



Idaho Infant Toddler Program Early Intervention Report

2014





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The Infant Toddler Program

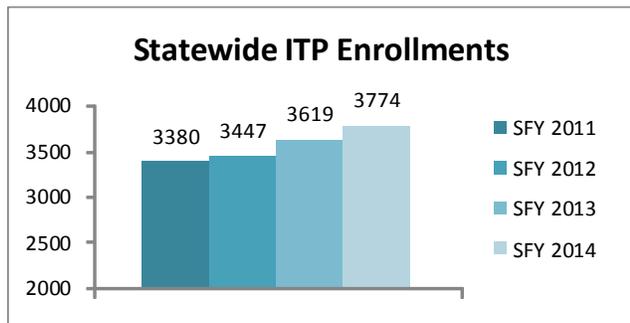
The Individuals with Disabilities Education Act, Part C (IDEA, P.L. 105-17) was passed in 1986. In 1991, Idaho's Early Intervention Act (Title 16, Chapter 1) designated the Department of Health and Welfare as the lead agency, and funds were allocated to create the Infant Toddler Program.



The Idaho Infant Toddler Program coordinates an early intervention system to identify and serve children birth to three years of age who have a developmental delay or conditions that may result in a developmental delay. The Program acts like an umbrella over several different agencies and services. Program funds are used to ensure that all existing programs work together effectively. The Program links children with services that promote their physical, mental, and/or emotional development and support the needs of their families.

Early intervention services are designed to meet the individual developmental needs of eligible children and the needs of the child's family. They are provided as quickly as possible after the child has been determined eligible for the Infant Toddler Program and individualized are needs identified.

Over the past four years, the Idaho Infant Toddler Program has seen an increase in referrals and enrollments, with over 3,700 children referred last year. Children receiving services are under the age of 3, with roughly half referred under age 2, and half referred between ages 2 and 3.



When Children Are Referred SFY2014		
Age at Referral	#	%
Birth to One Year	1007	27%
Ages One to Two	996	26%
Ages Two to Three	1756	47%
Total Referrals	3763	-

Services to families help parents learn how to most effectively support their child's development. All early intervention services must be agreed upon by the child's Individualized Family Service Plan (IFSP) team (including parents), documented on an IFSP, and be provided by qualified personnel.



Federal and state laws require that certain services be made available through the Idaho Infant Toddler Program. Services that must be provided by the Idaho Infant Toddler Program are cited in the federal Individuals with Disabilities Education Act (IDEA), Part C.

Funding Sources

The Idaho Department of Health and Welfare manages funds dedicated to the implementation of IDEA, Part C. Federal grant dollars from the U.S. Department of Education, Office of Special Education Programs, State general funds, and third party payers (Medicaid and private insurance) account for the majority of the budget. These funds are allocated to regional budgets based on a formula that considers maintenance of infrastructure, population distribution, and the number of eligible children served.

Additional resources for services to infants and toddlers in Idaho are managed through the following programs:

- Title V Maternal and Child Health funds (WIC, Immunizations)
- Idaho Educational Services for the Deaf & Blind
- Bureau of Indian Affairs
- Early Head Start
- Maternal and Infant Home Visiting

These resources can be accessed through collaborative agreements to support some early intervention services.



The Early Intervention Process

Child Find – Identification of children who might benefit from the program

Screening activities occur throughout Idaho to find children who may need early intervention services. In addition, parents can volunteer to participate in the Developmental Milestones Program to track the development of their children who may be at risk for a delay. If children are found to be behind their peers in any developmental area, they are referred for an evaluation and early intervention services.

In Idaho, over 3,000 referrals a year are received by the Infant Toddler Program. This means that roughly 1 out of every 6 children born in Idaho is referred to the Infant Toddler Program some time before their third birthday.

