

# Rhode Island's Early Intervention Program: The Foundation of the State's Public Education & Special Education System



Policy Roundtable Discussion  
April 15, 2021  
#RightStartRI

# Agenda

## Welcome

*Elizabeth Burke Bryant, Rhode Island KIDS COUNT*

## Policy Brief Highlights and Recommendations

*Leanne Barrett, Rhode Island KIDS COUNT*

## Reflections

*Ana Novais, RI Executive Office of Health and Human Services*

*David Sienko, RI Department of Education*

*Linda Kheng, Mother of Madeline, participating in Early Intervention*

*Casey Rodgers, Occupational Therapist, Children's Friend EI*

*Pam High, MD, Hasbro Children's Hospital and RI Chapter of AAP*

*Danita Roberts, RI Association for Infant Mental Health*

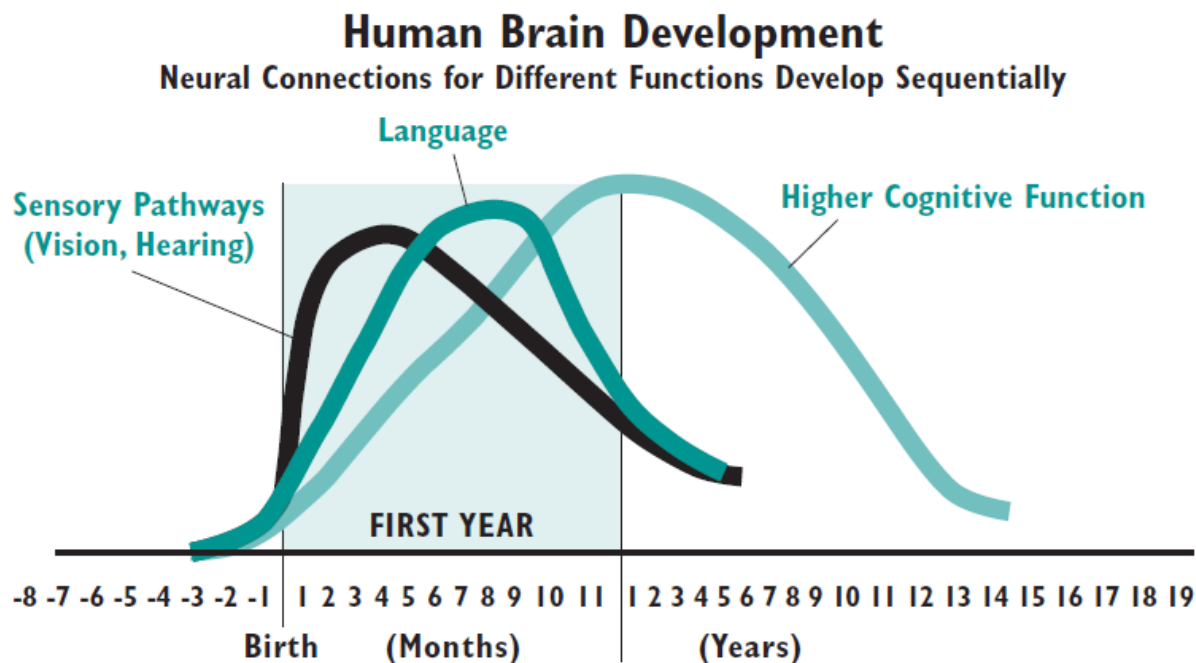
*Deborah Masland, RI Parent Information Network*

*John Kelly, Meeting Street*

*Jennifer Kaufman, RI IDEA Part C Early Intervention Coordinator*

## Discussion

# Early Learning & Development Matters a Lot



- Brain architecture is developed in the first 5 years of life. Disparities in development and learning begin to appear in the first years of life, and without intervention, widen over time.
- Access to high-quality Early Intervention and other early learning opportunities from birth through kindergarten entry, helps prepare children for success in school.

