



First Steps

*The Newsletter for
Indiana Early Intervention*



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Embracing change

Reflect on successes and set new goals

Dear Colleagues,

Change, regardless how it makes you feel, is inevitable and must be managed. It is how we embrace the change as it comes that will greatly affect the outcome. The First Steps system has managed a number of changes over the last several years and will continue to for some time in hopes that children, families and personnel receive the positive impact of these efforts.

We've implemented a new [make-up session policy](#); kicked off a state-wide community of practice partnership with institutions of higher education to better align early intervention and early childhood special education college curriculum with system requirements around qualified personnel; and launched an exciting effort to modernize our data system. We look forward to working with Public Consulting Group and all early intervention stakeholders to design, develop and implement a comprehensive online case management, billing and claiming, and provider enrollment system.

Each year, the state First Steps team reflects on all of its successes and challenges and sets new goals for the coming year. This year, we took a hard look at our desired impact—specifically, what drives each of us to the work we do. This led to amending the First Steps mission, vision and values. These new statements better reflect the work we do for children and families each day and why we do it. May they serve as a guide to all as we move through 2020 and embrace whatever changes the year may bring.

Mission: To partner with Hoosier families whose young children are experiencing developmental delays and connect them with services that help them promote their child's development.

Vision: All Indiana families have a strong foundation to advocate for their infants and toddlers to grow and flourish to their highest potential.

Values:

- **Family-centered:** To support and enhance each family's capacity to promote their child's development.
- **Strengths-based:** To acknowledge families and children as fundamentally resourceful and resilient.
- **Relationship-based:** To embrace and promote the fact that children grow and learn in the context of positive relationships with caring adults.
- **Holistic:** To promote "whole child" development by recognizing the interconnectedness of physical, cognitive, social emotional and adaptive development.
- **Culturally competent:** To respect and be responsive to the cultures, beliefs, practices, strengths and needs of all families, children and individuals.
- **Routines-based:** To embed services and supports into a child and family's daily activities in their home or other community-based environments.
- **Individualized:** To adapt services and supports in response to the unique strengths and needs of each child and family.

*Happy New Year,
Christina*

Indiana's Early Intervention data system update

Public Consulting Group awarded new case management system

The First Steps state team and Public Consulting Group are pleased to announce that all negotiations have been approved and the vendor contract with PCG is now fully executed. This means that the information gathering process has begun and will continue through mid-April 2020.

In an effort to collect the necessary data to properly understand current policies and practices, seven learning sessions have been scheduled. These sessions will include roughly 100 participants representing stakeholders, partners and direct users of our system, such as System Points of Entry and agency directors and managers, assessment team members, service coordinators, ongoing providers and data managers.

In addition to the anticipated information gathering sessions, the state team will be scheduling visits to local offices around the state to interview personnel working directly with our present system to identify and understand existing business processes to best create a plan for our future programmatic needs. If you see this team at your local office, please introduce yourself and say hello. They are looking forward to their visits and chatting with many of you about your daily work.

We want to thank you in advance for your interest and participation in this incredible project. If you have any questions or comments regarding the early intervention data system, please [email First Steps](#).

ICC update The Interagency Coordinating Council members are First Steps stakeholders appointed by the governor. The role of the ICC and its subcommittees is to advise the First Steps office on the state's early intervention system. We believe that adopting a shared vision and shared goals is essential to working together to improve services and outcomes for the children and families we serve.

To learn more about the ICC, [click here to read the report to the governor](#) presented in November 2019.

All ICC meeting dates and minutes are posted on [the DDRS website](#).

2020 ICC meeting dates: **Jan. 8, March 11, May 13, July 8, Sept. 9, Nov. 4.**

All meetings are from 10 a.m. to 2:30 p.m. Eastern Time at:

Choices Coordinated Care Solutions
7941 Castleway Drive
Indianapolis, IN 46250

The 2020 United States Census

You count and our children count!

Did you know...

