Florida HEALTH
Children’s Medical Services

early steps

2016 - 2017
Early Steps Program Annual Report
December 1, 2017

Rick Scott
Governor

Celeste Philip, MD, MPH
State Surgeon General and Secretary of Health
MISSION:
To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

VISION:
To be the Healthiest State in the Nation.

Submitted to:
The Honorable Rick Scott, Governor, State of Florida
The Honorable Joe Negron, President, Florida State Senate
The Honorable Richard Corcoran, Speaker, Florida State House of Representatives
Florida Interagency Coordinating Council for Infants and Toddlers
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Executive Summary

The Florida Department of Health (Department), Division of Children’s Medical Services (CMS), Bureau of Early Steps and Newborn Screening presents this annual report assessing the performance of the Early Steps Program to the Governor, the President of the Senate, the Speaker of the House of Representatives and the Florida Interagency Coordinating Council for Infants and Toddlers, as required by section 391.308(5), Florida Statutes.

The Individuals with Disabilities Education Act (IDEA)\(^1\) is a federal law that provides children, including those with disabilities, with a free, appropriate public education. Part C of the IDEA provides for early intervention services for children under three years of age with a developmental disability, developmental delay or at-risk for delay. The Early Steps Program implements and administers Part C of the IDEA in Florida.

The Early Steps Program provides developmental evaluation; early intervention services; and training and support services in a variety of home and community settings. These services and supports enhance family and caregiver confidence and capacity to meet their child’s developmental needs and desired outcomes. Some of the highlights of the program’s performance this year include:

- Increased the number of infants and toddlers in the Early Steps Program;
- Improved social-emotional skills for infants and toddlers upon exit from Early Steps; and
- Increased the percentage of families who reported that Early Steps helped them meet their child’s developmental needs.

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\(^1\) Individuals with Disabilities Education Act, 34 C.F.R § 303 (2016).
Background

Positive early learning experiences are crucial for later success in school, the workplace and the community. Early intervention services positively impact outcomes across children’s developmental domains: physical, cognitive, communication, social-emotional and adaptive. Families benefit from early intervention by being able to better meet their children’s needs and enhance their unique abilities from an early age. Early intervention services also benefit the community and society, for example, by lowering the costs of special education and social service programs.

Legislative History

Congress initially passed the Education for All Handicapped Children Act in 1975 requiring the U.S. Department of Education (U.S. DOE) to ensure that all school-aged children receive a free appropriate public education. The law was amended in October 1986 as the IDEA establishing an early intervention program in recognition of "an urgent and substantial need" to:

- Enhance the development of infants and toddlers with disabilities;
- Reduce educational costs by minimizing the need for special education through early intervention;
- Minimize the likelihood of institutionalization and maximize independent living; and
- Enhance the capacity of families to meet their child’s needs.

Florida implemented Part C of the IDEA in September 1993. In 2016, Florida law was amended providing a comprehensive framework for the operation and administration of the Early Steps Program. Some of the changes include specifying eligibility criteria, requiring an annual report and a state plan, and renaming the program to Early Steps.

Program Overview

The Early Steps Program serves infants and toddlers, from birth to thirty-six months, who have developmental delays or an established condition likely to result in a developmental delay, in communities where children live, learn and play. Examples of conditions that children have who are served in this program include autism spectrum disorder, cerebral palsy, deafness and hard of hearing, Down syndrome, visual impairment and congenital Zika virus infection.
The Early Steps Program:

- Identifies infants and toddlers potentially eligible under Part C of the IDEA;
- Determines eligibility;
- Completes an assessment of each eligible child’s skills and abilities;
- Creates an Individualized Family Support Plan (IFSP) based on the developmental needs of the infant or toddler and the family’s concerns, priorities, resources and desired outcomes;
- Coordinates the provision of early intervention services and supports with the family which involves the family and caregivers’ interaction with the child; and
- Provides a service coordinator to assist families in accessing a variety of services and supports, such as early intervention sessions, vision/hearing services, assistive technology, family training and other developmental interventions.

The Early Steps Program uses a team-based approach with each family that provides a cohesive, consistent team to support the child and family. The team uses coaching strategies to help family members and caregivers develop the skills needed to support child development, and ensure they are fully supported to address the child’s functional needs.
Program Structure

The Department is the lead agency responsible for program oversight, which includes, but is not limited to, administrative functions; federal reporting; federal grant management; fiscal accountability; and monitoring contract compliance. The Department maintains a statewide interagency coordinating council, which is known as the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida’s Early Steps Program in the performance of its responsibilities.