# Early Intervention

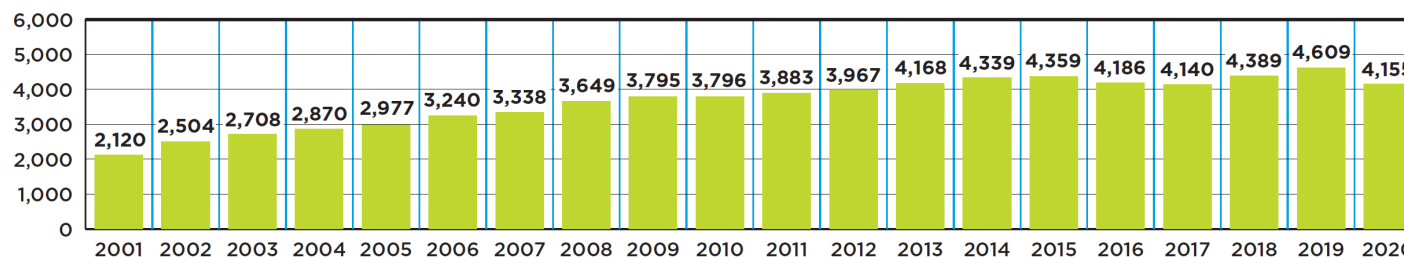


- The Early Intervention program is the front door to the state's **public education system** and the foundation of the **special education system**.
- States are **required to provide Early Intervention** services to infants and toddlers with developmental delays and disabilities under Part C of the *Individuals with Disabilities Education Act (IDEA)*.
- States **may also choose to serve children who are at risk of falling behind** without early supports.
- Effective Early Intervention **services help children make developmental progress and can help them catch up** with their peers.
- Researchers have found that **about one-third of infants and toddlers who received Early Intervention no longer had a developmental delay, disability, or special education need** in kindergarten.

# Early Intervention

- In 2019 in Rhode Island, 7% of infants and toddlers were receiving Early Intervention services, yet experts estimate that as many as 13% of infants and toddlers could benefit from Early Intervention.
- Eligible children in Rhode Island:
  - Diagnosed condition known to lead to developmental delay
  - Significant developmental delay in one or more areas of development
  - Significant circumstances that impact child or family functioning (e.g., significant trauma/losses, history of abuse/neglect, etc.)