- ▶ That there has been a U.S. Census count taken every 10 years since 1790?
- ▶ The U.S. Census count data determines legislative district boundaries and the number of representatives in Congress?
- ▶ It determines how over 675 billion dollars in federal grants are disseminated to states and local governments?
- ▶ Children under 5 years old are often missed in the data?
- ▶ Support for hospitals, early intervention, early childhood development, child care, hospitals and food assistance is significantly impacted if newborn babies and young children are not counted?
- ▶ The funding for social services for families and young children are often determined by the data collected?

[Share this](#) with your colleagues and the families with whom you work and encourage people to participate in the 2020 U.S. Census. [Visit this site](#) for more information.



DDRS—First Steps Indiana statewide profile report

Reporting Period: 10/01/2018–09/30/2019

I. Population Information

Population (U.S. Census Bureau)	6,376,792
Population Growth Percentage (U.S. Census Bureau)	4.0%

II. Child Enrollment & Referral

	Number of Children	Percentage of Children
One-day Count w/ IFSP –0 to 1 year old	1,552	
One-day Count w/ IFSP –All Children	11,827	
Annual Count of Children w/ IFSP	23,065	
Annual Count of Children Served (regardless of IFSP)	26,667	
Average Age at Referral (months)	14	
New IFSP 04/01/2019 –06/30/2019	3,069	
Children with Referral to IFSP 45+ Days 04/01/2019–06/30/2019	742	

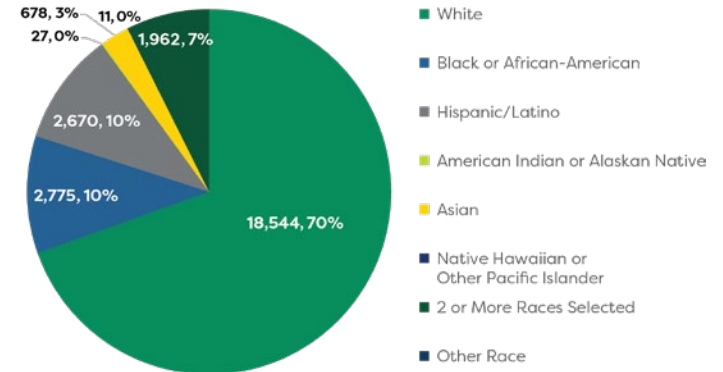
III. Exits

	Number of Children	Percentage of Children
Children Moving to Preschool Special Education	4,974	46%
Children Under 3, Services No Longer Needed	236	2%
Eligible Children Who Declined Services	1,264	12%

IV. Paid Services

	Number of Children	Percentage of Children
Children w/IFSP Served Primarily in the Natural Environment	22,946	99%
Total Amount Paid on Behalf of Children Served	\$43,318,728.96	
Average Paid on Behalf of Each Child Served	\$1,624.43	

V. Race Information



VI. Children Receiving Each Service Type

Service Type	Number of Children Served	Percent Receiving Service
Assistive Technology	187	1%
Audiology	1,039	4%
Developmental Therapy	14,380	54%
Health Services	0	0%
Interpreter Services	515	2%
Medical	0	0%
Nursing	0	0%
Nutrition	334	1%
Occupational Therapy	14,744	55%
Other Services	18	0%
Physical Therapy	13,669	51%
Psychology	195	1%
Social Work	30	0%
Speech Therapy	16,537	62%
Vision	0	0%

Source: First SideHatch Database

Understanding Part C federal indicators

Federal indicator 4: Family outcomes

In this issue of the newsletter, we will explore Federal Indicator 4: Family outcomes.

First, let's review the definition of an "outcome." The Early Childhood Technical Assistance Center describes an outcome as "a benefit experienced as a result of services and supports provided for a child or family. The fact that a service has been provided does not mean that a positive outcome has been achieved. Likewise, an outcome is not the same as satisfaction with the services received. The impact that services and supports have on the functioning of children and families constitutes the outcome" ([Outcomes FAQ](#)).

As part of the Annual Performance Report, we must identify the percentage of families who report that early intervention services have helped them:

- A. Know their rights
- B. Effectively communicate their child's needs
- C. Help their child develop and learn

In Indiana, we collect this information through the Family Outcomes Survey as part of the [Exit Summary form](#). The survey is designed to tell us how helpful First Steps has been to the family during their time in the program. The survey consists of 17 questions and is completed by families with children exiting or transitioning from the program.