Idaho Births		Children Referred	
Calendar Year	Births	SFY 2014	Referrals
2013	22,348	2014	3,509
2012	22,941	2013	3,500
2011	22,311	2012*	3,189
2010	23,202	2011*	2,874
2009	23,726	2010*	2,458

**Referrals for children ineligible for the ITP were not always recorded in the data system prior to April, 2013.*

Referrals to the Infant Toddler Program

Referrals are received from all parts of the community including medical, childcare and social service providers, and parents. In the previous year, physicians and hospitals accounted for half of all referrals to the Infant Toddler Program in Idaho. To find an early intervention provider in your community, call **211 Idaho CareLine** by dialing 2-1-1 or 1-800-926-2588, or visit www.infanttoddler.idaho.gov for more information, including regional contacts.

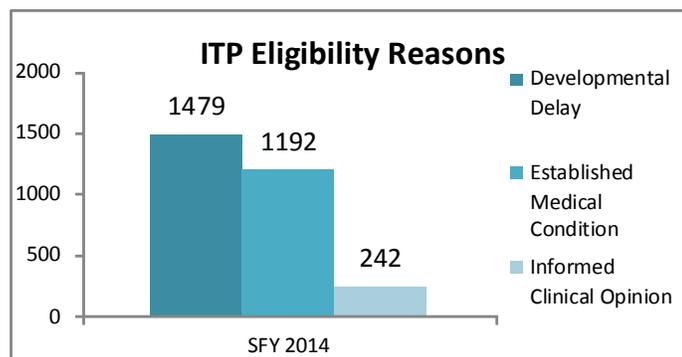




Referrals						
Referral Source	SFY 2012		SFY 2013		SFY 2014	
	#	%	#	%	#	%
Physicians	1066	27%	1115	26%	1083	28%
Hospitals	846	21%	915	21%	822	22%
Parents/Guardians/Friends/Other	844	21%	854	20%	757	20%
Child and Family Services - Substantiated	49	1%	218	5%	296	8%
Other Health Care Providers	347	9%	372	9%	170	4%
Other Social Service Agencies	655	16%	466	11%	162	4%
Developmental Milestones	-	-	36	0.8%	156	4%
Child and Family Services - Unsubstantiated	14	0.4%	131	3%	153	4%
Local Education Agencies	79	2%	88	2%	75	2%
Child Care Programs	20	0.5%	13	0.3%	24	0.6%
Public Health Agencies	52	1%	29	0.7%	12	0.3%
TOTAL REFERRALS	3972	-	4257	-	3811	-

Initial Contact with Families

A service coordinator meets with the family to discuss the referral, learn about their concerns and priorities for their child, and to explain early intervention. The service coordinator then arranges an evaluation of the child’s developmental strengths and needs. The decision about program eligibility is based on the evaluation results and the child’s and family’s unique concerns.





Individualized Family Service Plan (IFSP)

If the child is eligible for the Infant Toddler Program, the family and a team of professionals will identify outcomes for both the child and the family. These outcomes will be written into a plan called the Individualized Family Service Plan, or IFSP. Together the family and therapists will develop learning activities that occur throughout the child's and family's everyday natural routines. Services and supports change as the family's goals for themselves and their child change. The service plan is reviewed and updated at least every 6 months.

Referrals and Enrollments SFY 2014	
Children Referred	3509
Children Enrolled with IFSP	1803
Children Eligible, Declined Services	58
Percent Enrolled	51%

Early Intervention Services

Research shows that infants and toddlers learn best through natural routines and everyday learning opportunities that occur in the child's home, community, and childcare settings. The Infant Toddler Program provides a skilled team of professionals to work with the family. They work together as a powerful team to support the child's learning and development. Jointly, the team implements outcomes in the IFSP to meet the child's developmental needs. Early intervention staff can work with relatives and other child care providers in addition to working with the parents. A variety of early intervention services are available through the program. The table below shows the various service settings.