INFANTS & TODDLERS RECEIVING EARLY INTERVENTION SERVICES, RHODE ISLAND, CALENDAR YEARS 2001-2020

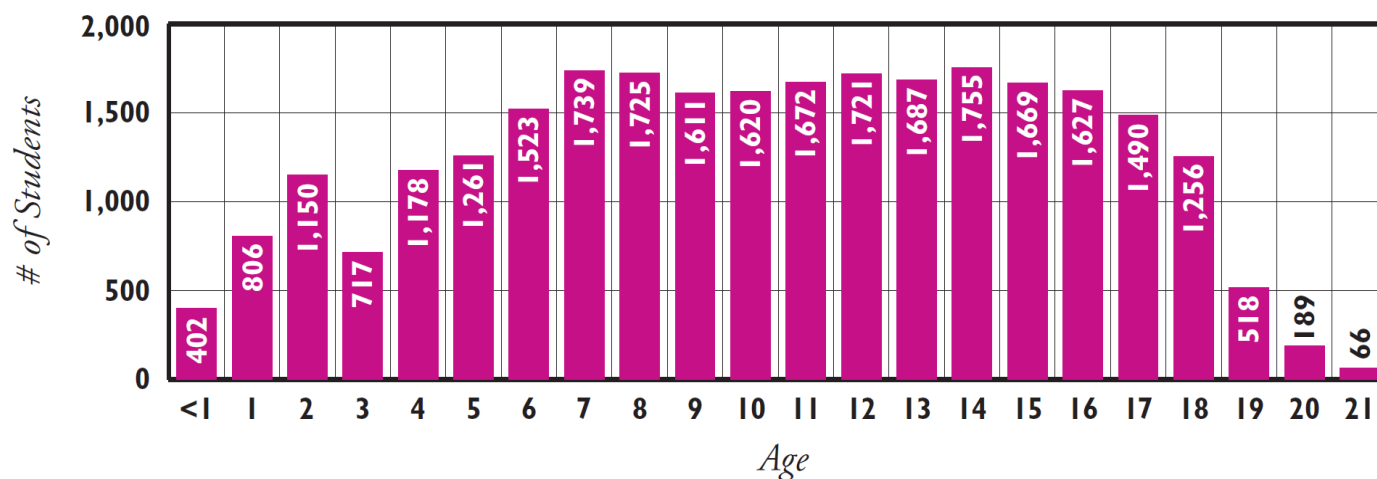


Source: Rhode Island Executive Office of Health and Human Services, Rhode Island Department of Human Services, and Rhode Island Department of Health. Note: In March 2020 due to the COVID-19 pandemic, Early Intervention providers transitioned to delivering Early Intervention services, including evaluations, eligibility determination, and IFSP meetings through telehealth technology.

# Special Education, Birth - 22



**Students Ages Birth to 21 Receiving Early Intervention and Special Education Services, Rhode Island, June 2019**



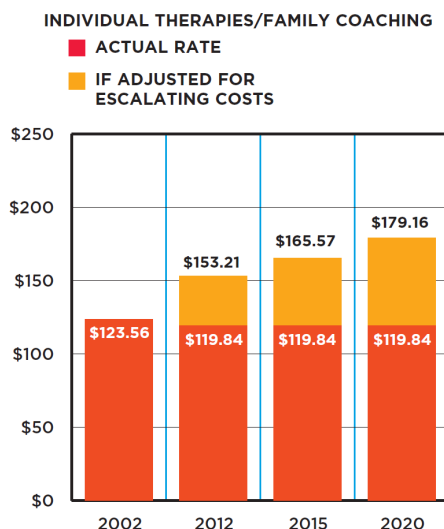
Source: Rhode Island Executive Office of Health and Human Services, Center for Child and Family Health, Early Intervention enrollment, June 30, 2019. Rhode Island Department of Education, Office of Diverse Learners, Special Education Census, June 30, 2019. Includes parentally-placed students.

# Early Intervention Financing

- 2019 Funding for Rhode Island Early Intervention services:
  - \$8.5 million from Medicaid (\$4.5 million federal and \$4 million state dollars)
  - \$7.9 million from commercial health insurance
  - \$400,000 from the state's IDEA Part C grant.
- State funding was higher in 1999 when \$4.4 million was allocated to Early Intervention.
- In 2019, the estimated annual funding per child enrolled in Early Intervention averaged \$3,542.
- In 1999, a state task force recommended that per child funding be increased to \$5,700.

# RI Medicaid Rates for Early Intervention are Lower than in 2002

HOURLY MEDICAID RATES FOR  
EARLY INTERVENTION SERVICES  
WITH ESTIMATES FOR INCREASED  
COSTS, RHODE ISLAND, 2002-2020



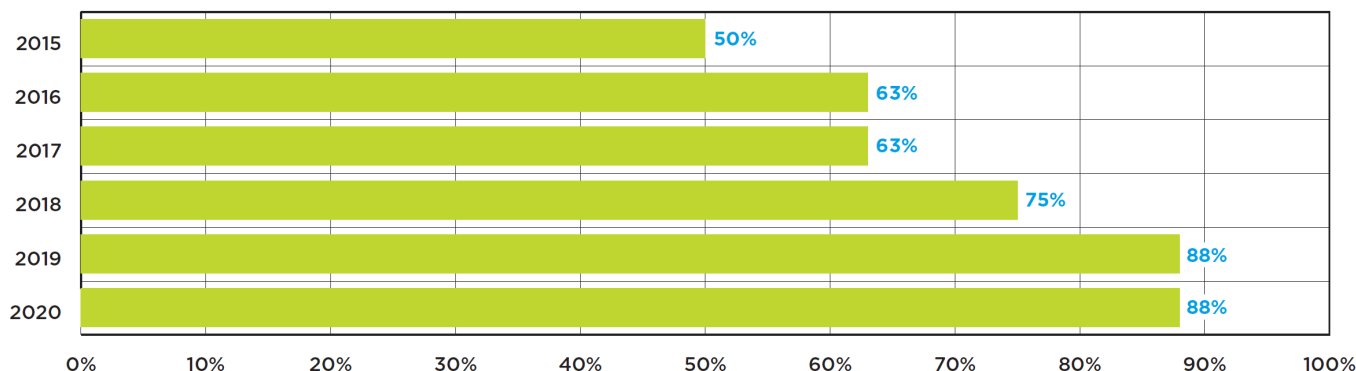
Source: Actual rates from the Executive Office of Health and Human Services. Estimates for adjustments to account for inflation calculated by Rhode Island KIDS COUNT using the Consumer Price Index (CPI) for the Northeast retrieved from [www.bls.gov](http://www.bls.gov). The chart above estimates how the rates should have been increased to account for escalating costs since 2002.