- Our targets for this outcome are:
- A. Know their rights—**Target: 100%**
 - B. Effectively communicate their child's needs—**Target: 100%**
 - C. Help their child develop and learn—**Target: 96%**

All First Steps personnel play an equally important role in supporting and empowering families. There are four key points to doing this.

- 1. Remind the family that they know their child best and are their child's best teacher and advocate.
- 2. Ask the family lots of open-ended questions and connect them to resources both within and outside of First Steps.
- 3. Allow the family to ask questions. Answer what you can and reach out to the other IFSP team members if you do not have the answer.

- 4. Communicate with all members of the IFSP team. Show the family that we are here to support them.

Intake and service coordinators

One of the most important roles of the intake and service coordinator is to ensure the family thoroughly understands their rights within First Steps. Talking through family rights during each meeting and answering any questions from the family is a great way to do this. Additionally, asking open-ended questions about the family's routines, successes, concerns and ongoing services helps to identify potential resources and additional needs of the child and family both within and outside of the First Steps program.

Assessment team members

The best way for assessment team members to support families is by listening. Listen to the family's concerns and ask about their successes. Having a young child can be very overwhelming and helping the family to reflect on what is going well is very important. Answer questions the family has about their child's development and share resources that you believe would be helpful to the family. Sharing information you learn about the child and family with other IFSP team members allows for everyone to be on the same page and learn more about the priorities of the family.

Direct service providers

As a service provider, it is important to remind the family that what they do with their child between visits is most valuable to their child's development. Explain to the family what you are doing during each visit and allow them the opportunity to practice skills and activities during

this time. Asking the family about upcoming appointments for their child within and outside of First Steps can help them to articulate any concerns they may have about their services or development of their child.

If you have question about the family outcomes, please contact your agency/SPOE supervisor.

The 11 indicators

- 1 **Timely service delivery**
- 2 **Services provided in the natural environment**
- 3 **Child outcomes**
- 4 **Family outcomes**
- 5 **Child find (birth-to-1 population)**
- 6 **Child find (birth-to-3 population)**
- 7 **Initial IFSP complete within 45-day timeline**
- 8 **Early childhood transition**
- 9 **Hearing requests resolved**
- 10 **Mediation agreements**
- 11 **State systemic improvement plan**



Working with the medical community

Our First Steps office continues to create relationships and collaborate with early intervention stakeholders and partners. One of those valuable partnerships is between the Part C program and family physicians, pediatricians, nurse practitioners, physician assistants and specialists across the state. Dr. Michelle Curtin and Kristin Wikel, from Riley Hospital for Children, offered to answer questions our providers have about working with the medical community.

What criteria do physicians use when deciding to refer a child to First Steps?

The criteria physicians use to determine if a referral to early intervention is necessary varies greatly. Common reasons include family concerns; a previously identified condition or diagnosis with associated developmental needs (e.g., Down syndrome); and identified delays on a developmental screening tool such as the Ages and Stages Questionnaire.

What First Steps documents are most helpful to physicians?

A simple summary of what type of services the child is receiving (e.g., developmental therapy or physical therapy), including the frequency and duration of visits. In addition, any exit information would be helpful, like, has the child met their milestones or aged out of the program; will the child be receiving Part B special education services; and any anticipated needs the child may have.

What would the doctor like to know after they have made the referral to First Steps?

Most physicians want to hear why a family is not receiving First Steps services; for example, not able to reach family, phone was disconnected or family declined services. As a followup, many physicians will request to see a child back in their office after a referral is made so they can help with connecting to services.

Frequently, providers are reliant on the family to communicate the results of doctor's visits or additional testing. If the family cannot provide the written documentation, the provider may be receiving incomplete or inaccurate information.

How can providers best communicate with physicians? Would it be helpful for providers to work with the families to develop a list of questions for their physician prior to a doctor's visit?

This is a wonderful idea! The more communication between families, providers and physicians, the better the outcomes for the patients! A consent or release of information is always needed for open communication. Helping parents to maintain a binder or other way of tracking their child's medical and educational needs is also very helpful. It can include current diagnoses, appointment dates, medication lists, assessment reports, their child's IFSP and/or IEP, visit forms and any notes and questions they may have. This can be a great resource and support for families, providers and physicians to get a good picture of the child and their needs.

