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EARLY INTERVENTION SERVICES 2010 ANNUAL ACTIVITY UPDATE

The Community and Health Services Committee recommends the adoption of the recommendation contained in the following report dated April 21, 2011 from the Commissioner of Community and Health Services.

1. RECOMMENDATION

It is recommended that Council receive this report for information.

2. PURPOSE

This report provides Council with an update of the activities and initiatives of Early Intervention Services in 2010.

3. BACKGROUND

York Region directly delivers Early Intervention Services (EIS) to children with special needs from birth to school entry from six offices located across the Region. While appearing seamless to clients, Early Intervention Services is an integration of two provincially funded programs; Infant Child Development provided under the *Child and Family Services Act* and Resource Teacher Special Needs programming provided under the *Day Nurseries Act*. A portion of these fully integrated services is cost shared 80% provincial 20% municipal with the remaining portions funded 100%.

Early Intervention Services works with a range of community stakeholders in supporting the development of children with special needs through direct services and family support

Our clients are families with children aged birth through six years of age who have, or are at risk of having delays in development due to established or biological risk factors. Delays in development refers to activities children cannot do that their age peers can; for example, inability to stand or walk, not being able to hold a fork or cup, not speaking or even recognizing their own name. In 2010 Early Intervention Services served a total of 2,242 children. Of these, 59.1% (1,325) had a diagnosed development special need, 19.2% (426) had some form of autism, while 26% (580) were born premature. Premature children born further from full term are more likely to be smaller in height and weight with delays in fine motor (hand use) and language than full term babies. Many of these children will be diagnosed with a learning disability at school age. For the premature children born very early, half will have no disability, one-quarter will have some

disability and one-quarter will have severe disabilities; there is no certain way to know at birth what the outcome will be for a given child. The wide range of child needs seen by Early Intervention Services is reflected in the range of services offered, from prevention to treatment.

Early Intervention Services supports families in accessing services that are directly related to their child's specific needs

Many parents of children enrolled in Early Intervention Services are first-time parents who had no indication during pregnancy that their child would have any developmental or health problems. Prior to enrolling, most had never had any experience with individuals with special needs or the variety of services needed to support them. The family support we provide helps parents during this adjustment period to the new reality of the needs of their child. The publicly funded system that supports children with special needs has many pressures, and wait times of six months or more for specialized services are not uncommon. In 2010 the wait time for Early Intervention Services was 9.5 weeks.

For families with financial means, private providers are often accessed while waiting for the public services. Private speech language assessments can cost between \$400 and \$1,000 while private weekly speech therapy is usually \$130 an hour. Psychological diagnostic assessments can be as much as \$1,500 to \$2,000 but they do not provide direct treatment for children they diagnose. Additionally, private occupational therapy or physiotherapy will cost \$90 - \$120 per 45 minute session. Early Interventionists also assist families in identifying government and private foundation funding, such as Special Services at Home Funding and President's Choice Children's Charity or the Jennifer Ashleigh Foundation, for speciality services not provided by us. The Integrated Social Work position in Early Intervention Services helps families with multiple needs access other Regional services (e.g. Social Assistance, Child Care, Housing and Early Intervention) and coordinates these supports to reduce duplication and maximize service effectiveness.

Early Intervention Services provides a continuum of care through various services utilizing a one-stop point-of-access approach

To assist parents in reaching the right service in a timely fashion, the Social Services Branch operates a toll free telephone line, 1-888-703-KIDS (5437) for information about, and referral to, Early Intervention Services, as well as the Preschool Speech and Language, Blind Low Vision and the Tri-Regional Infant Hearing Programs, delivered by Markham Stouffville Hospital. This one-stop point-of-access helps to ensure that parents are connected quickly to Regional and community based services.

Early Intervention Services uses developmental assessments to establish individual support plans for children

To ensure an accurate understanding of child and family needs, children entering Early Intervention Services receive ongoing developmental assessments by a team of professionals. These teams can include parents, early interventionists, and as necessary, speech language pathologists, occupational therapists and physiotherapists. All six Early Intervention Services' offices house co-located staff from Markham Stouffville Hospital Child Development Programs and the Children's Treatment Network of Simcoe York. The team approach provides parents with an objective assessment of their child's strengths and needs and helps them adjust to the reality of the special needs of their children.