- The Rhode Island Medicaid Office sets rate for Early Intervention. Commercial Insurance providers have to match or exceed these rates.
- Rates for Early Intervention have not been increased since 2002. In fact, they are lower due to a cut in 2009.
- Low rates have created a staffing crisis for RI Early Intervention



# Fiscal Stability

## EARLY INTERVENTION PROGRAMS WITH OPERATING DEFICITS, RHODE ISLAND, 2015-2020



Source: Rhode Island KIDS COUNT 2021 survey of Early Intervention providers in Rhode Island. Note: eight of the nine Early Intervention providers completed the survey.

**In 2021, 88% of the agencies that operate Early Intervention programs in Rhode Island report that their program loses money, 50% report that they have seriously considered closing the program in the past year, and 38% report that they regularly raise private funds to mitigate financial losses of the Early Intervention program.**

# Early Intervention Program Closures

“It has been Hasbro Children’s Hospital’s privilege to provide Early Intervention services to thousands of Rhode Island families for the last 15 years. Regrettably, the state of health care reimbursement in Rhode Island has led to many difficult decisions, including the closure of the Early Intervention program. The hospital staff realizes that it will be difficult for many families currently enrolled in Early Intervention. We will work to make the transition as seamless as possible.”

Providence Journal, 2015

# Fiscal Challenges Impact Staff, Families, and Children

Due to serious fiscal challenges caused by limited resources, Early Intervention programs report significant staffing and service delivery challenges, including:

- 100% have difficulty retaining qualified Early Intervention staff who are offered higher salaries elsewhere
- 100% have difficulty recruiting and hiring qualified Early Intervention staff with competitive salaries
- 100% lose revenue and incur increased costs due to staff turnover
- 88% delay or interrupt services to children due to staffing challenges
- 88% report families/children withdrawing from Early Intervention due to staff turnover/staffing challenges

# Staff Compensation & Turnover

## EARLY INTERVENTION STAFF COMPENSATION & TURNOVER, RHODE ISLAND

	EI STAFF AVERAGE SALARY 2019	AVERAGE SALARY FOR OCCUPATION 2019	EI STAFF TURNOVER 2019-2020
Early Interventionist I	\$35,139	Comparison Not Available	55%
Early Childhood Educator	\$46,059	\$78,180*	60%
Social Worker	\$51,227	\$63,310	59%
Occupational Therapist	\$60,587	\$88,390	35%
Speech Language Pathologist	\$68,660	\$85,450	25%
Physical Therapist	\$73,320	\$85,540	4%

Source: Early Intervention average salaries for 2019 and staff turnover for 2019-2020 from the RI Executive Office of Health and Human Services. Rhode Island average occupational salaries from the May 2019 State Occupational and Wage Estimates for Rhode Island. Retrieved February 20, 2021, from [www.bls.gov](http://www.bls.gov). \*Kindergarten teacher salaries were used as a comparable profession for Early Intervention early educators.

A 2019 study of the Rhode Island early childhood educator workforce cited the low wages and high turnover in the overall field being significant barriers for programs to meet quality standards that promote positive child outcomes.

- 97% of Early Intervention staff were female
- Only 28% report high job satisfaction,
- 82% planned to leave their jobs if salaries do not improve
- 52% had looked for another job in the past six months.

# Family Stories

“It has been incredible to see the progress our son has made across the last year! He has grown from a very shy boy at his first visit when he would not even go near our educator to hugging her at his last few meetings! We could not be more thankful for our educator’s care and LOVE for our son and our entire family! It has been a JOY to see our son’s language development progressing!”