Service Settings (Snapshot on December 1, 2013)						
	2011		2012		2013	
Home	1519	88.5%	1644	87.5%	1696	89.9%
Community Setting	132	7.7%	183	9.7%	163	8.6%
Service Provider Facility	45	2.6%	28	1.5%	23	1.2%
Early Intervention Center	13	0.8%	17	0.9%	2	0.1%
In-Hospital	1	0.1%	0	0.0%	0	0.0%
Other	7	0.4%	6	0.3%	3	0.2%
Total Natural Environment	1651	96.2%	1827	97.3%	1859	98.5%

Transition – Exiting the Infant Toddler Program

A transition plan is developed to assist children and families as they experience changes or exit the Infant Toddler Program to go to a school district's (Part B) developmental preschool, Head Start, or other community program. Transition planning helps the family to explore available resources, make decisions about service options, and outline the steps needed to prepare the child for continued learning and development after leaving the Infant Toddler Program. This transition occurs when early intervention services are no longer needed or when a child nears the age of three.



Exit Reasons						
	SFY 2012*		SFY 2013		SFY 2014	
Graduated	29	2%	326	21%	435	20%
Age 3 – Part B Eligible	604	36%	581	33%	575	26%
Age 3 – Part B Ineligible	179	11%	204	12%	192	10%
Age 3 – Part B Undetermined	84	5%	100	6%	166	8%
Moved Out of State	101	7%	103	7%	133	7%
Withdrawn by Parents	148	10%	190	12%	223	12%
Maintain Contact Unsuccessful	145	10%	155	10%	200	11%
Total**	1602	100%	1659	100%	1924	100%

* Due to a change in data systems, 2012 has 312 records (20%) with incorrect exit reasons listed.
 **Total of all children who received services for at least 6 months and then exited the program



Monitoring a Child's Development

In Idaho, the Developmental Milestones Program, (which works hand-in-hand with the Infant Toddler Program) helps families better understand and meet the developmental, social-emotional, health, and educational needs of their child. Parents can sign up to receive the *Ages and Stages Questionnaires (ASQ-3)*, the *Ages and Stages Questionnaires: Social-Emotional (ASQ:SE)*, and the *Modified Checklist for Autism in Toddlers, Revised with Follow-Up (M-CHAT-R/F)* to track the ongoing development of children who may be at risk for a developmental delay but who are not currently eligible for services. If scores show that a child's development is increasingly delayed, they are referred for an evaluation and early intervention services.

The Infant Toddler Program has centralized administration of the Developmental Milestones Program to monitor children's growth and development. The questionnaires are distributed in a hard copy or electronic format from one central location. To assure that local needs continue to be met in a timely manner, outreach activities and public education take place in the regions.





Early intervention Evidence-Based Service Delivery Approach

Early intervention research and current professional literature support the following:

- Children birth to three years of age learn best when:
 - a. Interested and engaged in activity, which in turn strengthens and promotes competency and mastery of skills; and
 - b. Participating in natural learning opportunities that occur in everyday routines and activities with their families.
- Parents have the greatest impact on their child’s learning since they know their child best and already promote their child’s development through everyday natural routines or planned learning opportunities.
- Parents prefer interventions that are natural, fit into their daily lives, and support their child in learning skills that help them be a part of family and community life.
- Learning opportunities provided within the context of a family and child’s life have greater impact on a child’s progress than direct therapist-child intervention sessions.

Services Being Provided by ITP (Snapshot on Dec 1, 2013)		
	#	%
Speech Therapy	554	26%
Occupational Therapy	535	25%
Family Education	481	22%
Physical Therapy	380	18%
Audiology/Hearing Services	85	4%
Family Training, Counseling, and Home Visit Services	62	3%
Vision Services	28	1%
Interdisciplinary Training	23	1%
Psychological Services	17	1%
Total	2167	100%



The Infant Toddler Program uses an evidence-based service delivery model that is built upon these concepts. An interdisciplinary team of providers is assigned to support the development of each child and their family. One member of the team is designated as the “primary interventionist” and has the most frequent contact with the family. Other team members routinely provide support and guidance to the family through coordinated visits with the primary interventionist. All team members meet regularly and are available to provide coaching, consultation, and/or early intervention service to the child, their family, and to other team members as needed.

Child and Family Outcomes

Child outcome information is measured using a pre- and post-assessment of the growth in a child’s development during their time with the Infant Toddler Program. Three functional skill areas are tracked, with the following results, for children by the time they reach 3 years of age or exit the program. Each percentage represents the number of children who increased their rate of developmental growth.



