# Early Intervention Program Review:

Recommendations and Actions



**Early Intervention Program Review:** Recommendations and Actions

© Crown copyright, Province of Nova Scotia, 2014 ISBN: 978-1-55457-656-2

## Introduction

Early intervention programs (EIPs) in Nova Scotia deliver services for young children who are diagnosed with or at risk for developmental delay. The services are designed to help both the child and the family from the time the child is born to when they are old enough to enter school. The Nova Scotia Department of Education and Early Childhood Development supports the delivery of these programs.

In 2013, the Government of Nova Scotia made a commitment to increase support for early intervention programs. Parents of pre-school children with special needs face waitlists for early intervention services. This review was initiated to identify the best ways to eliminate the waitlists and make sure children get the help they require to succeed.

This document summarizes how the review was conducted, what challenges were uncovered, and how the department will be addressing them.

Evidence shows that the early years in a child's life (pre-natal to six) are critical in terms of their development, health, and well-being.

This review confirmed that early intervention programs are a valued and needed service for Nova Scotian children with developmental delays and their families.

It also identified that some areas of the program need attention and improvement. The recommendations contained in this document have been considered and made based on research and best practices. We are committed to implementing these recommendations over a period of three years.

Our goal is to strengthen an already-strong program to ensure its sustainability and improve the long-term outcomes for the children and families that benefit from this program.

This is all part of Nova Scotia's continued commitment to early childhood development.

# What are early intervention programs?

Early intervention programs help children who are at risk for or have a diagnosis of developmental delay. They help children between the time they are born and when they enter school. They support the child and the family so children lead as independent a life as possible. The programs also help parents access the resources they need to assist their children. Getting the right help in these early years is key to helping children attain the best outcomes possible.

Early intervention programs provide crucial support to children with developmental delays and their families to ensure a successful transition to school.

The Nova Scotia Department of Education and Early Childhood Development funds 17 non-profit, community-based organizations that deliver early intervention programs. The core services of these programs include

- Home visiting An early interventionist works with the child and the family at home to
  help understand more detailed information about the child's needs and family's priorities.
  During these visits, the family and interventionist cooperatively decide on goals for the
  child. The interventionist plans activities to enhance the skills and abilities of the child and
  to promote development. Early interventionists prepare and bring information to the home
  visits to promote family capacity.
- Family support Early intervention also considers the needs of the family in raising a child with developmental delays. Early interventionists support families in getting the services and resources they require and participate in ongoing service coordination and consultation with or on behalf of the child and family.
- Individual family service plans (IFSP) This is a plan developed by the child's team (the
  family, early interventionists, early childhood educators, speech pathologists, and other
  clinicians) that documents what supports and services are necessary to enhance the child's
  development and help the family meet the child's needs.
- Transition planning This provides the family with the information and support they need
  through the transitions the child makes, such as coming home from the hospital, moving
  into a child-care program, or going to school. The early interventionist assists with gathering
  information from the team, preparing reports for the receiving school or child-care facility,
  supporting the child and family in orientation, and following up with the child, family, and
  support personnel after school or child-care entry.

# Why a review?

Early intervention programs make a big difference in the lives of young children with developmental delays and in the lives of their families. However, there are some challenges with the programs.

In 2013, government identified early intervention programs as a priority and committed to providing additional funding to address these challenges.

The first step was a thorough review to identify all issues the programs were facing and to identify improvements. This was carried out by the department's Early Years Branch during the summer of 2014.

The review focused on ways to

- improve access to early intervention for families
- strengthen early intervention programs across the province
- support and develop the early intervention workforce
- align early intervention with the early years system and the public school system

## Caseloads and waitlists per program (Spring 2014)

Program name: (Location)	Caseload (children) Total #	Waitlist (children) Total #
All Kids (Sydney/Glace Bay/Baddeck)	185	22
Antigonish-Guysborough (Guysborough Co.)	64	42
Bright Beginnings (Lawrencetown)	17	12
Clare Early Intervention Program (Clare/Tusket)	20	0
Institute for Human Services Education (IHSE – Truro)	71	51
Cumberland (Amherst)	45	34
Digby & Area	15	9
Eastern Shore – Musquodoboit Valley (Sheet Harbour)	14	0
First Steps EIP (Mahone Bay)	32	7
Inverness-Richmond (Port Hawkesbury)	29	19
Pictou County	36	25
Progress Centre (Halifax)	287	71
Queens (Liverpool)	24	0
Sackville Bedford (Sackville)	78	19
Shelburne	17	0
Southwest (Yarmouth)	9	0
Valley Child Development (Kentville)	81	20
Total Active Caseload (children)	1024	331



## How Was the Review Done?

The review process was designed to hear from the people that are most affected by, or linked to, early intervention programs.

