

Utah Department of Health and Human Services Research/Data Sharing Agreement Summary

The <u>Division of Family Health</u> (DFH) at DHHS seeks to better understand the effectiveness of the services we provide families with infants, toddlers, and preschoolers.

DFH is required by the <u>Department of Education's IDEA Part C</u> to have a system and programs in place that helps families discover, as early as possible, any special needs their children may have. Participation in the DFH programs listed below is voluntary. These DFH programs are designed to link families to the additional resources and direct services their child may need.

DFH needs linked USBE attendance and outcome data to determine if DFH is meeting the IDEA requirement. The four programs at DFH targeted for this research study are:

- <u>WIC</u>: an early nutrition and developmental screening/referral system for pregnant mothers and families with young children under 5 years of age.
- <u>Early Childhood Utah-ASQ</u>: a developmental screening program and tool (Ages and Stages Questionnaire) used by providers and parents to discover if infants and young children (2 months to 5 years) are meeting age-appropriate milestones or if they need to be connected to additional resources/services.
- <u>Home Visiting Program</u>: The Maternal and Infant Early Childhood Home Visiting (MIECHV) program also provides parenting information, developmental screening, and referral services to families with infants and young children under five in a home-based setting.
- <u>Baby Watch Early Intervention Program</u>: This IDEA Part C program provides direct services to children (0-3) who have developmental delays or disabilities. Services are tailored to meet the child's individual needs. Services take place in the child's natural environment (home, child care, etc.). Many children who participate in IDEA Part C also go on to receive IDEA Part B services through USBE's special education programs.

With linked USBE attendance and outcome data, DFH can assess if the children our programs served were referred to and enrolled in the most appropriate services, as early as possible. Linked data will help DFH gain a better understanding of the effectiveness of our programs.

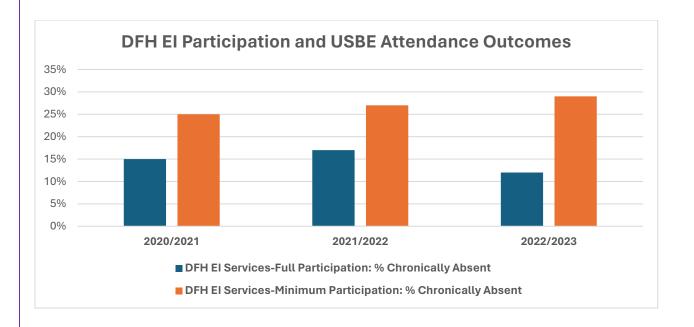
Draft Research Questions and Mock Data Output Examples

#1: Do we see significant differences in *attendance outcomes* for cohorts of children whose families consistently participated in DFH programming compared to families with minimal participation?

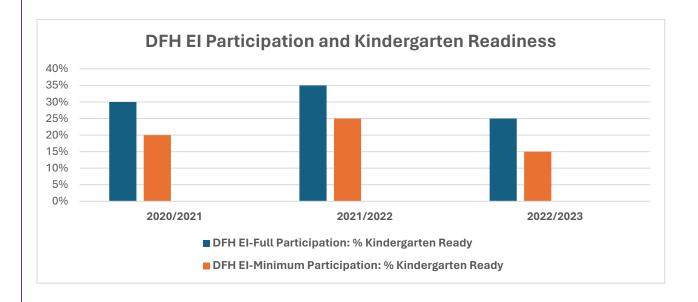
#2: Do we see significant differences in *kindergarten readiness* outcomes for cohorts of children whose families consistently participated in DFH programming compared to families with minimal participation?

#3: Do we see significant differences in *third grade reading* outcomes for cohorts of children whose families consistently participated in DFH programming compared to families with minimal participation?

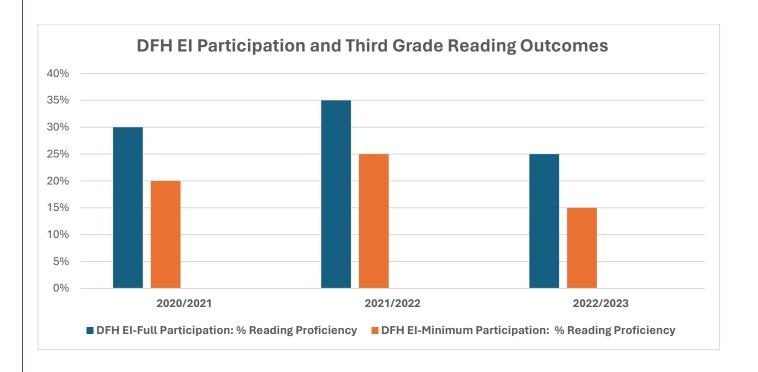
#1: Attendance Outcomes – in this mock example, cohorts of children with full participation in DFH-Early Intervention programming are chronically absent less often than their peers.



#2: Kindergarten Readiness – in this mock example, cohorts of children with full participation in DFH-Early Intervention programming are ready for kindergarten more often than their peers.



#3: Third Grade Reading Proficiency – in this mock example, cohorts of children with full participation in DFH-Early Intervention programming are reading proficiently more often than their peers.



## Special Education Data

If permitted, DFH will leverage linked USBE Special Education data to assess if children with special needs were accurately identified and received the appropriate services early in life.



The Division of Family Health partners with individuals, families, and communities to improve health, safety, and quality of life through education, prevention, screening, assessment, monitoring, and interventions.

We serve the MCH population of women and individuals who are pregnant or have given birth, infants, children, adolescents, young adults, fathers or other caregivers, and children and youth with special health care needs (CYSHCN).