



Early Steps State Plan

2022–2023

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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.

Values

Innovation: We search for creative solutions and manage resources wisely.

Collaboration: We use teamwork to achieve common goals and solve problems.

Accountability: We perform with integrity and respect.

Responsiveness: We achieve our mission by serving our customers and engaging our partners.

Excellence: We promote quality outcomes through learning and continuous performance improvement.

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Program Overview

Part C of the Individuals with Disabilities Education Act (IDEA) is a federal law creating a federal-state partnership of early intervention services for infants and toddlers, ages birth through thirty-six months, with a developmental disability, developmental delay, or a risk for developmental delay. Section 391.308, Florida Statutes (F.S.), directs the Department of Health (Department) to implement and administer Part C of the IDEA, which is known as the Early Steps Program. As Florida's lead agency for Part C of the IDEA, the Department is responsible for program oversight, which includes, but is not limited to, administrative functions, federal reporting, federal grant management, fiscal accountability, and monitoring of contract compliance.

Services are provided via contracts with programs in 15 geographic regions of the state. Local programs, referred to as Local Early Steps (LES), provide services directly or through subcontracts with community providers. Services include developmental monitoring, screening, evaluation, service coordination, early intervention sessions, therapies, assistive technology, audiology and vision services, transition activities to support the child and family after exiting the Early Steps Program, and other individualized services necessary to meet the child and family's needs.

Services are provided in a variety of home and community settings to promote family and caregiver confidence and competence to meet the child's individual developmental needs and identified outcomes. The intent of early intervention services is to reduce or eliminate developmental delays in eligible infants and toddlers in the early years and enhance future education and life success.

Statutory Authority

Annually, the Early Steps Program submits a report outlining the program performance to the Governor, President of the Senate, the Speaker of the House of Representatives, and the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). Additionally, Section 391.308(2)(c), F.S., requires the Early Steps Program to also develop a state plan annually. Information included in the December 2021 Annual Report serves as the foundation for this Early Steps Program State Plan. The state plan must:

- Assess the need for early intervention services.
- Evaluate the extent of the statewide need that is met by the Early Steps Program.

- Identify barriers to fully meeting the need.
- Recommend specific action steps to improve program performance.

The state plan must be developed through an inclusive process that involves families, LES offices, health care providers, and other stakeholders. Stakeholder involvement is important to ensure the Early Steps Program serves all potentially eligible infants and toddlers, implements a high-quality continuous improvement system, provides evidence-based practices that improve child and family outcomes, and is managed based on performance and fiscal data.

State Plan Goals

An analysis of Florida's performance as outlined in state and federal reports resulted in the goals included in this plan. Stakeholder workgroups were convened for each goal based on subject-matter expertise. Membership includes parents, LES Program administration and staff, providers, FICCIT members, Institutes of Higher Education staff members, local and state partners, state office staff, and other stakeholders. Two of the stakeholder workgroups completed a self-assessment this year which was developed by technical assistance centers funded by the United States Department of Education (U.S. ED) related to the goal's subject-matter. The self-assessments assisted each stakeholder workgroup in evaluating the current system, identifying areas for improvement, and developing more effective and efficient systems to implement evidence-based practices. Based on the results of the self-assessment and expertise of members, the statewide need, barriers, and action steps to improve performance over the forthcoming year were identified as outlined below. The remaining two workgroups plan to complete the self-assessment in the coming year. These stakeholder groups also contributed in setting Florida's goals for the State Performance Plan/Annual Performance Report (SPP/APR) indicator standards.

GOAL 1: Monitor and track the population referred to and served by the Early Steps Program, including infants and toddlers at risk of developmental delay.

What is the extent of the statewide need met by the Early Steps Program?

Children are referred to the Early Steps Program from various sources, including parents, physicians, childcare programs, community agencies, and hospital neonatal intensive care units. LES Programs educate primary referral sources on the program's purpose, eligibility criteria, services provided, and the referral process. Referral sources are captured in the Early

Steps data system. In fiscal year (FY) 2020-2021, 35,360 children were referred to the Early Steps Program.

Eligibility for Part C of the IDEA is determined using each state's definition of developmental delay and includes children with established conditions with a high probability of resulting in developmental delay. States have the option of including infants and toddlers who are at risk of developmental delay in the eligibility criteria. Section 391.308(3), F.S. requires the Early Steps Program to serve infants and toddlers with a developmental delay or a physical or mental/medical condition known to create a risk of developmental delay.

What are the barriers to fully meeting the need?

Part C of the IDEA requires that infants and toddlers who may need early intervention services are identified, located, and evaluated as early as possible. This is referred to as Child Find. The Early Steps Program must report Child Find data to the U.S. ED annually. This includes data on the percentage of the total population of infants, ages birth to one, in the state served by the program. Florida's target for this indicator is 0.74% of the total population of infants ages birth to one, enrolled in Early Steps, and the actual performance of the state is 0.67% of the total population of infants ages birth to one enrolled in Early Steps.