Families, program service providers, and community stakeholders who work with the programs or provide services for young children in Nova Scotia were asked to participate and provide their feedback.

The information was collected four different ways:

## Focus groups and interviews with families

A total of 19 focus groups were conducted in locations across Nova Scotia, along with 4 telephone interviews with individual families. In total, 114 families provided feedback, including 12 families that are currently on the waiting list. Focus groups and phone interviews were available in both English and French.

## Consultation sessions with key stakeholders

Sixteen consultation sessions were conducted with a range of stakeholders through focus groups and in-person meetings, including

- EIP executive directors
- Early Intervention Nova Scotia (EINS) and EIP boards
- Early Childhood Interventionists Association of Nova Scotia (ECIANS)
- Atlantic Provinces Special Education Authority (APSEA)
- Family and Community Supports Division, Department of Community Services
- IWK, Early Intensive Behavioural Intervention (EIBI)
- Family Resource Centre Association of Nova Scotia
- Conference of Mainland Mi'kmaq (CMM) and Union of Nova Scotia Indians (UNSI) First Nations health directors
- Tri-County Healthy Beginnings Enhanced Home Visiting
- IWK, Mental Health, Pediatric Psychology and Psychiatry
- IWK, Pediatric Rehabilitation Services (OT/PT)
- Nova Scotia Hearing and Speech Centres, clinical directors
- Provincial Early Years Partnership (PEYP)
- Student Services Coordinators, Department of Education and Early Childhood Development
- Early Childhood Development System Working Group

## Written submissions

Eight written submissions were received: three from parents, three from community partners, and two from early intervention program staff or board members.

## Online survey

An online survey was developed and available in both English and French to the public. A total of 305 surveys were completed addressing early intervention programs: 6 in French and 299 in English.



# What we heard and what we are doing

The review confirmed that early intervention programs are working well for the most part and are valued by the families they serve. They help children make positive strides developmentally and socially. They also help parents build knowledge, confidence, and skills to support and advocate for their child. This helps children have a positive transition to child care, school, and the community.

However, there were a number of areas in need of attention that were identified through the review. There were also suggestions on improving early intervention programs for the benefit of children and their families across Nova Scotia. These have been organized into four categories:

#### 1. Improving Access and Uptake for Families

#### **Challenges**

Throughout the consultation, the most frequently mentioned concern was waiting lists and the difficulty some families faced in accessing an early intervention program. The long wait times mean that younger children do not always receive the support they need as early as they should get it. This means they are missing out on a critical time to build skills. By the time they do get into the program, they are three or four years old, and in some cases the families are in crisis. Some other children actually "age out" of the program, meaning they are unable to access the service before they reach school age. The number of children and families receiving support from an early interventionist varies among programs across the province. Some early interventionists have a caseload of less than 10 children, some have a caseload more than 20 children.

There is a growing demand for service, which puts more pressure on the program, increasing wait times.

"The waitlist is unacceptable.

We were able to begin
receiving El services within
a few months of our child
being born and now the
wait is about a year for new
families. This is far too long
to benefit from the support
that El providers give to
the whole family."
(Parent)

Early intervention programs are most effective when a child accesses them as early as possible, but some parents and service providers, such as physicians, are not aware of the program, so children are not even getting referred in time to get maximum benefit from the program.

The review identified cultural barriers as well. First Nations and African Nova Scotian communities are not always aware that early intervention is available. French services are limited in the province. There is limited access for First Nation communities, and there are no early intervention services in the Mi'kmaq language. We also heard that socioeconomic factors, such as low literacy and the stigma of poverty, were keeping others from accessing the program.

#### Response

Addressing waitlists and accessibility issues is the most immediate priority. We know that children and their families need access to early intervention programs as soon as possible and based on the family and child's needs. In order for that to happen, families, service providers, and communities including school boards need to have a greater awareness and understanding of the role of early intervention programs and how to access the services. We need to ensure programs are culturally and socially inclusive so that all families feel comfortable, safe, and welcome accessing early intervention programs no matter where they live in Nova Scotia.