How can we best contact pediatricians with questions or concerns about a child?

To begin, parental consent or a release of information must always be signed for any communication to take place. It is recommended that there be one point of contact for the early intervention team to coordinate questions and avoid multiple calls/emails to the physician's office. Depending on the concern, it may be faster and easier to speak with the office nurse or medical assistant.

As home visitors, how can we best help families with children who are medically fragile and may take a number of medications?

Organization is key. Families may be juggling a lot of different outpatient medical appointments, therapy sessions

and other action items for their medically complex child.

Ask families how they prefer information to be organized. Some families use technology, such as their smart phones, where they can pre-program reminders and receive alerts when it is time to administer medications. Other families prefer to use written graphic organizers. There is no wrong solution. They just need to find a method that works for them and that they will use.

[Family Voices](#) has excellent information around this as well, including family-friendly information handouts.

When should a referral for nutrition services be made?

A referral to nutrition services should be made when the infant or toddler is off the growth curve (too high or low) or has jumped 2 or more percentiles on the growth curve, when a child is coughing, gagging or obviously choking during feeding or drinking or when a parent mentions that the child is not moving through the stages of eating; for example, advancing to stage 1 or 2 foods or avoiding chewy foods. A referral may also be made if the child is hypotonic (low muscle tone) or has other medical issues, such as cystic fibrosis.

Why do physicians prefer fax instead of email?

The basic answer relates to HIPAA and confidentiality. Email is more easily compromised and more difficult to secure than faxing. Many physicians and their office staff also have complex systems in place for receiving and processing the great volume of information they receive on a daily basis.

New provider orientation training information

To access ALL state required training registrations, [click here](#).

Recorded trainings for initial credential

DSP 101	AEPS part 1	Professional Boundaries and Ethics in Home Visiting
SC 101	The Science of Infant Brain Development	
Exit Skills Checklist		

Live webinar trainings

You must be able to access Adobe Connect to view the webinars. Course documents can be downloaded on the First Steps website prior to the training. If you need accommodations for accessibility, email FirstStepsWeb@fssa.in.gov.

DSP 102*	DSP 103*
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*For your convenience, DSP 102 and 103 trainings alternate monthly and are offered either mid-morning or early evening. Please check the registration page for specific times. **Please note times will be Eastern Time (ET).**

In-person trainings

SC 102	SC 103	AEPS part 2
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Professional development corner

Looking for online trainings for professional development hours? For a complete list of online webinars and trainings, please [visit this page](#). You may also go to [I-LEAD](#) and register for an account. When registering, you will use the category “early intervention provider.” All trainings are free of charge and provide users with a certificate upon training completion. Certificates for all completed trainings are stored in each user’s account under “Reports.” First Steps personnel must keep these certificates in their personal training records for seven years.

If you have questions, contact an I-LEAD representative at **800-299-1627** and choose **option 5**, Monday through Thursday 8 a.m.–7 p.m. or Friday 8 a.m.–5 p.m. EST.

The University of Connecticut Center for Excellence in Developmental Disabilities is offering interdisciplinary training for early intervention professionals. The goal of these Master’s level courses is to enhance the knowledge and skills of professionals currently working in the field of early intervention. Requirements of the program and other details can be [found here](#).

Infant Mental Health Endorsement® is a credential that can be earned by anyone working with or on behalf of very young children and their families, with a focus on strengthening and supporting early relationships that are so crucial to a child’s social and emotional development. To learn more, visit the [Infancy Onward site](#).

Event calendar

Early Childhood Mental Health Institute offers free professional development, Feb. 6-7, March 12-13, May 7-8 and July 9-10

The Riley Child Development Center’s Early Childhood Mental Health Institute offers free professional development experience. With support from Infancy Onward, the institute will include four two-day intensive in-person training sessions. The sessions will take place on Feb. 6-7, March 12-13, May 7-8 and July 9-10. To learn more, contact [Dr. Angie Tomlin](#).

