

The “Method” of Delivering Early Intervention Services: Using consultation and trans-disciplinary teams for effective family support

Katrina Bush, M.Ed., EIS
ODMRDD

ODH Leadership Conference
May 13, 2008 and
OACBMRDD Spring Convention
May 22, 2008

An examination of the federal and state requirements for the provision of early intervention services ~~~~

- Provider roles and responsibilities
- Terminology
- Research, Resources and National Models
- The linear flow from evaluation/assessment through IFSP development and service delivery

Federal and National

IDEA, Part C regulations specify how early intervention services are provided

Sec. 303.12 Early intervention services.

(a) General. As used in this part, early intervention services means services that--

- (1) Are designed to meet the developmental needs of each child eligible under this part and the needs of the family related to enhancing the child's development;
- (2) Are selected in collaboration with the parents;

(c) General role of service providers. To the extent appropriate, service providers in each area of early intervention....are responsible for --

- (1) Consulting with parents, other service providers, and representatives of appropriate community agencies to ensure the effective provision of services in that area;
- (2) Training parents and others regarding the provision of those services; and
- (3) Participating in the multidisciplinary team's assessment of a child and the child's family, and in the development of integrated goals and outcomes for the individualized family service plan.

In addition, requirements for

- Parent as key member of the team,
- Use of **evidence based practices**,
- Services in natural environments.

Nationwide, Early intervention and the mechanisms for providing quality services are being examined, researched and findings shared with the field.

Ohio

- Ohio Department of Health:
 - lead agency for Help Me Grow
 - partners with other state agencies
- Strong county governance system
- Part C requirements for a “state wide” system

See www.ohiohelpmegrow.org for HMG rules and policies.

Providers within the early intervention system

Types of Early Intervention services are listed in Part C of IDEA regulations

(<http://www.nectac.org/idea/303regs.asp>)

and ODH Policy

(http://www.ohiohelpmegrow.org/ASSETS/0E5F8AD394834D3C84159FED3C2C74C9/EL_SOP.pdf)

Terminology in our world: the “words” impact services and guide practice

- Rehabilitative (focus on the “re-”)
- Habilitative (often used in provision of waiver services; also associated with now defunct CAFS)
- Development/developmental
- Parent education (e.g. defined in Ohio IFSP guidance document, page 36

<http://www.ohiohelpmegrow.org/ASSETS/5104E26C530E4C89BB5C1666FCE46587/IFSPGuidance.pdf>

Developmental skill acquisition

“Research Supporting Developmentally Appropriate Practice

It has been well documented that play is an essential component to early cognitive, social, and language development (Hunt, 1961; Piaget, 1962; Vygotsky, 1962). Infants and toddlers explore and engage their environments using all of their sensory systems. Every day of the young child's life presents new developmental challenges and new responses by family members and caregivers.

Interventions that incorporate developmentally appropriate practices, defined as age appropriate and individually appropriate (Bredekamp, 1991), have the capability of effectively fostering social interactions between caregivers and young children with disabilities (Mahoney, Robinson, & Powell, 1992). A goal of early intervention is to foster the child's acquisition and use of developmental skills and processes (Linder, 1993). Developmentally appropriate practice incorporates enjoyable play activities, thereby encouraging attention to, and retention of, skills gained in play.”

(Colorado Supports and Services in every day environs doc (Edelman, 1999)
<http://www.earlychildhoodconnections.org/files/Guidebook.pdf>)

Team models of Service Delivery

Tremendous amount of research nationally on “team models:”

- Consultation;
- Coaching: defined by Rush and Sheldon as “an adult learning strategy that is used to build the capacity of a parent or colleague to improve existing abilities, develop new skills, and gain a deeper understanding of his or her practices for use in current and future situations.” (Brief CASE, 1(1), 2008) <http://www.fippcase.org>;
- Primary Service Provider (PSP): see work of Robin McWilliam (keynote) and Colorado EI system at http://www.earlychildhoodconnections.org/files/Transdis_PP_TN.pdf;
- Multi-, Inter-, and Trans- Disciplinary.

