

Babies Can't Wait

Early Intervention Program

2000-2001

Annual Report



STATE INTERAGENCY COORDINATING COUNCIL
FOR EARLY INTERVENTION PROGRAMS

March 30, 2003

The Honorable Sonny Perdue
Governor
Atlanta, Georgia 30334
203 State Capitol

Dear Governor Perdue:

On behalf of the State Interagency Coordinating Council (SICC) for Early Intervention Programs and the Babies Can't Wait Program, I am pleased to submit the annual report for Georgia's early intervention program. This report covers the twelve-month period from July 1, 2000 to June 30, 2001. Babies Can't Wait provides family-centered and community-based services for families of infants and toddlers birth to three years of age with developmental delays or disabilities throughout Georgia. In recognition of the critical nature of promoting optimal child development during the early years of a child's life, Georgia calls this program Babies Can't Wait.

The focus over the previous reporting period has been on maximizing resources to meet the needs of all eligible children and their families and on increasing collaboration and cooperative work across all programs and services that are available for children in Georgia. Within the Department of Human Resources Division of Public Health, Babies Can't Wait works closely with other programs for children with special needs, including Children's Medical Services and Universal Newborn Hearing Screening and Intervention, as well as with programs and services for children at risk, including Children 1st. In addition, Babies Can't Wait continues to work with the Department of Education to ensure that all children and families are effectively transitioned to appropriate services when they exit Babies Can't Wait.

During this period, Babies Can't Wait and the SICC have worked together with stakeholders to develop an Improvement Plan as a next phase of the Office of Special Education Programs (OSEP) continuous improvement monitoring process. SICC members participated on an Improvement Planning Steering Committee along with parents, service providers, and other partners throughout the state to develop a plan for continued enhancement of the services offered through Babies Can't Wait. Goals of the plan include a focus on provision of family-centered services, increased child find and public awareness efforts to ensure early identification of children with special needs, and provision of appropriate services in inclusive community settings.

The members of the SICC come from a wide variety of backgrounds and all areas of the state, but we share a common vision to work together, to eliminate barriers that hinder collaboration, and to increase knowledge and understanding. We continue to be dedicated to working with state and community agencies, service providers, legislators, higher education faculty, and families to provide quality services and supports for children with special needs and their families. Thank you for your interest in early learning initiatives and your support of our efforts and continued work!



Walter Black, Chair
State Interagency Coordinating Council
For Early Intervention Programs

officers

Walter A. Black
Chairperson

Lynne D. Feldman, M.D.
Vice Chairperson

members

Jon M. Anderson
Eve Bogan
Juanita Blount-Clark
Milagros Cordero
Lanier Dasher
Blanche DeLoach, R.D., L.D.
Charles Hopkins
Sheila Langston
Robert Lawrence, PH.D.
Susan Maxwell
Betty Nelson
Phil Pickens
Argartha Russell
Tish Seay, Ed.D.
Russ Toal
Kathleen E. Toomey, M.D., M.P.H.
Cindy Vail, Ph.D.

mission

The mission of the Georgia State Interagency Coordinating Council for Early Intervention Programs is to advise and assist the Department of Human Resources, Division of Public Health and other agencies responsible for serving infants and toddlers, birth to age three with developmental delays and disabilities and their families, in providing an appropriate, family-centered, comprehensive service delivery system which promotes optimal child development and family functioning.

2 Peachtree Street, N.W.
Room 11-104
Atlanta, Georgia 30303-3186
(404) 463-3474
Fax (404) 657-2763

contents

2	Our System
2	What is Babies Can't Wait?
3	About Us: Who is Eligible?
3	How Does a Family Find Us?
4	Contacts: How to reach your local BCW Office
6	Eligibility
6	Service Delivery
7	Resources
8	What Services Are Provided
8	Where Services are Provided
9	Funding
9	Transition
10	SICC: What is the State Interagency Coordinating Council?
10	State ICC Membership
11	LICC: What are Local Interagency Coordinating Councils?
11	2000-2001 Allocations
12	Quality Assurance
13	Georgia Child Count Data
14	Referrals
14	Credentialing System
16	Activities and Progress
18	Challenges
19	Goals
20	Georgia Department of Human Resources



our system

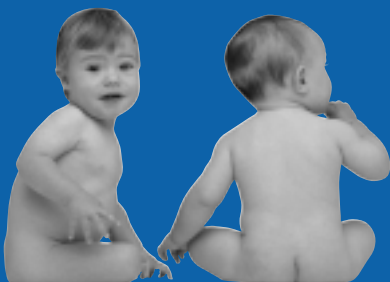
The Babies Can't Wait system strives to identify developmental problems in their earliest stages, enabling treatment to be administered when most beneficial to the child.

what is babies can't wait?

Babies Can't Wait (BCW) is a comprehensive, family-centered, coordinated, multidisciplinary system that provides early intervention services to infants and toddlers with disabilities or developmental delays and their families. The BCW system is implemented under Part C of the Individuals with Disabilities Education Act (IDEA). Georgia has participated in Part C of IDEA since 1987. BCW is administered by the Georgia Department of Human Resources, Division of Public Health, Family Health Branch.

For families of eligible infants and toddlers, BCW provides a window of opportunity for their children to grow, learn, and develop to their fullest potential. For professionals, BCW is the chance to give infants and toddlers, whose brains are growing very quickly, the opportunity to gain skills, and the chance to teach families to help their children learn these skills. It is the collaboration between families and professionals that makes BCW so unique.

