Early Start for Infants and Toddlers
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Early Start Program
Department of Developmental Services
California Department of Developmental Services (DDS):

- provides services and supports to individuals with developmental disabilities.
- Lanterman Act
- Early Start

These disabilities include:

- intellectual disability,
- cerebral palsy,
- epilepsy,
- autism and related conditions.
Early Start Service Delivery System

- **Regional Centers (RC)**
  - Services are provided through state-operated developmental centers and community facilities, and contracts with 21 nonprofit regional centers

- **Local Educational Agencies (LEAs)**
  - Provide services for children with a reduced vision condition, reduced hearing, or severe orthopedic impairment or combination of these

- **Family Resource Centers (FRCs)**
  - 47 centers located throughout CA
  - Provide family support services such as parent to parent support, information on early intervention or specific disabilities, referrals to community services
Early Start Program

Individuals with Disabilities Education Act (IDEA)
Part C—Infants and Toddlers with Disabilities
Public Law 108-446; 20 USC 1431-1444

- Early Start began in 1993 in California as a response to federal legislation.

Early Start is designed:
- To enhance the family’s capability to meet the special developmental needs of their infant or toddler.
- To maximize the potential for children to be effective in context of daily life and activities.
Reasons for Concern
Infants and Toddlers at risk

- Recognition by prenatal genetic testing
- Circumstances of birth such as prematurity with complications or prenatal substance exposure
- Screening or evaluation of infants and toddlers
  - Concerns of parents, healthcare providers, family members, public health programs, child welfare workers
MCAH and Early Start

Comprehensive Child Find System:
34 CFR Section 303.302

• Coordination with all other State agencies administering education, health and social services, including Indian Health, to locate and identify children
  • MCH and MIECHV under Title V are specifically identified in the Federal Regulations to taking a role in this coordination

• Priority populations also identified in Child Find regulations: Indian children, children experiencing homelessness, children/families in child welfare system, families experiencing domestic violence
Early Start Eligibility

California Early Intervention Services Act
Government Code, Section 95014

**Developmentally delayed**: a significant difference between expected level of development for chronological age and level of functioning.

**Established risk**: Conditions of known etiology with established harmful developmental consequences

**At high risk**: of a substantial developmental disability due to biomedical factors
Eligibility changed beginning **January 1, 2015**

**California Early Intervention Services Act**

Government Code, Section 95014

Infants and Toddlers with a **33 percent developmental delay** in one or more areas:

- Cognitive
- Physical and motor: including vision and hearing
- Communication
- Social Emotional
- Adaptive
Early Start Eligibility

High risk biomedical factors:

A. Prematurity of less than 32 weeks gestation and/or low birth weight of less than 1500 grams
B. Assisted ventilation
C. Small for gestational age
D. Asphyxia neonatorum with Apgar < 5 @ 5 min.
E. Severe and persistent metabolic abnormality
F. Neonatal seizures or nonfebrile seizures
G. Central nervous system lesion or abnormality
H. Central nervous system infection
I. Biomedical insult: injury, accident or illness
J. Multiple congenital anomalies or genetic disorder
Early Start Eligibility

**High Risk** --continued

K. Prenatal Exposure to a known teratogens
L. Prenatal substance exposure, positive infant neonatal toxicology screen
M. Clinically significant failure to thrive
N. Persistent hypotonia or hypertonia

If one of the parents of the child is a person with a developmental disability, the child may be eligible in the high risk category.
Referrals

• Call the RC or LEA
• Referral should be made within 7 days of identifying the child
• Refer the child with a developmental concern or at high risk factors

1-800-515-BABY (2229)
dds.ca.gov/rc
Early Start Eligibility

Evaluation for eligibility
After consent is obtained:

- Determination of eligibility is made by qualified personnel at the Regional Center or Local Educational Agency, multidisciplinary team, including the parents
  - Standardized evaluation tools
  - 45 day timeline to complete evaluation
- The RC or LEA may establish eligibility based on existing medical or other records
Once determined eligible for Early Start, the child will receive a multidisciplinary **assessment** of unique strengths and needs of the infant or toddler and identification of **Early Intervention Services** appropriate to meet those needs.

The assessment of the child may include:

- A review of the evaluations
- Observations of the child
- Medical records

A family directed assessment will also be conducted to identify the family’s **resources, priorities, and concerns**, as well as the services necessary to meet the family’s needs.
**Participants**

- Family
  - Parents/Holder of Education Rights
  - Caregivers
- Any individuals that the family has invited
- Early Start Staff
  - Service Coordinator from the regional center or local education agency
  - Individual completing evaluations
  - Other Early Start Professionals
- Any other individuals playing a regular and significant part of child and family’s life
Individualized Family Service Plan

**IFSP development procedure**

- Process is led by information gathered during evaluation and assessment
- Goals are set for the child and family
  - Child Outcomes
  - Family Outcomes
- Team discusses the supports that the child and family meeting those outcomes
  - Any services provided through Early Start are tied directly to the outcomes set for the child and family
Early Intervention Services

Services are determined to meet the developmental needs of children and families

Federal requirement to provide service in the Natural Environment

“The Family is the constant in the child’s life, while the service system and personnel within those systems fluctuate. Because the primary responsibilities of an infant’s or toddler’s well-being rests with the family, services should support and enhance the family’s capability to meet the special developmental needs of their infant or toddler with disabilities.”