The Early Steps Program is administered throughout the state in 15 geographic regions as demonstrated in Figure 1.

Figure 1. Early Steps Geographic Regions
Local Early Steps are the contracted entities responsible for service provision which includes evaluations for children referred for eligibility; assessments for intervention planning; coordination of services; delivery of early intervention services by working with internal and community service providers and other community resources; and transition when the child leaves the program. Figure 2 is an overview of the functions of the Local Early Steps.

Figure 2. Local Early Steps' Functions

<table>
<thead>
<tr>
<th>Step 1: Referral</th>
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<tbody>
<tr>
<td>• Hospitals</td>
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<tr>
<td>• Physicians</td>
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<tr>
<td>• Parents</td>
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<tr>
<td>• Child care programs</td>
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<table>
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<tr>
<th>Step 2: Screening &amp; First Contacts</th>
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<tr>
<td>• Initial contact within 5 days</td>
</tr>
<tr>
<td>• Gather information</td>
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<tr>
<td>• Identify family concerns</td>
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<tr>
<td>• Screening, if necessary</td>
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<tr>
<th>Step 3: Evaluation</th>
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<tbody>
<tr>
<td>• Conducted by multidisciplinary team</td>
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<tr>
<td>• Standardized evaluation</td>
</tr>
<tr>
<td>• Review of medical, education and other records</td>
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<tr>
<th>Step 4: Assessment and IFSP Planning</th>
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</thead>
<tbody>
<tr>
<td>• Assessment identifies child’s unique strengths/needs</td>
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<tr>
<td>• IFSP identifies authorized services</td>
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<tr>
<th>Step 5: Service Provision</th>
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</thead>
<tbody>
<tr>
<td>• Services must begin within 30 days of IFSP development</td>
</tr>
<tr>
<td>• Services provided where children live, learn and play</td>
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<table>
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<tr>
<th>Step 6: IFSP Review</th>
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<tbody>
<tr>
<td>• Reviewed at least every 6 months</td>
</tr>
<tr>
<td>• Meet face-to-face on at least annual basis</td>
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<tr>
<td>• Re-determine eligibility</td>
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<tr>
<td>• Assesses the outcomes, strategies and services</td>
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<tr>
<th>Step 7: Transition</th>
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<tr>
<td>• 90 days before 3rd birthday</td>
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<tr>
<td>• Transition plan is part of the IFSP</td>
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<tr>
<td>• Transition plan outlines activities, referrals and any additional family concerns</td>
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</tbody>
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\(^2\) Table adapted from a version outlined in Office of Program Policy Analysis & Government Accountability (OPPAGA) Research Memorandum, Florida’s Early Steps Program, November 3, 2015, page 6, Exhibit 3.
Funding

Federal and state funding has increased from fiscal year (FY) 2014-2015 through FY 2017-2018, resulting in a total increase of 23 percent. The majority of the Early Steps statewide budget is supported by state funds. Recurring state funds have increased by 33 percent from FY 2014-2015 through FY 2017-2018.

U.S. DOE provides grant funding annually to states for the implementation of Part C of the IDEA. Funds are allocated based on each state’s number of children from birth to thirty-six months as a proportion of the nationwide child population. Federal regulations require Part C of the IDEA funds be used as the payer of last resort. Federal funds have increased by eight percent from FY 2014-2015 through FY 2017-2018.

The Early Steps Program remains in compliance with the Part C of the IDEA maintenance of effort requirement, meaning Florida’s annual budget must be at least equal to the amount of state funds expended for early intervention services for the preceding fiscal year. The Early Steps Program is responsible for the state match for Medicaid Early Intervention Services, which is part of the Early Steps Program’s annual budget included in the General Appropriations Act (GAA). Figure 3 shows the current year’s funding and the annual funding trend for the three preceding fiscal years.
Federal and state funds are allocated to Local Early Steps based on the number of children enrolled during the prior fiscal year. These funds are used for infrastructure and direct services. Local Early Steps have an administrative cap to ensure that at least 85 percent of funds are spent on direct services, as per the GAA.

