

# COS-TC

Child Outcomes Summary Team Collaboration

# TOOLKIT



# Building Quality Practices with the COS-Team Collaboration Toolkit

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## Website

Paper version of the COS-TC toolkit can be accessed online at <http://ectacenter.org/~pdfs/eco/COS-TC-Toolkit.pdf>

An online version of the COS-TC Toolkit with interactive descriptions and examples and video clips for each section of the toolkit is available at <http://olms.cte.jhu.edu//olms2/COSTC>.

## Acknowledgment

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# COS-TC Toolkit Checklist

Team Identifier:

Date:

## I. Planning for the COS

Quality Practices	No	Partly	Yes
<i>'No' indicates that the practice is not observed; 'partly' indicates that the practice is observed some of the time or that some, but not all, of the practice is observed; 'yes' indicates the practice is fully observed most or all of the time.</i>			
1. Providers <b>review COS background information</b> , including the meaning of the three outcomes, the rating criteria, the decision tree, the descriptor statements, and COS process <i>(as needed)</i> .			
2. Providers <b>review age-expected growth and development</b> for the age of the child <i>(as needed)</i> .			
3. Providers ensure that <b>multiple sources of information</b> about the child's functioning are available for review <i>(e.g., observations, evaluation, progress reports, and reports from parents, specialists, and others who know the child)</i> .			
4. Providers confirm there is information about the child's functioning for each of the <b>3 child outcome areas</b> .			
5. Providers confirm that there is information about the child's <b>current functioning across settings and situations</b> .			
6. Providers consider the child's functioning in terms of <b>AE-IF-F</b> with reference to <b>age-anchoring</b> tools and resources. <i>(AE-age-expected, IF-immediate foundational, F-foundational)</i>			
7. Providers <b>review plans for sharing information</b> about the COS and how to engage the family in the COS decision-making process.			

Notes

## II. Explaining the COS Process to Families

Quality Practices	No	Partly	Yes
<i>'No' indicates that the practice is not observed; 'partly' indicates that the practice is observed some of the time or that some, but not all, of the practice is observed; 'yes' indicates the practice is fully observed most or all of the time.</i>			
1. Providers <b>explain to the family why</b> outcomes data are collected and <b>how</b> they are used.	No		Yes
2. Providers <b>describe the three child outcomes</b> that are measured.			
3. Providers <b>describe how</b> the outcome data are collected.			
4. Providers <b>check for family understanding</b> before moving on.			

Notes

### III. Understanding Child Functioning

Quality Practices <i>'No' indicates that the practice is not observed; 'partly' indicates that the practice is observed some of the time or that some, but not all, of the practice is observed; 'yes' indicates the practice is fully observed most or all of the time. Practices are rated for each outcome areas.</i>	Out- come 1	Out- come 1	Out- come 1	Out- come 2	Out- come 2	Out- come 2	Out- come 3	Out- come 3	Out- come 3
	No	Partly	Yes	No	Partly	Yes	No	Partly	Yes
1. Team members discuss the full <b>breadth of each outcome</b> (i.e., across the range of functioning pertinent to each outcome).									
2. Providers invite the <b>family to share information</b> about their child's functioning for each outcome area.									
3. Team members discuss the child's <b>current functioning in</b> each outcome area.									
4. Team members discuss <b>information from multiple sources</b> (e.g., family input, other observations, assessments, progress monitoring, child care providers, specialists, neighbors) for each outcome.									
5. Team members discuss the child's functioning <b>across settings and situations</b> .									
6. Team members discuss the child's functioning for each outcome in sufficient <b>depth</b> to describe how the child uses skills in meaningful ways.									
7. Team members focus on the child's <b>functional use of skills</b> versus discrete skills.									
8. Team members discuss <b>skills the child has and has not yet mastered</b> .									
9. Team members discuss how the child's <b>current use of skills relates to age-expected development</b> (AE-IF-F).									

Notes

### IV. Building Consensus for a High-Quality COS Rating

Quality Practices <i>'No' indicates that the practice is not observed; 'partly' indicates that the practice is observed some of the time or that some, but not all, of the practice is observed; 'yes' indicates the practice is fully observed most or all of the time. Practices are rated for each outcome areas.</i>	Out- come 1	Out- come 1	Out- come 1	Out- come 2	Out- come 2	Out- come 2	Out- come 3	Out- come 3	Out- come 3
	No	Partly	Yes	No	Partly	Yes	No	Partly	Yes
1. Team members discuss <b>key decisions</b> about the child's functioning shown on the <b>decision tree</b> using all they know about the child's mix of skills.									
2. Team members discuss the <b>rating for each outcome in descriptive terms</b> , not simply as a number.									
3. Team members <b>reach consensus</b> for each outcome rating.									
4. The COS <b>ratings are consistent with rating criteria</b> for all the information shared and discussed.									

Notes

## V. Interactive Practices

Please look for opportunities where providers could use the following interactive practices and rate the extent to which each occurs. Examine if these practices are observed throughout all four of the earlier sections of the COS-TC. Indicate if the presence or absence of a practice is particularly notable in a specific type of activity or was perhaps not applicable.

Quality Practices				No	Partly	Yes
<p><i>'No' indicates that the practice is not observed; 'partly' indicates that the practice is observed some of the time or that some, but not all, of the practice is observed; 'yes' indicates the practice is fully observed most or all of the time.</i></p>						
<b>Providers:</b>						
a. ...share and/or synthesize information <b>clearly and concisely</b> .						
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b. ... <b>display good affect</b> (e.g., tone, facial expressions, and responsiveness).						
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c. ...give <b>eye contact</b> appropriately.						
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d. ... <b>do not use jargon</b> and <b>clearly explain technical terms</b> .						
Notes						
e. ... <b>actively include all team members</b> in the discussions.						
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f. ... <b>show responsive behaviors</b> that illustrate active listening and responding.						
Notes						
g. ... <b>let team members finish their thought</b> before replying or moving on.						
Notes						
h. ... <b>ask good follow-up questions</b> to check for understanding or collect rich detail.						
Notes						
i. ... <b>use descriptive examples</b> , paraphrasing, and summarizing to check understanding.						
Notes						
j. ... <b>listen empathetically</b> , being sensitive to emotions and environmental demands (e.g., phone ringing, child fussing).						
Notes						
k. ... <b>acknowledge and respect family input</b> about the child's functioning.						
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