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ABSTRACT

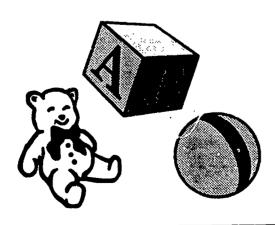
This report describes early intervention activities in Maryland funded by Consolidated Local Implementation Grants from July 1991 through June 1992. This program is the single grant mechanism through which local agencies in Maryland receive funding for early intervention services from Parts B and H of the federal Individuals with Disabilities Education Act and Chapter 1 (Handicapped) of the Education Consolidation and Improvement Act. During this period, an estimated 4,325 infants and toddlers (or approximately 1.9 percent of the birth-to-3 age group) were receiving services under these laws. Specific accomplishments for the year include: (1) achievement of a local early intervention system in every jurisdiction; (2) implementation of a statewide data collection system; (3) provision of technical assistance; (4) targeted case management under the medical assistance program; and (5) development of special initiatives and model projects. Service delivery issues are identified, including: the need for additional funding, the need for year round services, difficulties meeting the 45-day timeline requirement for the initial Individual Family Service Plan, and the potential impact of including children at risk of developmental delay. Summary financial data are provided for each county's efforts, specific demonstration projects, and interagency efforts. (DB)



Governor's Office for Children, Youth, and Families Maryland Infants and Toddlers Program

Early Intervention System In Maryland

1991-92



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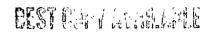
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Early Intervention Services In Maryland

1991-92

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The Office for Children, Youth, and Families is designated by the Governor to be the State Lead Agency for the Maryland Early Intervention System, as required by the Individuals with Disabilities Education Act (IDEA), Part H, and amended in 1991. The program is regulated by 34 Code of Federal Regulations, Part 303, and the Code of Maryland Regulations, Title 01, Subtitle 04, Chapter 01. The Interagency Coordinating Council is appointed by the Governor to advise and assist the Office for Children, Youth, and Families in the development of the statewide Early Intervention System. The Maryland Infants and Toddlers Program is responsible for implementation.

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his report describes the local early intervention system's activities funded by the Consolidated Local Implementation Grants (CLIG), during July 1, 1991, and June 30, 1992. In 1988, funds to develop and implement the Early Intervention System throughout the State were provided by the Maryland Infants and Toddlers Program (MITP) through the Request For Proposal process to eight counties and Baltimore City. After 1989 these funds were made available to all 24 jurisdictions of the State through direct grants to local lead agencies.

Federal funds are made available to all local jurisdictions to plan, develop, and implement the local system of early intervention, to provide funding for direct services that are not otherwise provided from public or private sources, and to expand and improve on services within local early intervention systems.

Consolidated Local Implementation Grant

For the funding year beginning July 1, 1991, the Maryland Infants and Toddlers Program/Office for Children, Youth, and Families has designated the Consolidated Local Implementation Grant (CLIG) as the single grant mechanism through which local agencies receive funding for early intervention services from the following federal sources:

- I. Part H of the Individuals with Disabilities Education Act (IDEA);
- II. Part B of the Individuals with Disabilities Education Act (IDEA); and
- III. Chapter 1 (Handicapped) of the Education Consolidation and Improvement Act.

In addition, there are limited state funds which are made available from the State agencies which provide early intervention services. Other federal funds may be obtained through special project grants.



The Office for Children, Youth, and Families, in cooperation with the Maryland State Department of Education, provides this joint application process for federal funds to support the efforts of local jurisdictions to deliver coordinated early intervention services to eligible infants and toddlers and their families.

Between July 1, 1991 and June 30, 1992, there were an estimated 4,325 infants and toddlers actively participating in the system of services, or approximately 1.9 per cent of the birth-to-three age group. This estimation is based on a projection, established by other states, that a one-day child count represents 60 percent of the actual annual early intervention caseload. Maryland's one-day child count for December 1, 1991, in Maryland was 2,795. This figure is 20.7 per cent higher than the figures for December 1, 1990.



Final Program Report: July 1, 1991 to June 30, 1992

The Maryland Infants and Toddlers Program is provided quarterly reports from Local Lead Agencies describing their local early intervention activities. Following is a summary of the accomplishments and most commonly expressed concerns reflected in final reports for the grant period ending June 30, 1992.