Multidisciplinary, Interdisciplinary and Transdisciplinary

see definitions found in Tennessee's EI Service Coordination training:
http://tennessee.gov/education/speced/TEIS/training/module5/1st_2_sections_Module_5.pdf

Multidisciplinary

In much of the literature, a multidisciplinary team is defined as professionals and individuals working independently of each other and interacting minimally with other team members. Each member of the team, or each discipline, performs a separate assessment and writes an individual report, including discipline specific goals. Treatment is then performed in an isolated setting for remediation of the weaknesses noted during the assessment. McGonigel, Woodruff, & Roszmann-Millican, 1994; Rush & Shelden, 1996

Rush, D. and Shelden, M. (2001). Available:
<http://www.coachinginearlychildhood.org/webmodules/teaming/teammodels.php>

When a multidisciplinary team functions in this way, parents often receive separate and fragmented reports, that at times may not be in agreement with each other. This model can often result in overlaps and gaps in services and fails to see the child as a whole.

Rush, D. and Shelden, M. (2001). Available:
<http://www.coachinginearlychildhood.org/>

Multidisciplinary, Interdisciplinary and Transdisciplinary

(continued)

see definitions found in Tennessee's EI Service Coordination training:
http://tennessee.gov/education/speced/TEIS/training/module5/1st_2_sections_Module_5.pdf

Transdisciplinary models evolved as team members working with children came to realize that children do not perform isolated skills, irrespective of function or environment.

Rainforth, York, & Macdonald, 1992

Members of the transdisciplinary team must implement a high degree of collaboration and work together to meet the needs of a child, family, and other care providers. This means working together in conducting assessments, program planning, developing goals, and implementing the educational plan.

Rush & Shelden, 1996

As defined in the federal regulations, the term multidisciplinary means "the involvement of two or more disciplines or professions in the provision of integrated and coordinated services, including evaluation and assessment activities." Federal Register, July 1, 1994, p. 114

This definition of multidisciplinary is more in line with recommended practice in that team members work together throughout the evaluation and assessment process. The transdisciplinary model takes this one step further to include members collaborating and working together during intervention.

(Tennessee's EI Service Coordination training)

Remember.....

IDEA, Part C regulations specifies how early intervention services are provided
Sec. 303.12 Early intervention services.

- (a) General. As used in this part, early intervention services means services that--
- (1) Are designed to meet the **developmental needs of each child** eligible under this part and the **needs of the family** related to enhancing the child's development;
 - (2) Are selected in **collaboration with the parents**;
- (c) General role of service providers. To the extent appropriate, service providers in each area of early intervention....are responsible for --
- (1) **Consulting** with parents, other service providers, and representatives of appropriate community agencies to ensure the effective provision of services in that area;
 - (2) **Training parents and others** regarding the provision of those services; and
 - (3) Participating in the **multidisciplinary team's** assessment of a child and the child's family, and in the development of integrated goals and outcomes for the individualized family service plan.

In addition, requirements for

- Parent as key member of the team,
- Use of evidence based practices,
- Services in natural environments.

It all starts with the

EVALUATION TEAM!

Whether the team that evaluates is the same team that provides services, the principles of team evaluation and team decisions about strengths, needs and interventions apply.

Part C evaluation/assessment

- ODH policy “Evaluation and Assessment for Part C” specifies the many components that must be included in the process and the report, including
 - Summary of findings including strengths and needs in each developmental domain and vision/hearing status and screenings;
 - Information obtained from the parents (including child’s functional abilities).

This report can be used as a starting point for development of IFSP outcomes, when:

- Team uses “needs” language that is plain, everyday language;
- Team makes recommendations for functional outcomes that can be achieved in 180 days or less;
- Team makes outcome recommendations that are built on the child and family strengths as well as the parent resources, priorities, and concerns;
- Team recommends referrals to specialized service providers as needed for more in depth assessment(s).