- 58% - Social and emotional skills
- 60% - Acquisition and use of knowledge and skills (including early language and communication)
- 65% - Taking action and use of appropriate behaviors to meet their needs

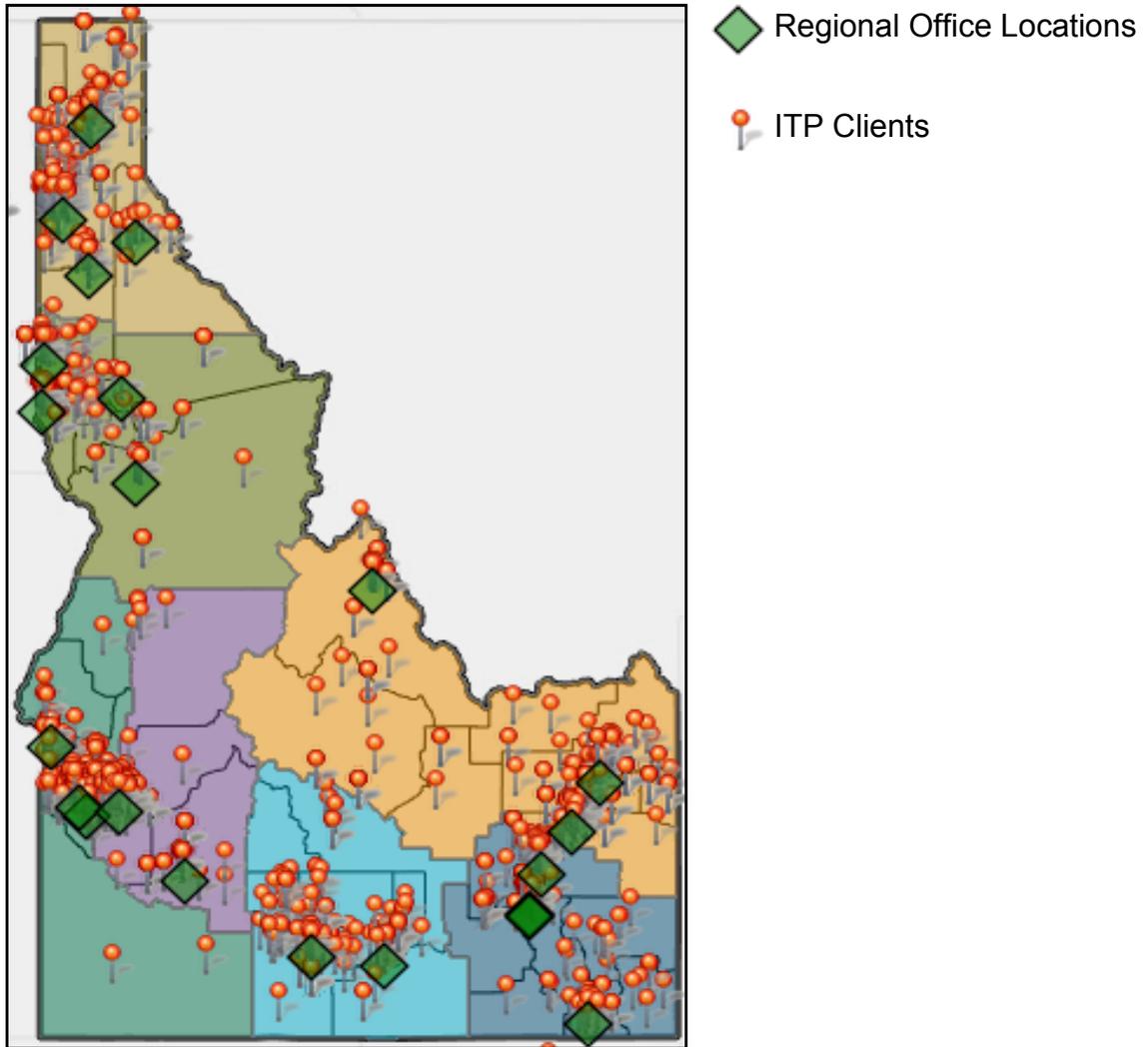
An annual survey of all families enrolled in the Infant Toddler Program revealed the following:

- 93% report that early intervention services helped their children develop and learn.
- 91% report that early intervention services have helped them advocate for their children’s needs.
- 94% report that they knew and understood their rights.