Accomplishments:

• A Local Early Intervention System in Every Jurisdiction
Consolidated Local Implementation Grants were awarded to every
county and Baltimore City. There is a single point of entry, a local lead
agency, and a system of early intervention services throughout the State.
The unique features of each jurisdiction are reflected in the variety of
ways that the local systems function, but one strength of the Maryland
approach has been to use local resources and local decision making to
create a comprehensive system of early intervention services.

• Statewide Data Collection System

Prior to implementation of the Maryland Infants and Toddlers Tracking/Data Collection System, there was no mechanism with which to capture interagency data on young children and their families receiving services. MITP has provided a network of computers, a customized software package, and training to local personnel so that, for the first time, information will be available to analyze the field of early intervention and family support services in Maryland.

Technical Assistance

The Interagency Technical Assistance Team is supported by staff commitment from the Maryland State Department of Education, the Department of Health and Mental Hygiene, and the Department of Human Resources, together with the Maryland Infants and Toddlers Program. Assistance and support is provided in many forms, including:

- 15 statewide conferences on specific topics and issues;
- 12 regional meetings allowing participation by a wide audience of local direct service and supervisory staff;
- On-site assistance for jurisdiction-specific issues; and
- Technical Assistance Bulletins, Resource Documents, and an Administrative Manual providing written guidance for particular topics of concern.



• Eligible Children Receiving Early Intervention Services
Local early intervention systems reported that 2,795 Part H eligible
infants and toddlers and their families were receiving early intervention
services in accord with an individualized family service plan on
December 1, 1991 in Maryland. The December 1 count is a tally of actual
children extracted from local Infants and Toddlers Tracking/Data
Collection Systems. In previous years, when data was collected through
surveys completed by individual agencies, the Child Count was a
combination of actual and estimated numbers of children. However, as
coordinated service delivery and data collection improve, each electronic
count becomes a more accurate snapshot of Part H eligible children and
families receiving services at the local level.

In 1993, MITP will begin to have the ability to extract a representation of the actual number of infants and toddlers served throughout an entire year. In addition, monitoring of local early intervention systems were include an analysis of data trends from the local Infants and Toddlers Tracking/Data Collection Systems.

• Targeted Case Management under the Medical Assistance Program

Beginning August, 1991, the Medical Assistance Program supported provision of case management to infants, toddlers, and their families who met Medical Assistance eligibility criteria. This greatly expands the availability of case management for an estimated 32 per cent of Maryland's families receiving early intervention services.

• Special Incentives and Models of Significance
A number of special support initiatives and model projects have been undertaken, including:

- <u>Reaching Families Early:</u> A special program to identify evaluate, and serve infants prenatally exposed to substance abuse.

- <u>New Vision</u>: A model training project to prepare veteran parents of children with disabilities to act as service coordinators for families with younger children.

 Center for Technology and Human Disabilities: Jointly sponsored with the Maryland State Department of Education and Johns Hopkins University, this program provides consultation and assistance in the arena of assistive technology.

- <u>Coordinating of IFSPs for Families Served through CCHCC</u>: This project coordinates services to those families served by the Coordinating Center for Home and Community Care.

- Infants and Toddlers Service Coordination: This project coordinates services with families served by Friends of the Family and



Baltimore City Infants and Toddlers, through Family Support Centers.

• Early Intervention Services Received by Eligible Children and Families

Local Tracking/Data Collection Systems contain individual child records that include the types of early intervention services identified on IFSPs for each eligible child and family. To complete the Table 2 Report of eligible children receiving designated early intervention services in accord with an IFSP, the Maryland Infants and Toddlers Program requested that each local early intervention system extract service data from its Tracking/Data Collection System and submit the extracted files on a diskette.

Using the December 1 Child Count as the base figure, the Maryland Infants and Toddlers Program analyzed and consolidated data on the provision of early intervention services submitted by local jurisdictions. For this report, each child and family is counted only once within each service category regardless of the number of times the service is received, but is counted under each type of service that is received. The following is a statewide summary of reported service counts and the percentage of the eligible population (2,795) that received each service as of December 1, 1991.

Service	# of Children	% of Total Children
Audiology	301	10.12%
Family Training/Counseling,	281	9.45%
Health Services	100	3.36%
Medical Services	131	4.40%
Nursing Services	393	13.21%
Nutrition Services	47	1.58%
Occupational Therapy	825	27.73%
Physical Therapy	1077	36.20%
Psychological Services	122	4.10%
Respite Care	16	0.54%
Social Work Services	271	9.11%
Special Instruction	1462	49.14%
Speech Language Pathology	1247	41.92%
Transportation	138	4.64%
Other Early Intervention Services	224	7.53%



Expansion of early intervention and support services
 Data collected to date indicates that the number and types of services
 being provided is growing. Family support groups, for example, are
 now organized in more jurisdictions than a few years ago. More precise
 information will be available in the future, since a reliable database is
 now in place.