Individual Family Support Plans are developed based on the assessment results. Individual and/or group child development programming can be provided in the child's home, at their child care centre, in the therapy rooms of the Early Intervention Services offices, and in other community settings as appropriate. The delivery of service in various environments helps to assimilate a child into various environments and reinforce their developing skills and socialization.

Early Intervention Services works in partnership with the Children's Treatment Network to support children with highly complex needs

Through a funding contract with the Children's Treatment Network of Simcoe York, service coordinators, occupational therapists and physiotherapists provide direct treatment for children who have severe motor and complex developmental needs. This partnership brings another service "in-house", thereby reducing stress for families that routinely deal with many professional staff and many different agencies. The services provided through this contract complement the Early Intervention Services' occupational therapy program and ensures that children with both moderate and severe needs can be helped.

A typical case history of a child receiving Early Intervention Services demonstrates the complexity of needs

A typical experience for many of the children that are seen would be like this child, the events present a true case history. Born in January 2005 and referred to Early Intervention Services (EIS) in March, he was born at the Hospital for Sick Children and was diagnosed with spina bifida at birth. He was sent home with medical home care through Central Community Care Access Centre and referred to EIS. The Central Community Care Access Centre remained involved only for five months until his medical condition was stabilized. EIS assisted the parents in adjusting to the reality of a child with

high needs, through supportive education about their son's condition and with specific activities to promote his development. Due to the spina bifida, this young boy required

physiotherapy from Southlake Regional Hospital to help him to sit, roll and stand. He was referred in 2006 to Markham Stouffville's Preschool Speech and Language Program to assist with communication. As a result, EIS worked with the Speech Pathologist in developing and implementing a home programming plan for him. It became clear that his needs were more significant than other children with spina bifida. He was difficult to feed, more than just a "picky eater", and concern for his health resulted in a referral to the Children's Treatment Networks' Feeding and Assessment Consultation Service in 2007. This resulted in a home feeding program supported by an Early Interventionist working with an EIS Occupational Therapist.

In 2008 a referral was made to the Developmental Assessment and Consultation Service because the Early Interventionist suspected he may have Autism. This was confirmed in December of 2009. The Early Interventionist assisted in the transition into Junior Kindergarten by providing a report to the JK teacher, meeting with the teacher and other school supports to assist in the school's service delivery. When his parents moved from one town to another within the Region, the same Early Interventionist supported his entry into Senior Kindergarten in the new school.

He was discharged from EIS in January 2011 after his family was well connected to the school supports. Throughout these six years the Early Interventionist supported the parents' in their emotional adjustment to coping with his many needs, developed strategies in developmental programming to assist his development, made timely referrals to other needed services and coordinated the various different services of support.

Early Intervention Services is supporting the introduction of the Early Learning Program in York Region schools

Early Intervention Services staff support other service providers by delivering training to staff of child care centres, community based programs and school boards. This includes work, currently underway with schools, in support of the rollout of the Provincial Early Learning Program for four and five year olds. In addition, Early Intervention Services' staff and management participate in a range of important collaborative initiatives within York Region and the broader community through community committees, Children's Treatment Network working groups, internal cross departmental committees, college and boards of education committees and province wide organizational boards and committees.

4. ANALYSIS AND OPTIONS

Growth in demand for Early Intervention Services continues to exceed the rate of child population growth in York Region

According to census data for York Region, the rate of population growth between 2001 and 2006 for children birth to four years of age was 16.5% and for children five through nine years of age, 10.1%. Early Intervention Services experienced significant increases in service demand between 2001 and 2006. Between 2006 and 2010, service demand increased 46.6% (709 – 1,040) significantly beyond the child population growth rate.