- IDEA, Part C 303.322 (2) Assessment
....identify
 - “(i) The child’s unique strengths and needs and the services appropriate to meet those needs; and
 - (ii) The resources, priorities, and concerns of the family and the supports and services necessary to enhance the family’s capacity to meet the developmental needs of their infant or toddler with a disability.”

- The team, which includes the parent, uses all of this information to develop IFSP outcomes.
 - **Evaluation recommendations** that are written to encompass functional outcomes (or “situation specific experiences”*) within the context of the family, assist the IFSP team (IFSP policy 2e) in determining what
 - services and supports are needed to meet the outcome,
 - what the best methodology is to meet that outcome,
 - what frequency, intensity and location is needed to meet that outcome.

* CASE in Point: Characteristics of a PC Approach to teaming in Early Childhood Programs” March 2007: http://www.fippcase.org/caseinpoint/caseinpoint_vol3_no1.pdf

IFSP

- Federal and state regulations dictate the inclusion in the IFSP of:
 - “specific early intervention services necessary to meet the unique needs of the child and the family to achieve the outcomes....including –
the frequency, intensity, and method of delivering the services.”
 - “Frequency and intensity mean the number of days or sessions that a service will be provided, the length of time the service is provided and whether the service is provided on an individual or group basis.
 - Method means how a service is provided.” (303.344)

IFSP

The TEAM is responsible for determining what frequency, intensity and METHOD will be used to achieve IFSP outcomes.

The team includes.....?

- Ohio IFSP, Section VII (Services and Supports) defines “consult” as:
 - “primary focus is providing information and developing strategies with a caregiver or another team member.”

[see Handout #1, IFSP Section VII and Feb. 2007 ODH IFSP Guidance Document, Pg. 15]

- Providers of specialized services tend to use a variety of terms to describe “methodology.”

[see Handout #2, Therapeutic Terminology for “Method” of service delivery]

Consultation

Consultation involves planning and dialogue, not just teaching; it is a collaborative process. It is often perceived to require “less time and resources” while actually the opposite is true; lots of time is needed to plan, meet, and continually assess.

Jane Case-Smith, Ph.D., OTRL, OSU

Early Intervention Service Providers

All professionals providing services through an IFSP need to provide those services in accordance with Part C of IDEA requirements.

[see Handout #3, Therapeutic services within the guidelines of Part C of IDEA]

Consulting and coaching

- Many states and lead agencies for both Parts C and B of IDEA (early intervention and preschool special education) are examining mechanisms to meet the federal requirements for
 - Natural environments and least restrictive environments,
 - Team approaches to interventions.

[see Handout #4, Excerpts from Project DIRECT website]

Timely Receipt of Services

- Requirements for TRS (30 days from identified need and signatures on IFSP) is one reason that Ohio has been closely examining “method,” “frequency and intensity.”

Our Goal

Maximize quality, evidence based early intervention services that support families in promoting their child’s optimal development and to facilitate the child’s participation in family and community activities and settings, with family members treated as skilled allies.

Working toward our goal...

- Remembering that the words we use matter.
- Defining the words we use.
- Defining the terminology in a way that recognizes potential restrictions on the specialized service practice or billing.
- Using the words and definitions consistently
 - And across systems.

Working toward our goal...

- Using the words in ways that meets the intent of early intervention requirements.
- Studying the research, literature and
 - Being a part of the data collecting to show evidence based practices
- Engaging in dialogue with state and local policy makers

“Providers will come and go in the life of a child. The family is the constant throughout the child’s lifespan. From the earliest stages of a child’s life, the family must learn to be effective observers, supporters, teachers, and advocates. Family members want to be treated and supported as skilled allies.

One of the greatest heartaches for a family – any family – is when their child is excluded. One of the greatest gifts that service providers can offer is helping a child participate in everyday life.”

Colorado Supports and Services in everyday environments (Edelman, 1999)
<http://www.earlychildhoodconnections.org/files/Guidebook.pdf>

Questions and discussion.....

For a copy of this presentation, email:

Katrina.bush@dmr.state.oh.us

Subject line: “EI Method power point”