• Family support services

Local jurisdictions are indicating increasing interest in funding special supports for families. Specialized child care, respite care, and family referral to employment resources, housing, and drug treatment are some of these services.

Service Delivery Issues:

Need for additional funding for direct early intervention services

Local program staff continue to report that this is the largest area of concern. Staff report need for additional funding above current levels to provide early intervention services and administrative support. However, preliminary analysis of year-end reports indicate that many local jurisdictions have carried over substantial levels of funding for the last two years.

For 1991-92 grants (listed above) totaled \$3,407,267, yet 38 per cent remained unspent by the end of the program year because of a combination of factors. Some of these factors are unique to the early phase of statewide implementation (e.g., low level of public awareness, establishment and use of the local single point of entry) and these are not expected to be present in future years. It is noteworthy that this is the first year of the availability of Chapter 1 funds. Local program personnel expect to have smaller amounts of carry-over hereafter.

Year-around services

There are four areas of concern under this topic:

- Adequate funding to cover the cost of providing services during the summer months;
- Availability of staff who are not contracted to work during the summer, despite establishment of a position to provide summer services;
- Disruption of personnel change relationships with the family; and



- Disruption of change in service delivery location when school facilities are not available in summer.

MITP took a survey on this issue during 1992-93, and addressed it during the Early Intervention Conference in Fall 1992 and again in the Spring 1993 newsletter. In addition to providing additional funding through the Consolidated Local Implementation Grant for 1992-93, this priority was included in this year's Incentive Grant program. This continues to be a problem in some jurisdictions and MITP will continue to monitor this area.

• 45-day timeline requirement for the initial IFSP
In a few jurisdictions, the required timeline is reported to be too short to accomplish the task for these reasons:

- The amount of time it takes to obtain existing information in order

not to duplicate procedures;

- The amount of time it takes to schedule evaluations when limited numbers of qualified personnel are scheduled far in advance;

 Adequate levels of administrative staff needed to type and transmit the work of evaluation personnel;

- The inevitable impact of reduced staff during summer months.

It should be noted that fewer jurisdictions this year have reported difficulty meeting the 45-day timeline compared to those reporting this as a problem the previous year. This is a federal requirement and therefore MITP works with the local early intervention system to establish policies and procedures for the local system. This has improved this situation in many ways, but it is still reported to be a problem area for some jurisdictions.

• The difficulty of establishing transition plans

Defining agency responsibility for serving a child before and after age three has been a problem. This was on the agenda for in-depth discussion at the first Quarterly Regional Meeting in Fall 1992, and all local early intervention staff were invited. Development of a comprehensive approach to this issue will be the result of work throughout the upcoming year, resulting in a finalized form and instructions for its use before the beginning of the 1993-94 program year.

Adequate numbers of qualified personnel
 Twenty-nine per cent of local lead agencies report staff vacancies. To address personnel shortages, MITP:

- Developed and implemented a *Job Bank*, listing paraprofessionals and professionals seeking employment in early intervention as well as vacancies in local programs. This data is



broadcast throughout the State via MITP's electronic bulletin board, which is disseminated on request and distributed widely through regular statewide mailings.

- Conducted Focus Groups to examine recruitment and retention issues for rural counties and generate recommendations.

 Sponsored a Task Force to examine existing certification standards for special education. The Task Force makes recommendations for changes to update certification standards and support development of personnel preparation programs by community colleges, colleges, universities, and professional schools throughout Maryland.

- Sponsored a 45-hour graduate level course in infant development, screening, evaluation, and assessment for 40 participants who

earned inservice or graduate credit.

• Increase in referrals to the early intervention program
Reports of the data collection system indicate that in most areas of the
State, referrals to the local single point of entry are increasing. Local staff
report concerns that they will have the resources to meet the demand to
evaluate infants and toddlers, and serve eligible children and their
families. MITP has made incentive grants available throughout the year
to address unanticipated gaps in services and increase in referrals.

 Potential impact of including children at risk of developmental delay

MITP has initiated a three-year study of this issue in 1993. A number of local personnel have reported concern about the potential impact of serving at-risk infants and toddlers. A prior study indicated such low utilization rates among at-risk populations, that the decision was deferred until the completion of *Reaching Families Early*. Many of these jurisdictions will participate in this project.