Program and Client Locations

Infants and toddlers served by the Infant Toddler Program are spread across the state of Idaho. The intervention services provided by the Idaho Infant Toddler program are in natural environments, which most often means the child's home or community setting. The services are organized through one of the program's local offices. The map below shows the general locations of the clients and the locations of the offices for the Infant Toddler Program. (See Appendices B and C for total clients per Idaho County and region)



Early Childhood Coordinating Council

The Early Childhood Coordinating Council (EC3) is Governor appointed and serves as an advisory group for statewide and local early childhood programs. Membership on the Council is determined by state and federal laws, and has professional and geographical diversity. Parents of young children assume leadership roles by chairing the Council and working committees. The EC3 provides leadership, education, and coordination for early childhood systems in Idaho.

The Council comprises early childhood representatives from a variety of agencies/organizations. Examples include:

- Idaho Department of Health and Welfare
- Idaho Department of Education
- Parents
- Legislators
- Higher Education
- Head Start
- Idaho Department of Insurance
- Health Districts
- Idaho Educational Services for the Deaf and the Blind
- Regional Early Childhood Coordinating Council
- Idaho Association for the Education of Young Children



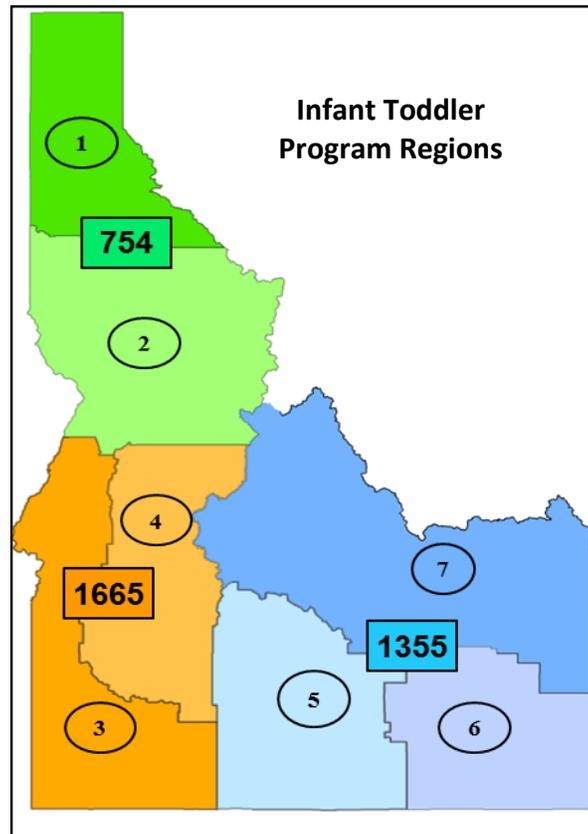
The Council responsibilities related to the Infant Toddler Program, Part C of the Individuals with Disabilities Education Act include the review of emerging issues, gathering information, making policy recommendations, and educating the community about the importance and availability of early intervention services.



As the outreach arm of the Early Childhood Coordinating Council, seven Regional Early Childhood Committees ensure responsiveness to the needs of local Idaho families. One elected regional chairperson represents the local groups on the Council and provides a direct linkage, as structured in Idaho Code. Some activities completed by local committees include:

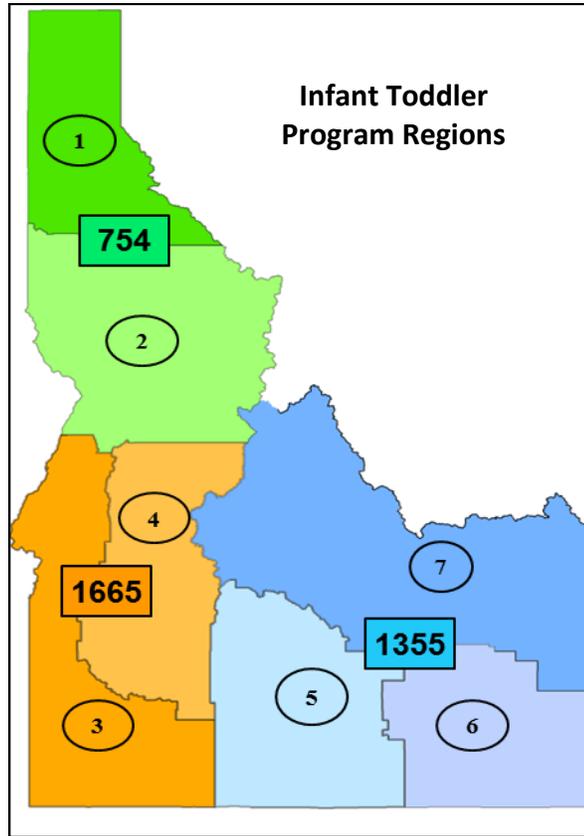
- Promotion of community screening activities to help identify children with developmental delays;
- Collaboration with local libraries;
- Planning training and conference events with community partners; and
- Hosting opportunities for parents of young children to participate in committee decision making.

The seven regions of Idaho are shown on the map below. The regions are also combined into three Hubs, whose ITP enrollments are also shown on the map.





Appendix A: ITP Enrollment by Regions



ITP Enrollment - Regions and Years				
Region	SFY 2011	SFY 2012	SFY 2013	SFY 2014
Region 1	413	443	465	533
Region 2	201	198	205	221
Region 3	544	505	520	567
Region 4	933	978	1058	1098
Region 5	343	336	360	371
Region 6	386	407	401	368
Region 7	560	582	614	616
State	3380	3447	3619	3774



Appendix B: ITP Referrals and Enrollments by Region

ITP Referrals and Enrollments SFY 2014			
Region	Children Referred	Initial Enrollments	Percent Enrolled
Region 1	520	287	55%
Region 2	226	114	50%
Region 3	576	263	46%
Region 4	865	486	56%
Region 5	309	196	63%
Region 6	358	180	50%
Region 7	662	277	42%
State	3509	1803	51%



Appendix C: ITP Enrollment by County

ITP Enrollment - Idaho Counties (by family address) SFY 2014					
Ada	1,140	Clark	1	Lewis	24
Adams	1	Clearwater	10	Lincoln	8
Bannock	207	Custer	15	Madison	113
Bear Lake	9	Elmore	90	Minidoka	34
Benewah	26	Franklin	36	Nez Perce	115
Bingham	116	Fremont	32	Oneida	7
Blaine	28	Gem	24	Owyhee	30
Boise	2	Gooding	40	Payette	55
Bonner	117	Idaho	27	Power	23
Bonneville	365	Jefferson	71	Shoshone	32
Boundary	30	Jerome	54	Teton	19
Butte	5	Kootenai	385	Twin Falls	206
Canyon	536	Latah	71	Valley	8
Caribou	9	Lemhi	25	Washington	18
Cassia	44				



Appendix D: ITP Enrollment by Race/Ethnicity and Language Spoken at Home

ITP Enrollment - Race/Ethnicity SFY 2014		
Race/Ethnicity	Percent of ITP	Count of ITP
White	78%	2948
Hispanic	15%	555
Native American	1%	52
Asian	1%	44
African American	1%	37
Pacific Islander	0%	11
Mixed	3%	127
Total	100%	3,774

ITP Enrollment – Languages Spoken at Home SFY 2014			
Language	Count	Language	Count
English	3,451	Swahili	2
Spanish	191	Karen	2
Not Indicated	105	Hindi	2
Arabic	8	Russian	1
American Sign Language	4	Mandarin	1
Napali	3	Kirundi	1
Vietnamese	2	Bosnian	1