Early Steps funds support:

- Direct early intervention services for eligible children and their families;
- Major activities to be carried out in maintaining and implementing the statewide system of early intervention services that can include a statewide system of personnel development, a data system, public awareness and ensuring a timely, comprehensive and multidisciplinary evaluation for each child;
- Support for the Florida Interagency Coordinating Council for Infants and Toddlers;
- State office (lead agency) administrative positions; and
- Other state or local public agencies, as appropriate.
Program Performance

The Department is required to address the performance standards in section 391.308(1), Florida Statutes, and report actual performance compared to the standards for the prior fiscal year annually. Section 391.308(1), Florida Statutes, provides as follows:

(1) PERFORMANCE STANDARDS.—The department shall ensure that the Early Steps Program complies with the following performance standards:

(a) The program must provide services from referral through transition in a family-centered manner that recognizes and responds to unique circumstances and needs of infants and toddlers and their families as measured by a variety of qualitative data, including satisfaction surveys, interviews, focus groups and input from stakeholders.

(b) The program must provide individualized family support plans that are understandable and usable by families, health care providers and payers and that identify the current level of functioning of the infant or toddler, family supports and resources, expected outcomes and specific early intervention services needed to achieve the expected outcomes, as measured by periodic system independent evaluation.

(c) The program must help each family to use available resources in a way that maximizes the child’s access to services necessary to achieve the outcomes of the individualized family support plan, as measured by family feedback and by independent assessments of services used by each child.

(d) The program must offer families access to quality services that effectively enable infants and toddlers with developmental disabilities and developmental delays to achieve optimal functional levels as measured by an independent evaluation of outcome indicators in social or emotional skills, communication and adaptive behaviors.

The information in this report was obtained from a variety of qualitative and quantitative data sources, including information from the Early Steps data system, child record reviews, child evaluation/assessment results, family surveys and stakeholder input, including focus groups and interviews. Three years of data are included in order to provide a greater comparison of program performance as well as identify trends and opportunities for improvement. Pursuant to section 391.308(5), Florida Statutes, the following measures are to be included in this
report:

(a) Number and percentage of infants and toddlers served with an individualized family support plan;
(b) Number and percentage of infants and toddlers demonstrating improved social or emotional skills after the program;
(c) Number and percentage of infants and toddlers demonstrating improved use of knowledge and cognitive skills after the program;
(d) Number and percentage of families reporting positive outcomes in their infant’s and toddler’s development as a result of early intervention services;
(e) Progress toward meeting the goals of individualized family support plans; and
(f) Any additional measures established by the department.

This report addresses performance standards and performance measures beginning FY 2014-2015 through FY 2016-2017. Performance standards and related performance measures are discussed together. The information included in the report serves as the foundation for the annual state plan required in section 391.308(2)(c), Florida Statutes, which will assess the need for early intervention services, evaluate the extent of the statewide need that is met by the program, identify barriers to fully meeting the need and recommend specific action steps to improve program performance.

**Number of Children Served**

*Measure: Number and Percentage of Infants and Toddlers Served with an Individualized Family Support Plan*

During FY 2016-2017, 51,285 children were referred\(^3\) to the Early Steps Program, including those who were referred and found not eligible. Of those children, 31,902 were eligible and received services with an IFSP as shown in Figure 4.

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\(^3\) Referred includes children who were referred and found not eligible, determined eligible and received services, those lost to follow-up and those who transitioned out of the program during the year.
Figure 4. Total number of children referred, children receiving services with an IFSP and the percentage of children determined eligible

There is an eight percent increase in the total number of infants and toddlers referred to the Early Steps Program from FY 2014-2015 through FY 2016-2017. The steady increase in the number of referrals are a result of continued awareness of the benefits of the Early Steps Program and education to primary referral sources. Another factor leading to the increase is the effort of partners, such as Help Me Grow Florida, to link families to support to address developmental concerns.

Local Early Steps continue to partner with physicians, hospitals and birthing facilities to increase the visibility of the program. As awareness of the program increases, stakeholders report a greater need for information to be shared with primary referral sources and the general public on the referral procedures, program purpose, eligibility requirements and service delivery system. A communication plan has been developed to assist with messaging and outreach strategies. The communication plan includes obtaining a comprehensive understanding of the population the program serves, including an analysis of children who have been referred but determined not eligible.
Services From Referral Through Transition

Standard: The program must provide services from referral through transition in a family-centered manner that recognizes and responds to unique circumstances and needs of infants and toddlers and their families as measured by a variety of qualitative data, including satisfaction surveys, interviews, focus groups and input from stakeholders.