Comment on the 2020 Rhode Island Early Intervention Family Survey

“From the start since my son was 18 months old, I believe the lack of consistency in people involved with my son’s case has caused him to not be able to get the most out of this program before he ages out. He would see the same people for a few visits and then be assigned someone new on multiple occasions for various reasons. The new people would essentially have to “start over” to get to know him, in order to help him the best way they knew how. Which would delay the progression that he could have been making.”

Comment on the 2020 Rhode Island Early Intervention Family Survey

# Expanding and Improving Early Intervention

- Because young children who have experienced neglect, trauma, or abuse are at significant risk of experiencing developmental delays, the federal ***Child Abuse Prevention and Treatment Act*** requires states to screen and/or refer infants and toddlers who have experienced neglect or abuse to Early Intervention for eligibility determination and services.
- **Rhode Island specifically allows infants and toddlers who have experienced trauma, abuse or neglect, to be determined eligible** for Early Intervention under "informed clinical opinion - family circumstances" even if the child does not have a measurable developmental delay or diagnosed condition.
- Although Rhode Island is referring almost all families with maltreated infants and toddlers for a screening or evaluation, in 2019, **only 211 of the 803 (29%) children under age 3 who were victims of a substantiated child neglect or abuse case were determined eligible for Early Intervention.**

# Expanding and Improving Early Intervention

- Rhode Island has not implemented a **specialized social-emotional screening and/or evaluation tool** be used when assessing children involved in a substantiated case of abuse or neglect.
- Experts recommend that states use the ***DC:0-5 (Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood)*** as a developmentally sensitive, relationship-based system of diagnosis for very young children.
- There are specific **parent-child dyadic therapy models** that can be used in Early Intervention to strengthen parent-child relationships and promote positive child development.
- Dyadic therapy can be very helpful to promote infant mental health. Although Rhode Island covers parent-child supportive services, **the state has not implemented any evidence-based dyadic therapy models in Early Intervention**

# Recommendations

- 1) **Increase Early Intervention Medicaid reimbursement rates** to fully support delivery of services, stabilize program staffing & protect children's access to services.
- 2) **Establish a competitive wage scale for Early Intervention** educators, therapists and social work staff to improve staff recruitment and retention. Early Intervention staff must be stable, well-qualified, and be able to develop and maintain positive and meaningful relationships with families and young children.



# Recommendations

- 3) After working to restore the financial health of Early Intervention programs and stabilize staffing, Rhode Island should work with families and other stakeholders to **identify service barriers, expand equitable access, and improve services so that more children receive high-quality Early Intervention services** to address developmental challenges and delays as early as possible.
- Ramp up **developmental screenings** (including social-emotional development screenings) and referrals to Early Intervention in pediatric health care settings.
  - Train all First Connections and Early Intervention staff, pediatric health care providers, and other referral agencies to use a **standardized tool to identify “child and/or family circumstances.”**
  - **Make substantiated neglect or abuse a “single established condition”** for infants/toddlers to be categorically eligible for Early Intervention.
  - **Expand infant mental health services** available through Early Intervention: provide routine maternal depression screening, adopt the use of an evidence-based social-emotional evaluation tool (DC: 0-5), and implement evidence-based parent-child dyadic therapy.

# Early Educator Investment Act



The RI Early Educator Investment Act introduced by Representative Casimiro (H-5158) and Senator Cano (S-66) requires the state to develop goals and a plan to improve the recruitment, development, compensation, and retention of effective early educators.

The bill:

- Describes the **crucial importance of the early childhood educator workforce**
- Outlines the problems child care, family home visiting, and Early Intervention programs have in attracting and retaining effective educators **due to low wages**.
- Instructs the Rhode Island Children's Cabinet to address the crisis the industry is facing in attracting and retaining staff by **establishing a cross-departmental target wage scale for early educators** and by advancing strategies to improve compensation so there is parity with public school educators with comparable credentials.

# Worthy Wages for Early Educators



# Reflections & Discussion

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