#### **Recommendations**

#### Ensure that families will not have a long wait for services:

- Increase funding for additional staff to address current waitlists
- Offer a consistent approach to full service for families so that all children receive a range of supports:
  - initial home visits will occur within one month of referral
  - priority for service will be based on need
  - early interventionists will carry a caseload of 20 children
  - service will include a range of supports based on the family and child's needs

## Improve access for First Nations, Acadians and francophones, African Nova Scotians, and immigrant families:

- Consider the needs of First Nations, African Nova Scotian, Acadian and francophone, and immigrant families when creating additional early intervention positions.
- Partner with First Nations health directors and education directors to enhance services to First Nations families.
- Partner with Centre provincial de ressources prescholaires (CPRPS) to enhance services to Acadian and francophone families.
- Develop strategies for ensuring African Nova Scotian families will access the programs, in partnership with African Nova Scotian delivery partners.
- Develop strategies for ensuring immigrant families will access the programs, in partnership with immigrant service providers.
- Collect data and report annually to First Nations, African Nova Scotian, Acadian and francophone, and immigrant family partners to evaluate effectiveness of strategies.

# Increase awareness of EIPs so that children are being referred and supported as early as possible:

- Establish early intervention as an integral part of the referral pathway following the 18-month and 36-month visit.
- Create strong connections with health providers, family resource centres, and child-care providers to improve referrals for young children.

# Actively recruit families who are not currently accessing this program:

- Work with family resource centres, school boards, childcare and health providers to help support vulnerable families.
- Work with partners across government to develop and implement a plan to reach families who keep falling through the cracks.

"I knew we needed support but once we actually started with the program I really realized what I had been missing for a whole year." (Parent)



#### 2. Strengthening the Early Intervention Program Across the Province

#### **Challenges**

Participants told us that inconsistencies exist in the early intervention services provided across the province and that early intervention programs were not available to children with behavioural or mental health issues. Also, not all programs are offered across the province, and the quality of the programs varied from one area to the next.

Participants noted that while the core services are strong and similar, each program is governed by an individual board. The involvement of those boards differs, as does the skill level of the board members. This results in gaps and inconsistencies in service.

Other inconsistencies range from the availability of programs, to the qualifications of the early interventionists, to the tools used by the programs.

In all, 17 not-for-profit boards offer early intervention services.

"I work in two different counties and there seems to be a difference in the services. One area uses one program as an assessment tool, not sure what the other area uses. Some areas do playgroups others do not. [There is] inconsistency across the province in the services offered." (Community Partner)

Along with the inconsistencies in the service, the complex structure means there is a lack of clarity of scope of what the program does. Standards for service delivery are outdated and not monitored, and in some areas the mandate of the program is not clear.

There is also a lack of alignment between the programs and the school boards. This leaves some school boards interfacing with three different early intervention providers.

The increasing demand for early intervention program services is putting extra pressure on many of the small programs, making it difficult or impossible for them to respond to all requests, again leading to inconsistencies. There have also been challenges in recruiting and maintaining early intervention board members.

Finally, we heard that many felt the name of the program did not accurately describe the actual service provided.

#### Response

When families are able to access early intervention programs, their children have improved outcomes, and families are better able to meet their child's unique needs.

Families must be able to access these programs no matter where they live in the province. The programs they access must be consistent in terms of the services available, the quality of those services, and the qualifications of the staff. These standards must be based on best practice.

The program also must be able to respond to changing demands and needs of the communities they serve.

#### **Recommendations**

#### Strengthen early intervention core services and priorities for service delivery:

- Redefine the core service delivery areas based on the four types of support:
  - child development support
  - family support and capacity building
  - transition support
  - case coordination and partnerships
- Increase the use of evidence-informed practices to achieve improved core services.

#### Rename the program from early intervention program to early childhood development support to better reflect the core services provided:

Rename the job title of early interventionists: Services will be delivered by developmental interventionists (DIs).

#### Appoint a task team to provide the Minister with a recommendation on a new governance structure for service delivery:

- The task team will include representatives from early intervention programs and the department
- The new governance structure will aim at improving the access to early intervention across the province while ensuring the consistency of program delivery

#### Implement an accountability framework to ensure consistency and quality of service delivery.

#### Provide strong leadership and support through a partnership with the provincial government and leadership from the early intervention programs:

- Create a new leadership group that includes representation from the Early Years Branch, early intervention, community partners [First Nations, Acadians and francophones, African Nova Scotians], the Early Childhood Interventionists Association of Nova Scotia (ECIANS), and Early Intervention Nova Scotia (EINS).
- Focus on strategic leadership, consistency of service delivery, cultural competence, board development, leadership through transition, professional development, and ensuring the sharing of resources. This aims to improve consistency and strengthen service delivery.