The measures below are federal reporting indicators that are monitored and reported to the U.S. DOE annually. These measures are intended to ensure infants and toddlers referred are evaluated and provided with an IFSP within the federal timelines; services begin timely after the family consents via the IFSP; and transition activities are established to best support the child and family after exiting the program.

Evaluation and IFSP Timelines

In accordance with federal regulations, evaluations and IFSPs are required to be provided within 45 days of the date the child’s referral is received by the Early Steps Program. Figure 5 depicts the percentage of infants and toddlers who received an evaluation and IFSP within the 45-day timeline.

**Figure 5. Percentage of infants and toddlers who received an evaluation and IFSP within 45 days of referral**

![Graph showing percentage of infants and toddlers receiving evaluations and IFSPs within 45 days](image)

*Note: The FY 2015-2016 percentage was updated from the previous year’s report.*
During FY 2016-17, 96 percent of infants and toddlers received an evaluation and IFSP within 45 days of being referred. The much lower percentage of 78 percent in FY 2014-15 was due to staffing shortages at several Local Early Steps. The target for the 45-day timeline is 100 percent and established by the U.S. DOE. The Early Steps Program has set a goal to increase performance by two percent per year until the target is reached. Although the overall goal was not met, the Early Steps Program did increase its performance this year by one percent.

Stakeholder input was solicited for opportunities to improve this standard. A strength identified is the quality of the evaluation and assessment process due in part to gathering information about the child and family in preparation for the evaluation and assessment and providing information about Early Steps during first contacts with the family. Stakeholders believe families and evaluation teams are prepared for the evaluation and IFSP meeting as a result of information gathered during the first contacts process. Of the families polled, 94 percent reported full involvement in the evaluation and assessment process.

**Timely Services**

Early Steps services are required to be provided within 30 days after family consent. This allows the service coordinator to identify the most appropriate provider to meet the child’s needs at times convenient to the family and locations within the family’s daily routines. Figure 6 illustrates the percentage of children who received services within 30 days of consent.

**Figure 6. Percentage of infants and toddlers who received services within 30 days of consent**

![Percentage of infants and toddlers who received services within 30 days of consent](image-url)
The target for the 30-day timeline is 100 percent and established by the U.S. DOE. The Early Steps Program set a goal last year to increase performance by at least four percent per year, until the target is reached. The Early Steps Program increased performance by three percent this year.

Focus groups conducted with stakeholders identified the need for more providers throughout the state, particularly in rural areas. There is a greater demand for physical, occupational, and speech therapists and the reimbursement rate is a factor to recruiting and retaining providers. This directly impacts the ability to provide timely services to infants and toddlers, and their families. The Early Steps Program will continue to work on increased provider access across the state and opportunities for collaboration to address the need.

Transition

The Early Steps Program must ensure a smooth transition for infants and toddlers with disabilities under the age of three from early intervention services under Part C of the IDEA, to preschool or other appropriate services for toddlers with disabilities by 36 months of age. Not fewer than 90 days before the third birthday of a toddler served in Early Steps, the program is required to hold a conference to discuss services and develop a transition plan. The transition plan must include activities and timelines for successful transition from the Early Steps Program.
For children preparing to transition from Early Steps in FY 2016-2017, 93 percent received a timely transition conference with activities and timelines for the appropriate program(s) upon exit from the program. This is a one percent decrease from the previous year. The target for the 90-day timeline is 100 percent and is established by the U.S. DOE. The Early Steps Program will continue to provide staff training and strive to achieve the goal set to increase performance by at least two percent per year, until the target is reached.

Family Outcomes
The Early Steps Program solicits feedback from families to assess family outcomes resulting from their child’s participation in the program. These outcomes are identified by the U.S. DOE and reported annually. These data are derived from results from a nationally-developed family survey developed specifically for states’ early intervention programs. Families report the extent the program helped families effectively communicate the child’s needs as outlined in Figure 8.
During FY 2016-2017, 78 percent of families reported that early intervention services helped the family effectively communicate the child’s needs. This is a one percent decline from the prior year. Training will be increased to Local Early Steps on the role of the family on the IFSP team, including the importance of the family voice in all aspects of service planning. This is a results indicator and the target is established by the state. The target established for FY 2016-2017 was 73.5 percent. Although the target was surpassed, the program has identified national technical assistance resources and other state early intervention best practices to improve family outcomes. The target for this measure will be reviewed and increased as appropriate, in collaboration with stakeholders.