SKI HI Parent Advisor Training, Feb. 9-10, Feb. 29-March 1, April 17-18 and May 30

The Center for Deaf and Hard of Hearing Education is looking for specialists working with children who are deaf and hard-of-hearing to work as contractors as certified SKI HI Parent Advisors. Training will take place on Feb. 9-10, Feb. 29-March 1, April 17-18 and May 30. To learn more, [contact Cindy Lawrence](#).

2020 Indiana Speech-Language-Hearing Association Convention, April 2-4, 2020

Please join us for three days of continuing education (17 hours!) on a wide range of speech-language pathology and audiology topics across the lifespan. Topics that would be of interest to First Steps providers include: Pediatric feeding, AAC, literacy, assessing children with ESL needs, behavior management, pediatric voice assessment/intervention, pediatric vestibular disorders, how hearing loss affects cognition/emotions, pediatric conservation resources for school-aged children, supervision, ethics and many more!

[Click here](#) for updates on the convention and how to register.

First Steps National Webinar Series 2020

Free and open to everyone—one hour credentialing provided

Family-guided routines-based intervention

Part 1: Jan. 9, 2020, at noon (EST) | Part 2: Feb. 13, 2020, at noon (EST)

Presenter: Juliann Woods, Ph.D., CCC-SLP, is professor emeritus in the School of Communication Science and Disorders at Florida State University and the director of the Communication and Early Childhood Research and Practice Center

in the College of Communication and Information. She is project director of a doctoral leadership grant, funded by the U.S. Department of Education, focusing on autism. She serves as a co-principal investigator or investigator on additional

projects in the Autism Institute, where she serves as an associate director. She has more than 35 years of clinical experience, research and teaching in early communication intervention for young children and their families.

Join these Zoom webinars from: <https://iu.zoom.us/j/647850205>



First Steps

2020 CONFERENCE

June 11-12, 2020 • Monroe County Convention Center

**REGISTRATION
IS OPEN!**

[www.eventmobi.com/
FS2020*](http://www.eventmobi.com/FS2020)

First Steps will be holding the third annual statewide conference on June 11–12, 2020, in Bloomington, Ind. Don't miss this opportunity to learn, share and network with your peers! This year, we are excited to welcome national keynote speakers Dr. Junlei Li and Dr. Dana Winters from the Harvard Graduate School of Education; and Bethany Van Delft, parent advocate and storyteller. For more conference information, [check out our website](#).*



Dr. Junlei Li



**Dr. Dana
Winters**



**Bethany
Van Delft**

Register to attend

Conference registration is open! Save \$15 with the Early Bird Discount. Registration is \$75 if you register before March 15, 2020, and \$90 after that.

Submit a proposal to present

Present your evidence-based research or innovative ideas in a breakout session or as a poster presenter at the First Steps Conference. Submit your proposal by the end of business on Jan. 15, 2020. Notification of acceptance will occur by the end of February 2020. Each proposal chosen will receive one admissions pass to the conference.

*For best results, view <https://eventmobi.com/fs2020/> on your smartphone or the most up-to-date browser, such as Microsoft Edge, Google Chrome or Apple Safari.



First Steps

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Indiana Early Intervention*



**Division of Disability and
Rehabilitative Services**

Indiana Family and Social Services
Administration
Bureau of Child Development Services
402 W. Washington Street, W453
Indianapolis, IN 46204

INvision newsletter

Did you know that the Division of Disability and Rehabilitative Services has a newsletter specifically for families and individuals with disabilities? *INvision* shares news, information, tips, and events from each of our bureaus to help families stay connected and learn more about our services. Families can [view past editions](#) and [sign up here](#). Please feel free to sign up and share with the families you support.

Our mission, vision and values

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Use your computer to read webpages out loud

BrowseAloud is a suite of products that provides online reading support. BrowseAloud reads website content out loud, highlighting each word as it is spoken in a high-quality, human-sounding voice. Click on the BrowseAloud link that appears beside "Accessibility Tools" on the footer of the IN.gov website. This will launch the BrowseAloud Plus toolbar. This toolbar provides speech at the touch of a button. For more information, visit [BrowseAloud](#).



We would like to include ideas from First Steps providers in upcoming newsletters! If you have an idea that works well with families or an article to share, please [submit it here](#).