**Part C Child Count & Settings Data Notes**

**2014-15 Reporting Year**

# Alabama

Alabama does not serve children under the age of three and "at risk" of having substantial delays if early intervention services are not provided.

# Alaska

Alaska Part C does not serve at risk children.

# Arkansas

Section A: Birth through 2 Total by Home: There was an increase in the number of children served birth through 2 in the home, due to more providers choosing to serve children in their natural environments.

Section A: Birth Through 2 totals by Community: There was a decrease in the number of children receiving services in the community setting, due to the fact that some providers ceased to be First Connections providers because they are unable to support servicing children in their natural environments. The Division of Developmental Disabilities Services of the Arkansas Department of Human Services offers services to children birth through age five through a system of Developmental Day Treatment Centers (DDTCS) specifically designed for children with disabilities. Effective July 31, 2013, these centers ceased to be First Connections (Part C) providers.

Section A: Birth through 2 Total by Other Setting: There was a decrease in the number of children receiving services in the other settings because some providers ceased to be First Connections providers because they are unable to support servicing children in their natural environments. The Division of Developmental Disabilities Services of the Arkansas Department of Human Services offers services to children birth through age five through a system of Developmental Day Treatment Centers (DDTCS) specifically designed for children with disabilities. Effective July 31, 2013, these centers ceased to be First Connections (Part C) providers.

Section A: Total Birth to 1: There was a decrease in the number of children getting services in the birth to 1 age group. This is due to the fact that some providers have ceased to be First Connections providers because they are unable to support servicing children in their natural environments. The Division of Developmental Disabilities Services of the Arkansas Department of Human Services offers services to children birth through age five through a system of Developmental Day Treatment Centers (DDTCS) specifically designed for children with disabilities. Effective July 31, 2013, these centers ceased to be First Connections (Part C) providers.

Section A: Totals 1 to 2: There was a decrease in the number of children receiving services in the 1 to 2 category is due to the fact that some providers have ceased to be First Connections providers because they are unable to support servicing children in their natural environments. The Division of Developmental Disabilities Services of the Arkansas Department of Human Services offers services to children birth through age five through a system of Developmental Day Treatment Centers (DDTCS) specifically designed for children with disabilities. Effective July 31, 2013, these centers ceased to be First Connections (Part C) providers.

Section A: Totals 2 to 3: There was a decrease in the number of children receiving services in the age 2 to 3 category because some providers have ceased to be First Connections providers because they are unable to support servicing children in their natural environments. The Division of Developmental Disabilities Services of the Arkansas Department of Human Services offers services to children birth through age five through a system of Developmental Day Treatment Centers (DDTCS) specifically designed for children with disabilities. Effective July 31, 2013, these centers ceased to be First Connections (Part C) providers.

# California

California does not provide Part C Service to children age three and older.

Beginning in FFY 2014/2015, California will begin to serve At High Risk Children. Service to At High Risk Children began in January 2015, after data was collected during the October 1, 2014 and December 1, 2014 data collection count date for the Child Count submission, therefore, California has no reportable At High Risk data for the fiscal year 2014/2015.

# Colorado

Change experienced in number of birth - 2 served in Community-Based Setting -31 (37.8%) - The two largest Early Intervention programs in Colorado account for -28 while other programs accounted for the remaining -3 Both of the largest programs in Colorado engaged in provider recruiting activities to serve the needs of families who required EI services during evening and weekend hours. These recruiting efforts were successful so that the number of infants and toddlers who were served outside of their home.

# Connecticut

The one "Other" is a Hospital.

# District of Columbia

The District continued to increase the number of children and families participating in Part C services. The increase in 2014-15 was greater than in past years and reflects the increases in all three of the categories above. The two reasons for this rapid rise in participation are:

1. Change in eligibility criteria – in July 2013 the eligibility criteria changed from 50% delay in one or more areas, to 50% delay in one or more areas or 25% delay in two or more areas. The resulting increase in the number of children receiving services was not accurately reflected in the 2013-14 child count as the change was only in effect for 5 months when the count was completed.

2. Elimination of family cost share – As of July 2013 the District of Columbia no longer charges family fees (based on a sliding scale). This has increased the total number of families receiving Part C services.