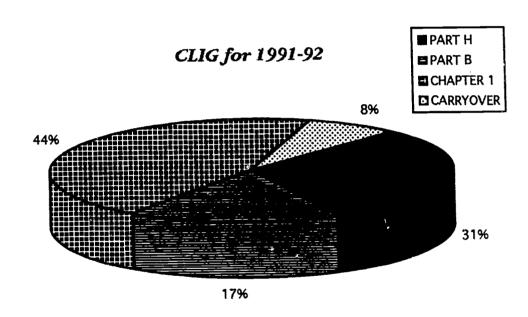
Other concerns reported by individual jurisdictions are addressed directly by the Interagency Technical Assistance Team, supported by staff from the Maryland State Department of Education, the Department of Health and Mental Hygiene, the Department of Human Resources, and MITP.



Financial Report

Federal funds are available to all jurisdictions to plan, develop, and implement the local system of early intervention. Federal funding can be used to support services that are not otherwise provided from public or private sources, and to expand and improve on services within local early intervention systems.

For the funding year beginning July 1, 1991, the Maryland Infants and Toddlers Program/Office for Children, Youth, and Families has designated the Consolidated Local Implementation Grant as the single grant mechanism through which local agencies will receive funding for early intervention services from the following federal sources:





Part H of the Individuals with Disabilities Education Act (IDEA): \$1,048,460 Part B of the Individuals with Disabilities Education Act (IDEA): \$573,031 I. II.

III.

Chapter 1 (Handicapped) of the Education Consolidation and Improvement Act: \$1,524,915

Carry over of unexpended Part H funds from the previous year: 260,681 IV.

CLIG for 1991-92

COUNTY	FUNDS AWARDED	FUNDS EXPENDED
Allegany	\$67,192.00	\$48,758.77
Anne Arundel	\$287 <i>,</i> 962.00	\$88,670.67
Baltimore City*	\$584 <i>,</i> 472.01	\$270,453.03
Baltimore County*	\$281,357.90	\$238,492.26
Calvert*	\$45,259.00	\$32,249.71
Caroline**	\$29,589.00	\$29,376.00
Carroll	\$84,611.00	\$72,463.28
Cecil*	\$71,913.30	\$57,466.32
Charles*	\$94,916.00	\$74,363.84
Dorchester**	\$45,406.00	\$37,233.51
Frederick*	\$86,047.38	\$71,458.48
Garrett	\$29,954.00	\$29,965.00
Harford*	\$124,105.83	\$90,758.62
Howard*	\$146,135.75	\$114,196.64
Kent**	\$22,256.00	\$18,114.00
Montgomery	\$402,064.00	\$55,281.03
Prince George's*	\$614,847.00	\$459,873.00
Queen Anne's**	\$27,842.00	\$23,442.19
St. Mary's*	\$76,169.00	\$76,169.00
Somerset	\$37,611.00	\$17,276.17
Talbot**	\$78,192.00	\$70,977.00
Washington	\$73,948.00	\$68,885.27
Wicomico*	\$59,042.05	\$44,944.30
Worcester	\$36,138.00	\$20,818.60
Total	\$3,407,030.22	\$2,111,686.69

^{*}Includes carry over 1990-91 **Mid-Shore



Demonstration Projects and Models of Significance

These projects include grants of Part H funds to public and private providers and are intended to enhance the early intervention system in Maryland. The projects are briefly described under the Program Report section.

Organization Maryland Rehabilitation Center	Title Center for Technology and Human Disabilities	Amount \$69,222
Kennedy Kreiger Institute	New Vision Parent Training	\$10,300
Baltimore City Health Department	Reaching Families Early Hospital based Outreach	\$158,000
Coordinating Center for Home and Community Care	Coordination of IFSPs through the Medicaid Waiver	\$21,780
Baltimore City Health Department	Friends of the Family Family Support Center Service Coordination	\$61,528
Total		\$320,830



Interagency Funds

These funds are contributed by The Maryland State Department of Education and the Department of Human Resources to enhance the early intervention system in Maryland.

Recipient Baltimore County Department of Social Services	Title Case Management	Amount \$25,000
Montgomery County Department of Social Services	Case Management	\$25,000
Frederick County Public Schools	Year-Round Services	\$10,000
Caroline County	Year-Round Services	\$5,857
Kent County Health Department	Year-Round Services	\$7,268
Midshore Council for Children, Youth, and Families	EI Services & Coordination	\$1,878
Total		\$75,000