States also report to the U.S. ED on the percentage of the total population of infants and toddlers, ages birth to three, in the state served by the program. During FY 2020-2021, the target for this age group, birth to three, is 2.85%, and the actual performance of the state is 2.35%. For FY 2020-2021, Florida Part C experienced a 3% decrease in the percentage of children determined eligible compared to FY 2019-2020. The decline is attributed to the effects of the pandemic throughout the fiscal year, which caused families to delay referral and evaluation.

What were the action steps taken in FY 2021-2022 to address the barriers and improve program performance?

State and local entities were educated on the Early Steps Program's eligibility criteria to ensure appropriate referrals for potentially eligible infants and toddlers. This included the following activities:

- Reviewed LES baseline data to identify the number of children found eligible and ineligible for the Early Steps Program for each referral source.
- Developed a comprehensive marketing plan to increase public awareness materials.

- Revitalized the Early Steps website with a focus on family-friendly materials and ease of use.
- Participated in a Joint Referral Collaboration and the Joint Inclusion Collaboration with various state and local programs to enhance coordination among referral agencies.

There were approximately 2,411 more referrals in FY 2020-2021 than the previous year. Physicians, families, community agencies and Neonatal Intensive Care Units (NICU) have been the top referral sources for the past fiscal year. Data were collected to monitor referral and eligibility patterns and trends for referred infants and toddlers, especially those at risk of developmental delay, to identify and plan to meet future needs. The following data were collected and analyzed:

- Referral patterns for LES Programs between FY 2019-2020 and FY 2020-2021.
- Stakeholder processes for serving infants and toddlers eligible for the Early Steps Program.
- LES Program processes for linking infants and toddler who are not eligible for the Early Steps Program with community organizations.

What are the action steps planned in FY 2022-2023 to improve program performance related to Goal 1?

- 1.1** Analyze LES baseline data and develop strategies for increasing eligible referrals.
- 1.2** Establish a Part C Child Find Coordinator position at each LES. This member will work to ensure infants and toddlers in each community who are eligible for services are identified, located, and evaluated for early intervention services.
- 1.3** Establish a learning community for Child Find Coordinators to share strategies for increasing referrals for children eligible for the Early Steps Program.
- 1.4** Coordinate efforts between state, local, and regional Joint Referral Collaborative teams to build relationships between local referral sources and share eligibility criteria information.

GOAL 2: Ensure compliance with state and federal requirements and indicators through development of an accountability system that strengthens local and state resources and builds capacity.

What is the extent of the statewide need met by the Early Steps Program?

The U.S. ED has an accountability system under the IDEA, known as Results Driven Accountability (RDA). The purpose of RDA is to ensure that states meet IDEA requirements as well as improve results for children and families. RDA requires the use of quantifiable and qualitative indicators to measure performance for areas designated as priority areas by the U.S. ED. RDA requires that 100% of evaluations and Individualized Family Support Plans (IFSPs) are completed within 45 days of the date a child is referred to the Early Steps Program. In FY 2020-2021, 98% of infants and toddlers received an evaluation and IFSP within 45 days of being referred. This represents a seven percent increase in performance from the previous year.

Part C of the IDEA requires that early intervention services are initiated in a timely manner, within 30 days after the family consents to the services. During FY 2020-2021, 97% of children received services within 30 days after the family consented to the services. This represents a seven percent increase in performance from the previous year. An additional IDEA requirement is that steps and services for transition planning be developed at least 90 days prior to a child's third birthday. In FY 2020-2021, 98% of children received a timely transition conference with activities and timelines for the appropriate Early Steps Program upon exit. This is a five percent increase from the previous year.

What are the barriers to fully meeting the need?

The Department monitors all LES Programs annually, including a review of child record documentation and information from the Early Steps data system. Performance improvement was achieved in all three compliance areas over the past year despite the effects of the pandemic. The use of telehealth services as an alternate option for providing services was a key component to the overall increase in performance. However, provider capacity issues continue to be a barrier. The Early Steps Program needs to assess the current provider network further to ensure an adequate number of providers are available for timely service provision.

What were the action steps taken in FY 2021-2022 to address the barriers and improve program performance?

Written practices and procedures from high performing LES Programs were collected to identify best practices and shared with LES Programs with low performance during focused technical assistance.

The Early Steps Program used a technical assistance framework to analyze trends and determine a tier-level of support provided to each LES Program. Targeted programs were provided an increased level of focused guidance and support.

What are the action steps planned in FY 2022-2023 to improve program performance related to Goal 2?