~CEISA 95001

Child-Caregiver Relationship as a basis for successful intervention
Types of Early Intervention Services

Based on needs of the child and those identified in IFSP and may include:

- Physical therapy
- Speech-language pathology/ audiology
- Occupational therapy
- Psychological services
- Family training, counseling
- Specialized instruction
- Service coordination
- Social work services
- Vision services
- Transportation related to access to services
Progress that children make towards their outcomes is evaluated every six months (or more frequently) at periodic IFSP meetings, where the team can make adjustments, if necessary.

On a systemic level, aggregate child outcomes data is evaluated to measure the success of Early Intervention services in California.

Family outcomes data is collected by conducting a parent survey with a sample of families who have been served by Early Start.

In turn, DDS reports this information to the Office of Special Education Programs in an Annual Performance Report.
Interagency Coordinating Council on Early Intervention (ICC)

Advises and assists DDS on matters of intra-agency and interagency collaboration regarding:

• child find
• the provision of early intervention services
• monitoring Early Start’s quality of services
• transition process for children and families completing Early Start.

Members of the ICC are appointed by the Governor and have required representation identified in federal regulations and state statute.
Interagency Coordinating Council on Early Intervention (ICC)

- Brings together Parents, Providers and Early Childhood Experts
- Provides feedback for programming and resources
- Advises DDS on SSIP implementation

http://www.dds.ca.gov/EarlyStart/ICCOverview.cfm
State Systemic Improvement Plan

New reporting requirement began in 2013 and extends through 2020

The Office of Special Education Programs asked states to develop Systemic Improvement Plans that
• Identifies steps to be taken to improve outcomes for children and families
  • States given authority to select what they will target and how they will achieve improvement
• Emphasis placed on Results Driven Accountability
In order to develop California’s State-identified Measurable Result, DDS convened a task force of stakeholders including:

- Administrators
- Pediatricians
- Parents
- Providers

State-identified Measurable Result:
Increase the percentage of infants and toddlers with disabilities in California who will substantially increase their rate of growth in **positive social-emotional skills (including social relationships)** by the time they exit Early Start.
California will achieve its State-Identified Measurable Result through a focus on:

- Parent and Provider Education
- Professional Development
- Interagency Collaboration

California has been developing Improvement Strategies around each of these areas of focus in order to:

- Leverage existing resources
- Build capacity
Improvement Activities

- **Strand 1: Parent/Provider Education**
  - “Take a Minute”… Relationships Matter Campaign
  - Brochure and video for parents and providers
  - Includes information on social-emotional development and practical tips for families
  - Checklist of family-centered practices for providers
**Improvement Activities**

- **Strand 2: Professional Development**
  - Comprehensive System of Personnel Development includes facilitated online courses and face-to-face symposium.
  - Activate an online Community of Practice to support professional networking and sharing of resources.
  - Modify existing training on social-emotional development to make it shorter and available open source online.

http://earlystartneighborhood.ning.com/
Improvement Activities

• **Strand 3: Interagency Collaboration**
  
  o Interagency Coordinating Council on Early Intervention (ICC) Resource Guide on statewide initiatives addressing social-emotional development
  
  o ICC Evidence Based Infant-Toddler Social-Emotional Assessment Guidelines
  
  o Promotion of “Take a Minute”... Relationships Matter campaign
**Interagency opportunities with SSIP**

**Interagency Coordinating Council for Early Intervention**
- Governor appointments
- Community representation
- Public comment and participation

**Regional Center Cohorts/Local Implementation Teams**
- Contact local Cohort #1 Regional Center
- SSIP Materials on DDS Website (currently under construction): [www.dds.ca.gov/EarlyStart](http://www.dds.ca.gov/EarlyStart)

**Comprehensive System for Personnel Development**
- Community of Practice: Open access course on Social Emotional Development
Expected Outcomes

- **Families** will receive the education and support necessary to fully engage in their child’s social-emotional development through the parent-child relationship.

- **Service providers** will competently and consistently implement evidence-based practices in social-emotional development to support the parent-child relationship.

- **Service coordinators** will have the tools they need to empower families and support the parent-child relationship.

- **Early Start infants and toddlers** will increase their rate of growth in social-emotional development.
Questions and Answers

What questions have come up in the field regarding Early Start?

What are challenges you face when referring children to Early Start?

Is there something in the presentation that we can clarify?
Child and Family: the Heart of Early Start...

- Thank you for your work with Infants, Toddlers and their families!

www.dds.ca.gov/EarlyStart
Contact Us...

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