged and they had to bring him to the hospital to get it fixed. Yamir keeps his head turned to the right side. His grandfather reported that he was kept on that side during most of his time in the NICU. He will bring his head to the middle when following an object, but not all the way to the left side. Yamir's cries sound the same for when he is hungry, wet, or tired. Sometimes he will wake up from a nap mad, and his family is concerned that he might have nightmares. Yamir is fed via a G-Tube. His family will put a little bit of cereal on a pacifier for him to try to learn how to eat with his mouth. They would like for him to learn how to eat.

Child's Development in Relation to Other Children the Same Age:

Assessment Team Ratings:

Social/Emotional Skills including Positive Social Relationships: Rating 2: Yamir is beginning to show some of the early skills that are necessary for development of more advanced skills in this area.

Acquiring and Using Knowledge and Skills, including early language/communication: Rating 1- Yamir has the very early skills in this area. This means that Yamir has the skills we would expect of a much younger child.

Use of Appropriate Behaviors to Meet Needs: Rating 1- Yamir has the very early skills in this area. This means that Yamir has the skills we would expect of a much younger child.



Determining the indicator ratings requires teams to synthesize an enormous amount of information about a child's functioning from multiple sources and across different settings to identify an overall sense of the child's functioning at a given point in time in three indicator areas.



Indicator statements (ratings) are based upon child's **chronological age- there is no adjustment for prematurity.**

Yamir's family will face many challenges due to his prematurity and medical concerns. Check out the following resource from Virginia's EIPD Early Intervention Strategies for Success Blog to test your knowledge. Take a pop quiz to see what you know and keep reading for answers and tips you can use when supporting preemies and their families!

[Preemie Pop Quiz and Tips](#)