2.1 Initiate and implement technical assistance and monitoring components at the state and local level that address the federal and state regulations, with a focus on improving the efficiency, effectiveness, quality, performance, processes, capacities, and outcomes of the Early Steps Program.

2.2 Determine the LES Programs that have exemplary practices and those that require technical assistance related to meeting the 45-day, 30-day, and 90-day timelines and provide focused assistance to achieve and maintain 100% compliance.

GOAL 3: Increase the percentage of infants and toddlers demonstrating improved developmental outcomes upon exiting the Early Steps Program and the percentage of families reporting that participation in the Early Steps Program enhanced capacity and confidence to support the child's development and learning.

What is the extent of the statewide need met by the Early Steps Program?

The U.S. ED defines and provides formulas for reporting three child outcomes, including five progress categories for each of the child outcomes. States are required to measure and report the amount of progress each child makes from entry to exit from the Early Steps Program. Each state determines the method to assign eligible infants and toddlers to the progress categories. Historically, the Early Steps Program has used the data from the entry and exit administrations of the Battelle Developmental Inventory, 2nd Edition (BDI-2), a standardized, norm-referenced measure, to determine child progress. On December 1, 2020, at the recommendation of stakeholders, the Early Steps Program began implementation of the Child Outcomes Summary (COS) process for entry and exit assessment. The COS process

summarizes information from a variety of sources on a child's functioning in each of the three child outcome areas to determine a child's progress. For children receiving entry assessment prior to December 1, 2020, Early Steps continues to use data from entry and exit administrations of the BDI-2 to determine child progress to preserve data validity. If a child's entry score was determined by the BDI-2, the exit must also use the same methodology. Results from the COS and the BDI-2 are assigned to one of the five progress categories which results in the blended child outcomes data reported to the U.S. ED annually.

What are the barriers to fully meeting the need?

The BDI-2 scoring must be used for exit assessment if it was used for the entry measurement to preserve data validity. However, the BDI-2 is required to be completed in person with the child, and unfortunately much of this valuable data was unable to be collected due to the pandemic and telehealth practices. The data quality during this time will suffer with completeness concerns. The COS process is anticipated to better reflect child functioning and progress and does not require face-to-face assessment to assign a progress outcome. The BDI-2 measurement process will be phased out by November 30, 2023, at which point all children will receive a COS entry and exit to assess outcomes.

What were the action steps taken in FY 2021-2022 to address the barriers and improve program performance?

Stakeholders convened to review COS training materials and expressed concern that the national technical assistance materials were too broad and did not reflect Florida-specific needs. The Early Steps State Office researched and responded to these concerns with the procurement of a Technical Assistance Center to create supplemental materials to further enhance the COS trainings in the coming year. The following data table displays a comparison of the FY 2019-2020 results and FY 2020-2021 which reflects the data collection challenges from the BDI-2 due to the pandemic. Child outcome indicators are performance indicators and do not require 100% compliance; however, states must identify and achieve a statewide target.

Federal Indicator	FY 2019-2020 Early Steps Program Performance	FY 2020-2021 Early Steps Program Performance
Infants and toddlers demonstrate improved social/emotional skills at exit.	26%	26.3%
Infants and toddlers demonstrate typical social/emotional skills at exit.	50.7%	46%
Infants and toddlers demonstrate improved use of knowledge and skills at exit.	74.3%	68.6%
Infants and toddlers demonstrate typical use of knowledge and skills at exit.	47.9%	44.5%
Infants and toddlers demonstrate improved use of appropriate behaviors to meet needs at exit.	84.4%	73.6%
Infants and toddlers demonstrate typical use of appropriate behaviors to meet needs at exit.	87.7%	78.5%

What are the action steps planned in FY 2022-2023 to improve program performance related to Goal 3?

- 3.1** Continue statewide implementation of the COS process through a three-year phased approach.
- 3.2** Assist LES Programs in providing effective professional development to support implementation of the COS process.
- 3.3** Support local programs to develop and enhance quality assurance policies and procedures for child outcomes assessment and accountability.
- 3.4** Encourage LES Programs to develop and enhance processes to ensure families are centered in all aspects of Early Steps services.

GOAL 4: Implement the State Systemic Improvement Plan (SSIP) to increase the percentage of infants and toddlers who exit early intervention with an increased rate of growth in positive social emotional skills.

What is the extent of the statewide need met by the Early Steps Program?

The U.S. ED has implemented revisions to its RDA system under the IDEA, emphasizing improving child outcomes. The RDA system requires states to develop, implement, and evaluate a State Systemic Improvement Plan (SSIP) through the delivery of evidence-based practices in the provision of services to improve results for children with disabilities. Florida's SSIP aims to increase the percentage of infants and toddlers demonstrating improved social-

emotional skills at exit from the Early Steps Program. The activities embedded throughout the SSIP create the necessary infrastructure to ensure and sustain quality services, leading to improved child outcomes. This includes professional development for providers to ensure services are evidence-based and family-centered.