"Respect and recognition for the profession, including the need for more equitable salaries would help to strengthen Early Intervention in the province." (EIP Staff/Board)

#### 3. Supporting and Developing the Early Intervention Workforce

#### Challenges

As the main contact with families, the early interventionist plays a pivotal role in ensuring successful early intervention programs. This relationship is vital for helping the child improve. However, key informants in this consultation process frequently told us that early interventionist salaries are low compared to other professionals doing similar work, and that this is contributing to staff turnover and difficulty in keeping programs adequately staffed. This, in turn, affects the families by reducing the programs and services available and contributing to wait times.

Early interventionists want to be recognized and respected for the important work they do. At the same time, there is inconsistency in their skills and training, and limited opportunities for professional development. Their role is also not clearly defined: early interventionists sometimes try to address issues outside their scope of practice.

#### **Response**

The contribution of early interventionists to a child's development and a family's capacity to support that child must not be underestimated. Early intervention should be seen as an established, respected profession in Nova Scotia, compensated accordingly, and held to clearly defined standards.

"[There is] inconsistency re: role of the Early *Interventionist across the* province and mandate does not seem to be clearly defined in some areas (some may be practicing outside of their competence, some are put in difficult situations and respond because they are front line and the only ones there); public perception of skills and expectations of service may vary across the province." (Community Partner)

#### **Recommendations**

#### Improve the clarity of the early interventionist role and strengthen the development of the workforce:

- Partner with training institutions and professional associations to develop credentialing and core competencies for early interventionists.
- Ensure that early interventionist job description and role is reflective of the core competencies.
- Centralize the professional development components related to core competency, cultural competence, and orientation.
- Implement inter-sectorial professional development and training opportunities to enrich awareness and understanding of different programs.

Increase funding to improve wages for early interventionists.

### 4. Aligning early intervention with the early years system and public school system

#### **Challenges**

In some of the consultation sessions, respondents noted that all people who work with children in the early years should know about the services and supports available for children with special needs. There is a lack of understanding of the role of early interventionists by other service providers, such as family physicians, who are not aware of the program and therefore do not know to refer a child, so they don't refer as much as they could.

There is also lack of integration among services for children age 0–6, such as physical therapy and speech therapy. In addition, some early intervention programs are not available to children with behavioural or mental health issues. It can be difficult for families to coordinate these programs, such as early intensive behavioural intervention (EIBI), with early intervention programs on their own. Parents especially felt that all programs needed to share information, improve communication, and work together for the benefit of the child.

Respondents were positive about the role early interventionists play in helping children transition to school. However they expressed frustration and confusion about how the level or frequency of the service decreases or stops once the child enters school. They also pointed out that the transition process is not consistent across the province, that schools did not necessarily understand how to support children with special needs, and that the schools do not understand the role early interventionists play in helping children transition.

#### Response

The early years, from before birth to age six, are crucial for a child's healthy development. Our children deserve the best possible start in life, and this requires a coordinated effort on the part of several services with expertise in childhood development. Programs through government, such as early intervention, and communities must be linked and share resources, allowing those partners to work together in a more collaborative approach that will better meet the needs of children and their families when they are at home, in the community, and in their transition to school.

#### **Recommendations**

#### Strengthen early intervention's role in transition to school:

- Develop a standardized school transition process.
- Clarify the role of the early interventionist as a lead in the school transition process.
- Begin the school transition process 12 months prior to school entry and extend to six months after school entry across the province.
- Explore entering early intervention data in the Student Services electronic system TIENET, the student information system, to enable the school to access important information through transition.

#### Improve options and supports for children with behavioural and mental health issues:

Task the cross-government Early Childhood Development Working Group, chaired by the Early Years Branch, to develop a collaborative approach for early years mental health that will support children and families that may not meet criteria for diagnosis needed for specialized services.

#### Strengthen connections, collaboration, and resource sharing with service providers who deliver programs for young children and their families:

- Develop a consistent approach for case management of children who receive services from early intervention programs and early intensive behavioural intervention to maximize use of programs.
- Make early intervention a key partner in the 18-month and 36-month visit and referral, as well as the early years centres.
- Formalize partnership with community partners to join networks, share resources, and coordinate opportunities for playgroups, toy lending, in order to reduce duplication.
- Strengthen connection between early interventionists and directors and inclusion coordinators within child care centres.
- Ensure that early intervention is a part of the site management team of early years centres.

#### Locate all early intervention programs in schools wherever possible, within the next five years, considering the availability of space:

Use existing school infrastructure to support reduced costs and promote enhanced partnerships.