Stakeholders identified the need to improve families’ access to culturally competent services in Early Steps. The Early Steps Program defines culturally competent services as a set of values, behaviors, attitudes and practices which honor and respect the beliefs, language, inter-personal styles and behaviors of individuals and families receiving services. National resources will be accessed on culturally competent services to meet the needs of the diverse population of families served by Early Steps and improve the percent of families who report that early intervention services helped the family effectively communicate the child’s needs.
**Individualized Family Support Plans**

**Standard:** The program must provide Individualized Family Support Plans that are understandable and usable by families, health care providers and payers and that identify the current level of functioning of the infant or toddler, family supports and resources, expected outcomes and specific early intervention services needed to achieve the expected outcomes, as measured by periodic system independent evaluation.

The families and caregivers of eligible infants and toddlers are provided with an IFSP. The IFSP is a written plan that includes family concerns, the child’s developmental status, strategies toward achieving outcomes and authorized services and supports. IFSPs are reviewed with the IFSP team, including: the parents; other family members; advocates; persons outside the family, as requested by the parents; the service coordinator responsible for implementing the IFSP; persons directly involved in conducting the evaluation and/or assessment; and persons who are or will be providing early intervention services to the child or family. IFSPs are reviewed at least every six months, or more frequently if conditions warrant, or the family requests a review. The purpose of the reviews is to determine the progress toward achieving the outcomes and whether modifications are necessary to achieve results. Additionally, the IFSP is reviewed at least annually to re-determine eligibility and to revise, change, or modify provisions and assess the continued appropriateness of the outcomes, strategies and recommended services.

Families were surveyed seeking their feedback on whether the IFSP is understandable and usable to their family, and 74 percent responded favorably. To address this standard and identify a mechanism to identify and report child progress, a group of Early Steps’ stakeholders was convened to revise the IFSP. The revision of the IFSP included a needs assessment and review of other states’ IFSPs. A pilot implementation of the revised IFSP began in January 2017. Statewide implementation of the revised IFSP is scheduled for January 2018. A summary of the changes to the IFSP includes a comprehensive assessment of the child and family’s daily routines, consistent documentation of screening information, an assessment of the child’s developmental domains linked to federal measures, outcomes that describe progress in three and six months, documentation of services, and transition plans that delineate activities for a child is transitioning out of Early Steps.

Families will be surveyed following statewide implementation of the revised IFSP to determine
if the new IFSP is understandable and usable to their family and opportunities for improvement will be identified. Feedback will also be sought from health care providers and payers.

**Measure: Progress toward meeting the goals of Individualized Family Support Plans**
A random sample of child records were reviewed to determine progress toward meeting the goals on the IFSP. Based on the review, 97 percent of infants and toddlers served made progress toward meeting the outcomes on the IFSP during FY 2016-2017. The same percentage of infants and toddlers served made progress during FY 2015-2016.

**Families Reporting on Child’s Outcomes**

**Standard:** The program must help each family to use available resources in a way that maximizes the child’s access to services necessary to achieve the outcomes of the Individualized Family Support Plan, as measured by family feedback and by independent assessments of services used by each child.

The IFSP team works with the family to identify available resources needed to meet the child’s individualized outcomes. Figure 9 shows the percentage of families who indicated that the Early Steps Program helped them use resources that achieved the desired outcomes on the IFSP.

**Figure 9. Percentage of families who reported that Early Steps helped families use available resources in a way that maximizes the child’s access to services necessary to achieve the goals of the Individualized Family Support Plan**
During FY 2016-2017, 94 percent of families reported that Early Steps helped them use available resources to ensure access to services necessary to achieve the goals on the IFSP. This is attributed to the continued partnerships established by Local Early Steps with community partners to maximize available resources for optimal outcomes for infants and toddlers and their families. At the state level, the Early Steps Program maintains collaborative partnerships with state agencies, universities and other programs that serve infants and toddlers, and their families.

Stakeholders identified family engagement and empowerment as a strength of the Early Steps Program. Families identified opportunities for improvement that include consistent implementation of the service delivery system and responsiveness from service coordinators. Early Steps will review its training materials and monitoring tools to ensure uniform implementation of the service delivery system, including timely responsiveness to families. The ratio of service coordinator per family will continue to be monitored to ensure families have access to critical coordination services within the program.