Three main factors appear to be contributing to these increases:

1. There are actual increases in the areas of incidence of some developmental conditions such as autism; the survival rate for earlier born; and more fragile premature infants, etc.
2. Provincial initiatives to highlight early identification, such as Healthy Babies, Healthy Children, the Nipissing Screen, and the Enhanced 18-Month Well-Baby Visit, have raised awareness across various professional sectors
3. Greater professional and public awareness of the benefits of intervening early encourages referrals

As seen in Table 1, referrals in 2010 increased 23% over 2009. While more children were served in total throughout the year and on a monthly average basis, the rate of newly enrolled did not increase. New processes from intake to the first service visit resulted in a 12% reduction in wait time for those families.

Table 1
Increase in Service Demand and Delivery
2009-2010

	2009	2010	Difference	% Increase or Decrease
Total Yearly Referrals	843	1,040	197	23%
Newly Enrolled in Year	765	758	-7	-0.009%
Monthly Average Served	1,474	1,568	94	6%
Total Served In Year	2,128	2,242	114	5%
Monthly Average Wait List	151	192	41	27%
Average Weeks on Wait List	10.8	9.5	1.3	-12%

Early Intervention Services implemented various strategies to ensure optimal customer service and address service demands in 2010

- Early Interventionists have reached a capacity level with the monthly average caseload size increasing nearly 29% between 2006 and 2010.
- Early Intervention Services implemented four initial intake “entry streams” to facilitate faster access to the more appropriate level of services reducing wait times by 12% overall. These are for children with a diagnosed development condition, children born premature, and children with delays in development for unknown reasons.
- Early Intervention Services re-designed therapy services and relocated staff to improve efficiency in serving both children receiving Early Intervention Services and occupational therapy as well as those receiving occupational and physiotherapy through the contract with the Children’s Treatment Network.
- Early Intervention Services began a Telework Pilot involving 17 Early Interventionists, one occupational therapist and one physiotherapist. Preliminary data shows evidence of areas of efficiency, continued quality service delivery, good staff morale and reductions in sick time taken.
- Early Intervention Services continues to maximize office-based services in our team sites and approximately 20% of our office-based client services were delivered in space provided by various community agencies with which we collaboratively work.

Internationally recognized accreditation and participant surveys demonstrate high quality of Early Intervention Services

Early Intervention Services is in its final year of a three year “exemplary performance” accreditation rating from the Commission on Accreditation of Rehabilitation Facilities (CARF Canada). Staff are currently working with CARF Canada to achieve a further three year accreditation.

In addition, Early Intervention Services regularly seeks the perspective of families receiving services to determine their needs and satisfaction with the services provided. Responsive changes in intervention approaches have resulted in the ongoing maintenance of high customer service satisfaction ratings in the face of increased service demand.

Table 2 identifies key question results of customer satisfaction surveys conducted in 2010 at initiation of service and at end of service. These results are based on return rates of 59% for the Initial Service Plan Meeting and 20% for the End of Service surveys. The results show an extremely high degree of customer service satisfaction.

Table 2
Customer Satisfaction Survey Results 2010

Type of Survey	Items Rated	% of Positive Responses
Initial Service Plan Meeting Survey Positive = Satisfied to Very Satisfied	Information received was helpful	98
	I left this meeting feeling encouraged and connected to services	91
	My questions were answered	99
End of Service Survey Positive = Agreement	Satisfied with Child Care consultation services	94
	Quality of staff	93
	Would recommend to others	99
	Child made gains due to EIS	97

5. FINANCIAL IMPLICATIONS

The total cost of delivering the Early Intervention Services Program in 2010 was \$7,941,595 gross and \$989,364 net tax levy.

6. LOCAL MUNICIPAL IMPACT

Early Intervention Services are delivered in a responsive and collaborative fashion in all local municipalities, benefiting special needs children and their families from across York Region.

7. CONCLUSION

The Early Intervention Services unit in the Social Services Branch plays a critical direct service and service system navigation role in the delivery of responsive and effective programming to children with special needs and their families. In a time of increasing demand, the work of this unit continues to be vitally important in helping families to manage effectively, while they are assisting children in making real gains in their day to day lives.

For more information on this report, please contact Dan Beale, Manager of Early Intervention Services at Ext. 2037.

The Senior Management Group has reviewed this report.