# Guam

Guam Part C provides services for infants and toddlers birth through 2 years of age. Age group and setting of children ages 3 or older is not applicable to Guam Part C.

# Indiana

Indiana attributes the year to year changes as follows:

Section A Total by Home: The data reflected for this reporting period appears to reflect the historic trend of location of service. At this time, the program has not observed any trends that are of concern. Indiana will continue to monitor the number of children served in the home.

Section A Total by Community: This location category saw growth consistent with the overall growth of the children in the program. Providers are encouraged to explore the natural environment/community setting where services may occur to support everyday activities. At this time, the program has not observed any trends that are of concern. Indiana will continue to monitor the number of children served in the community.

Section A Total by Other Setting: The program will continue to monitor the use of this category of service location. While the number of services delivered in this location is small, the increase will be monitored to ensure that data program integrity is met.

Section A Total Birth to 1: Compared to census growth, the overall increase of children between year one and two is overall quite small. Indiana typically experiences an overall smaller percentage of birth to 1 children served when compared to the other age groups and this appears to be the continued trend. While there is some growth compared to the previous year, there are no observed trends of concern. Indiana continues to also monitor the quality of eligibility data.

Section A Total 1-2: Compared to census growth, the overall increase of children between year one and two is overall quite small. While there is some growth compared to previous years, there are no observed trends of concern. Indiana continues to also monitor the quality of eligibility data.

Section A Total 2-3: Compared to census growth, the overall increase of children between year one and two is overall quite small. Indiana typically experiences an overall higher percentage of this age group being served when compared to the younger age groups and this appears to be the continued trend. While there is some growth compared to previous years, there are no observed trends of concern. Indiana continues to also monitor the quality of eligibility data.

# Kansas

Kansas Part C has elected not to serve children under age three and at risk of having substantial delays.

# Kentucky

The Year to Year Comparison indicated significant differences in child count between the 2013-14 and 2014-15 counts. The increase in the category Birth through 2 total by home for years 2-3 was due to intense focus by the Points of Entry on child find. All Points of Entry implemented a state-directed corrective action plan because of the inability to meet the State Performance Plan targets for participation.

The emphasis on provider recruitment is the main reason for fewer children being served in other settings. Previously, providers of physical therapy and, in some locations, speech language services were not readily available to serve children in natural environments. Therefore, services were provided in special purpose clinics. The 2014-15 count reflects the results of aggressive provider recruitment.

As stated above, the child find efforts in 2014-15 resulted in increases for the total birth to 1, 1 to 2 and 2-3 age groups. The cumulative count also reflects the increased numbers.

# Maryland

Maryland changed the federal collection date from the last Friday in October to October 1st on February 14, 2014. Maryland did not want to report on duplicate children that were also reported on the cumulative data from October 27, 2012 to October 25, 2013.

# Massachusetts

Children included under "Other Setting" have the following as their primary setting: EI-only child group for 21 (46.7%) children, center-individual service for 16 (35.6%) children and parent group for 8 (17.8%) children. The increase in the number of children under community-based setting and decrease of children under other setting is due to a change in methodology of reporting. Massachsuetts is now able to capture Community-based vs. EI-only child group services on the IFSP. Previously service delivery information was used which oftentimes resulted in reporting a community child group as an EI-only group if community children did not join the group for the session.

The increase in the number of children under 2 years of age is due to the continued effect on an increase in younger children being deemed eligible under the BDI-2, the only eligibility and assessment tool to be used by EI programs as of January 2012.

# Michigan

Michigan Part C does not serve children ages 3-5 and does not serve At-Risk children. Data was received from ALL local districts. New data system is still under development. The two smaller Setting options (Community Based and Other) both increased, as the larger category (Home) decreased. The overall Indicator 2 value dipped slightly from 96.3% to 95.0%. We understand that districts are serving children in a wider variety of settings, and will continue to assist them with the definitions.

# Missouri

Missouri state regulations changes that went into effect 3/30/2014 allow for Part C extension for children turning age 3 on April 1 to August 15. The extension period ends when schools start in the fall; therefore no children, ages 3 or older, will have an IFSP in place on the December 1 count date.