Measure: Number and percentage of families reporting positive outcomes in their infant’s and toddler’s development as a result of early intervention services

The purpose of the Early Steps Program is to enhance not only the development of infants and toddlers with developmental delays or disabilities, but also the capacity of the family to meet the child’s needs. Each Local Early Steps has a minimum of one full-time Family Resource Specialist (FRS). The FRS is a parent or primary caregiver of a child who received early intervention services or of a child who has a qualifying condition for early intervention services. The primary role is to provide parent-to-parent support to families served by the program.

FRSs work with Local Early Steps to promote the importance of family education in service provision. FRSs are required to develop and submit an annual System of Family Involvement Plan in collaboration with families served by the Early Steps Program. The plans address strategies to increase family outcomes to build the capacity of families to help their children grow. Outcomes of the plans are provided to the Department as a contract requirement.

Families with children exiting Early Steps are surveyed annually to determine the extent to which Early Steps services have helped the child and family. During FY 2016-2017, 37 percent of families with children who exited during the survey period provided a survey
response. Survey data are used to report family outcome measures determined by the U.S. DOE and identify priorities for program improvement. Figure 10 displays the percentage of families who report that Early Steps helped their family help their child develop and learn.

**Figure 10. Number and percentage of families that report that early intervention services have helped their family help their child develop and learn**

Based on FY 2016-2017 family survey results, 92 percent of families reported that Early Steps services positively impacted their ability to help their child develop and learn, a one percent increase from the prior year. Following input from a federally funded technical assistance center, Early Steps focused efforts on increasing the number of families who responded to the survey in order to ensure the number of survey responses were representative of the number of families served. Accordingly, Early Steps revisited the distribution window during FY 2016-2017. The prior year distribution period was two and a half months. The distribution period for FY 2016-2017 was three months which resulted in a 57 percent increase in the number of families who responded from the prior year.

**Child Outcomes**

**Standard:** The program must offer families access to quality services that effectively enable infants and toddlers with developmental disabilities and developmental delays to achieve optimal functional levels as measured by an independent evaluation of outcome indicators in social or emotional skills, communication and adaptive behaviors.
Early Steps conducts an assessment on every child served using a tool called the Battelle Developmental Inventory, 2nd Edition (BDI-2). This tool assesses developmental domains that include social, communication, motor, cognitive/thinking and self-help skills. Children are assessed when entering the program and again when exiting the program to measure the child’s progress. The data obtained on the child’s progress are used to report on child outcomes determined by the U.S. DOE and identify priorities for program improvement.

Stakeholders identified a concern with the BDI-2 instrument’s ability to accurately capture the social-emotional domain of infants and toddlers under the age of three. An additional concern was identified related to fidelity of administration of the BDI-2. Early Steps has contracted with subject matter experts to provide recommendations for changes to the child assessment process and tools. We anticipate adding other instruments that better assess the social-emotional domain in the next couple of years.

*Measure: Number and percentage of infants and toddlers demonstrating improved social or emotional skills after the program*

The assessment for the social-emotional domain determines the percent of infants and toddlers with IFSPs demonstrating the increased rate of growth in positive social-emotional skills. Social-emotional skills refer to the social relationships a child forms with others and how the child interacts with or relates to other children and adults. Figure 11 illustrates the number and percentage of infants and toddlers demonstrating improved social or emotional skills upon exiting the Early Steps Program.
During FY 2016-2017, 95 percent of infants and toddlers demonstrated improvement. This is a one percent increase from the prior year. The improvement in this developmental domain is attributed to the quality of the providers working with children, a result of the professional development and training for Early Steps’ providers, the individualized approach for service delivery, and the fluidity of the IFSP process which allows teams to reconvene any time a team member has concerns. It should be noted that the federal indicator for social-emotional outcomes measures “substantial” improvement. This state measure differs from a similar federal measure, as it a statutory requirement in Florida law.

Measure: Number and percentage of infants and toddlers demonstrating improved use of knowledge and cognitive skills after the program

The BDI-2 includes an assessment of cognitive skills, including communication. The assessment for cognitive skills determines the percentage of infants and toddlers with IFSPs demonstrating improvement. These skills include the acquisition and use of knowledge such as thinking, reasoning, problem-solving, expressive and receptive language. Figure 12 illustrates the number and percentage of infants and toddlers demonstrating improved acquisition and knowledge of skills upon exiting Early Steps.