What are the barriers to fully meeting the need?

During FY 2020-2021, 26% of infants and toddlers served by the Early Steps Program demonstrated improved social-emotional skills at exit from the program. This is a decrease of one percent from the prior year, with significant effects resulting from service disruptions due to the pandemic. In addition, Florida's professional development caregiver coaching model is a multi-year implementation-phased approach. Implementation of the Florida Embedded Practices and Intervention with Caregivers (FL-EPIC) will not be available at all LES sites until FY 2022-2023. This model of professional development is intensive and takes time to build.

What were the action steps taken in FY 2021-2022 to address the barriers and improve program performance?

The partnership and contract with subject matter experts at the Anita Zucker Center at the University of Florida (UF) continued in FY 2021-2022. Through this partnership with UF, LES Programs continue implementing professional development strategies to improve the positive social-emotional outcomes of infants and toddlers who exit the Early Steps Program. As a result, three LES sites joined the prior nine sites for implementing evidence-based practices identified in the SSIP. In addition, UF has engaged in rigorous evaluation practices to scale up the implementation of the methods as demonstration and implementation sites expand. Efforts have included:

- Designing a sustainable professional development infrastructure that includes training, coaching, and infusing Division of Early Childhood (DEC) Recommended Practices.
- Testing and determining the feasibility of implementation strategies and practices.
- Building the foundation needed to ensure the scale-up of evidence-based practices across the state.

What are the action steps planned in FY 2022-2023 to improve program performance related to Goal 4?

- 4.1** Onboard the final three LES Programs to participate in the UF FL-EPIC SSIP Initiative.
- 4.2** Continue to work with LES sites who have implemented the evidenced-based FL-EPIC model to sustain and scale up the training of the LES providers.

4.3 Collaborate with UF to refresh and align Early Steps Program trainings with the newer Early Steps Professional Development framework.

Goal 5: Collect programmatic and fiscal data to support effective and efficient management of the Early Steps Program.

What is the extent of the statewide need met by the Early Steps Program?

The current Early Steps data system provides basic information for state and federal reporting; however, it does not capture the level of detail needed to monitor compliance with all federal, state, and local programmatic and fiscal requirements. The Early Steps Program relies on manual processes for identification, coordination, and allocation of available resources for early intervention services, including those from federal, state, local, and private sources. A modern data system is needed to enable the program to collect, report, and analyze state and local level data to improve program performance and make data-informed fiscal decisions.

What are the barriers to fully meeting the need?

The Early Steps Program is accountable to U.S. ED for programmatic and financial management of the Early Steps Program. The current data system does not collect key useful information for more effective program administration, policy implementation, and resource management for the Early Steps Program.

It is critical that the Early Steps Program increase capacity to identify children needing services, monitor the provision of services, track professional development activities, and improve outcomes for children and families. The Early Steps data system needs have the increased ability to collect valid and reliable data to ensure programmatic and fiscal accountability.

What were the action steps taken in FY 2021-2022 to address the barriers and improve program performance?

Following a procurement process to select a vendor, in 2019, the Early Steps Program established a contract with a vendor to design and implement a new high-capacity data system. Various challenges were faced throughout the life of this data system project. Due to the continued challenges, the Early Steps Program determined that the produced data system would not result in a viable solution nor meet the statewide needs. The Department terminated the relationship with the vendor on June 29, 2021. The Department has reinitiated the process

to procure a vendor that will successfully develop and implement a new Early Steps Administration System with the functionality to meet the needs of the Early Steps Program.

What are the action steps planned in FY 2022-2023 to improve program performance related to Goal 5?

5.1 Complete design and development of a robust Early Steps data system, working with the vendor and with stakeholder input, ensuring that the following major system components are included and fully functional:

- Case Management (Eligibility, Child Tracking, Transition)
- Program Management (Provider Management)
- Global Services (Reporting, Integration, Security)
- Audit Functions

5.2 Upon implementation of the new Early Steps data system, develop tools and a structure to accomplish the following using the system: project needs of the Early Steps Program, monitor programmatic and fiscal status, track compliance with federal and state requirements, and performance on child and family outcomes.

Conclusion

Early intervention helps families learn strategies to be the best teachers for infants and toddlers with developmental delays or disabilities. Services are evidence-based and support families to integrate intervention strategies into daily routines. Early intervention reduces the need for special education, improves developmental outcomes for infants and toddlers, and increases children's rate of growth.

The Early Steps Program will continue to convene workgroups with subject-matter expertise to evaluate the current system and identify action steps to increase performance on state and federal measures. The Early Steps Program remains committed to its continuous improvement process to ensure infants and toddlers with disabilities, developmental delays, and those at risk for delays, reach maximum potential.