# Montana

Data analysis was performed by the seven early intervention providers contracted by the State of Montana to provide early intervention supports and services regionally. A number of findings were discovered:

* Agencies **Hi-Line Home Programs and Family Outreach** did not submit data for children age2 to 3 for Year 3. **Hi-Line** submitted clarifying data to include 19 children and **Family Outreach** submitted clarifying data to include 86 children in that specific category.
* **Child Development Center (CDC)** upon further analysis determined all data attributed to their agency in Year 2 was incorrect. They submitted clarifying data noting their total number of infants and toddlers served was 169 (17 children age birth to 1; 37 children age 1 to 2; and 115 children age 2 to 3).

These items alone paint a much different data picture for Montana showing decreases in the number of children served in the two age categories: birth to 1 and 2 to 3. The settings of services are in keeping with Montana’s focus to serve children in their most natural environments. Beginning November 2015, early intervention providers will no longer submit paper child count data. Rather this information will come directly from Montana’s database for IFSPs and Outcomes data, the EI Module.

Agencies **STEP, DEAP, QLC,** and **ECI** performed analysis of their year to year data. **STEP** noted their current child count at 71 which is consistent with their quarterly child count reporting. **DEAP** documented an increase in number of children exiting Part C services as well as for children who were referred to Part C services but did not complete the referral process because they moved out of the area. This is linked to the fluctuation in employment opportunities in the Bakken and the railroad. Families brought to the region due to the oil boom are moving out of the area as oil prices decrease and Burlington Northern Santa Fe railroad moved their based of operations. **ECI** reported their child count numbers vary from month to month with trends indicating counts increase in April steadily through September and then begin a decline in October. Slight increases begin again in January building to April. The child counts range from 104 to 123. **QLC** noted that Montana’s 0-5 population in 5 of the 9 counties served by this agency decreased more than 10% since 2010. The constant turnover of social workers in Child Protective Services Division has had a noticeable effect on referrals from that program. They continue to participate in Child Protective Teams on a regular basis in all areas to help with this problem. Referrals from daycare providers decreased and **QLC** recognizes their efforts must be increased.

# Nebraska

In Nebraska a child and family is eligible for Part C services from the date of diagnosis until August 31 following the child’s third birthday. Therefore, children ages 4 and 5 are served under Part B.

2014-2015: Over the past several years extensive child find efforts have targeted hospitals, NICUs and pediatricians to increase referrals in the newborn population.

# New York

New York does not serve children ages 3 or older. However, under certain circumstances, children ages 3 or older are allowed to remain in the Part C program until the effective date of their CPSE. The numbers reported exclude 518 children over age three who were enrolled in the NY Early Intervention Program on October 1, 2013. New York does not serve at-risk children. The cumulative number of children enrolled in the New York State Early Intervention Program excludes 13,405 children who turned three before the beginning of the period, or who received their IFSPs after their third birthdays.

# South Dakota

Section A – Birth through 2 total by Community. Increase in concerns for safety in home and large number of families with both parents working; IFSP teams pursue natural environments where families routinely gather.

Section A – Birth through 2 by Other Settings – Technical Assistance and clarification was provided to service coordinators on definition of Other Settings.

# Virginia

The year-to-year changes in the percentages of children served in community and other settings reflects a change in how the Virginia Department of Education reported the service setting for 2-year-olds receiving FAPE through local school divisions.

This submission includes 998 children who receive FAPE from the Virginia Department of Education.

# West Virginia

This data note is for WV Child Count and Settings data, year 2014-2015. WV data was flagged for an increase above the 20/20 threshold for the categories of “Section A- Birth through 2 Total by Community” and “Section D- Total Birth to 1.” WV has been experiencing an increase in overall child count for the last several years. Increased use of developmental screening and other improvements in child find activities have played a huge role in these increases. Increases can be seen in almost all of the categories of the child count/ settings table. We feel the larger increases in these particular sections are random and/or could also seem exaggerated due to the small number of children included in these categories.

# Wisconsin

The main contributing factor to has been continuing efforts by the Milwaukee County Birth to 3 Program, the state’s largest county, to: identify root causes related to the provision of services in a setting other than the child’s natural environment, provide technical assistance to provider agencies to improve the percent of services provided in a child’s natural environment, implement evidence-based practices that emphasize provision of services in contextualized settings, and review data to improve the accuracy of documentation of service location.