Although the mechanism to obtain the data are the same, the measures required for federal reporting on child outcomes vary from the state measures for this report; therefore, the results are not the same.
Figure 12. Number and percentage of infants and toddlers demonstrating improved acquisition and knowledge of skills upon exiting Early Steps⁵

![Graph showing the number and percentage of infants and toddlers demonstrating improved acquisition and knowledge of skills upon exiting Early Steps.]

During FY 2016-2017, 96 percent of infants and toddlers demonstrated improvement in the acquisition and knowledge of skills domain. Maintaining the level of improvement in this developmental domain is attributed to the continued quality of providers working with children, a result of the professional development and training for Early Steps’ providers, the individualized approach for service delivery, and the fluidity of the IFSP process which allows teams to reconvene any time a team member has concerns. Due to Early Steps’ current eligibility criteria, children who have the most severe disabilities were served in the program. While these children may not make “significant” improvement, the data show that these children have made developmental progress while receiving Early Steps services. This state measure differs from a similar federal measure, as it a statutory requirement in in Florida law.

In an effort to address areas of program improvement related to child outcomes, the Early Steps Program is actively engaged in the implementation of the State Systemic Improvement Plan (SSIP). The focus for improvement is to increase the percent of infants and toddlers who exit early intervention with an increased rate of growth in positive social-emotional skills. This area of focus was determined after an analysis of data from FY 2009-2010 through FY 2013-2014 found that “substantial” progress in the social-emotional domain for infants and toddlers served was significantly below the national average and more disparate than other child

⁵ Although the mechanism to obtain the data are the same, the measures required for federal reporting on child outcomes vary from the state measures for this report; therefore, the results are not the same.
outcome areas.

During FY 2016-2017, the plan was refined to facilitate data-informed decision-making and to concentrate efforts and resources on strategies expected to have the greatest impact on the social-emotional development of infants and toddlers served by Early Steps. The refined SSIP strategies include: implementation of a professional development framework based on evidence-based coaching practices, adaptations to existing internal processes to promote improved child outcomes at the local level, further collaboration and engagement of key stakeholders to implement SSIP activities, implementation of the revised IFSP, procurement of a new data system to continue to improve data reliability and integrity, and development of a statewide fiscal plan that includes implementation of the planned professional development framework.

The infrastructure for implementation of the SSIP was firmly established during FY 2016-2017. Professional development, led by subject matter experts, is underway at three local demonstration sites. Internal processes are being adapted to more fully integrate child outcomes performance expectations. Early Steps has strengthened and renewed its partnerships with other statewide programs serving infants and toddlers and is actively engaged in other initiatives to further support improved performance. Market research was conducted during the FY 2016-2017 as a first step to procure a new data system. A statewide fiscal plan was also developed and will continue to be refined to ensure financial support for systemic improvements. These efforts are expected to have a positive impact on all child and family outcomes, in addition to the social-emotional developmental domain.

**Conclusion**

The services provided under the Early Steps Program enhance the physical, cognitive, communication, social-emotional and adaptive development of infants and toddlers. Well-implemented, high-quality early intervention programs not only help children in the short term, but also help children lead more productive lives through reduced placement in Exceptional Student Education programs, increased high school graduation rates, and improved long-term health.

The Early Steps Program is serving more children across Florida as demonstrated by the increased number of children referred and subsequently receiving services between FY 2014-
2015 and FY 2016-2017. Of the 51,285 children who were referred, including those who were referred and found not eligible for Early Steps, 31,902 children received early intervention services with an IFSP. Increases in funding at the state and federal level have assisted the Department with providing more direct services to children and families. Service satisfaction is high as measured by the percentage of families reporting positive outcomes due to early intervention services (92 percent) and the percentage of families who reported the program helped them obtain needed services (94 percent).

The Early Steps Program will continue to involve stakeholders at the state and local level to improve performance in areas below the targets and improve outcomes for infants and toddlers and their families. Through a comprehensive state planning process, the program will assess statewide need, evaluate the extent of the need met by the program, identify barriers to meeting the need and develop action steps to improve performance. The Department and the Local Early Steps are engaging in the following strategies to address and improve overall program efficiency and services:

- Implementing updated policies approved by the Office of Special Education Programs, which aligns with sections 391.301, 391.302 and 391.308, Florida Statutes;
- Continue implementing changes to the IFSP to include federal and state requirements in a user-friendly format for families, providers and payers;
- Procure an Early Steps data system;
- Increasing public awareness; and
- Implementing the SSIP.

The Early Steps Program is critical to ensuring that children with unique abilities develop to their greatest potential.