For more information, visit the BCW web site at <http://health.state.ga.us/programs/bcw/>. You can contact the State Babies Can't Wait office at 404-657-2726 or toll free at 1-888-651-8224.



1 *concerns*

about a developmental delay

2 *child care providers*

- Family
- Nurse
- Doctor
- Teacher
- Social Worker
- Child Care
- Others

3 *entry into BCW*

- Intake/Information Gathering
- Evaluation
- Determination of Eligibility
- Assessment for Programming

If ineligible, referral to community programs

4 *IFSP*

(Individualized Family Service Plan)

- Identify team members
- Identify concerns, priorities, & resources of the family
- Determine goals and outcomes related to the child's development
- Identify services, providers, & fund sources
- Develop a written plan
- Begin services
- Review progress and changing needs

5 *transition plan*

to local school system, Head Start, and/or other services/programs

about us

who is eligible?

Part C of IDEA is designed for children from birth to age three years who need early intervention services and supports because they are experiencing a significant delay in one or more of the following areas of development: physical, cognitive, communication, social/emotional, or adaptive; or because they have a diagnosed mental or physical condition that has a high probability of resulting in a significant delay.

To be eligible for BCW, children must meet one of the specific eligibility criteria defined below (NOTE: There are no income eligibility requirements for BCW):

1) ESTABLISHED CONDITION

A child with a diagnosed mental or physical condition that is known to result in a developmental delay, even when no delay exists at the time of the referral; or

2) DEVELOPMENTAL DELAY

A child with a significant developmental delay that is confirmed by a qualified multidisciplinary team.

how does a family find us?

Anyone, including a parent, who is concerned about an infant's or toddler's development may make a referral to BCW. Participation is voluntary. Referrals can be made to the BCW Central Directory at 1-800-229-2038 or 770-451-5484 in Atlanta, or to the local health department's Children 1st Coordinator. The Directory is operated by Parent to Parent of Georgia, a statewide parent run organization. In addition to obtaining information about BCW, parents can also be matched with supporting parents whose children have similar disabilities. Visit the Parent to Parent web site at www.parenttoparentofga.org. Referrals may also be made directly to a local BCW office. There is a BCW office in each of the 19 public health districts making the program available statewide. Each district includes from one to sixteen counties. Referrals should be made to the district which includes the county where the family lives. The contact list for each health district follows.



contacts

How to reach your local Babies Can't Wait office

Health District 1-1: Northwest Health District (Rome)

Babies Can't Wait Program
501 Broad Street, Suite 211
Rome, GA 30161
(706) 802-5072
FAX: (706) 802-5309
Counties Served: Bartow, Catoosa, Chattooga, Dade, Floyd, Gordon, Haralson, Paulding, Polk, Walker

Health District 1-2: North Georgia Health District (Dalton)

Babies Can't Wait Program
100 West Walnut Ave. Suite 92
Dalton, GA 30720
(706) 272-2219 or 1-888-276-1558
FAX: (706) 272-2266
Counties Served: Cherokee, Fannin, Gilmer, Murray, Pickens, Whitfield

Health District 2: North Health District (Gainesville)

Babies Can't Wait Program
1856-103 Thompson Bridge Road
Gainesville, GA 30507
(770) 531-4053 or 1-800-204-8731
FAX: (770) 538-2784
Counties Served: Banks, Dawson, Forsyth, Franklin, Habersham, Hall, Hart, Lumpkin, Rabun, Stephens, Towns, Union, White

Health District 3-1: Cobb/Douglas Health District

Babies Can't Wait Program
1650 County Services Parkway
Marietta, GA 30008
(770) 514-2357
FAX: (770) 514-2803
Counties Served: Cobb, Douglas

Health District 3-2: Fulton Health District

Babies Can't Wait Program
151 Ellis Street, NE
Atlanta, GA 30303
(404) 730-4027
FAX: (404) 730-4038
County Served: Fulton

Health District 3-3: Clayton County Health District

Babies Can't Wait Program
7146 Southlake Parkway
Morrow, GA 30260
(770) 960-9961
FAX: (770) 960-9664
County Served: Clayton

Health District 3-4: East Metro Health District (Lawrenceville)

Babies Can't Wait Program
320 West Pike Street
Lawrenceville, GA 30045
(770) 339-5064
FAX: (770) 339-5345
Counties Served: Gwinnett, Newton, Rockdale

Health District 3-5: DeKalb Health District

Babies Can't Wait Program
440 Winn Way/P.O. Box 987
Decatur, GA 30031
(404) 508-7981
FAX: (404) 294-6316
County Served: DeKalb

Health District 4: LaGrange Health District

Babies Can't Wait Program
122 Gordon Commercial Drive, Suite A
LaGrange, GA 30240
(706) 845-4035
FAX: (706) 845-4038
Counties Served: Butts, Carroll, Coweta, Fayette, Heard, Henry, Lamar, Meriwether, Pike, Spalding, Troup, Upson

Health District 5-1: South Central Health District (Dublin)

Babies Can't Wait Program
524 Academy Avenue
Dublin, GA 31021
(478) 275-6841 or Toll Free 1-888-262-8305
FAX: (478) 274-7893
Counties Served: Bleckley, Dodge, Johnson, Laurens, Montgomery, Pulaski, Telfair, Treutlen, Wheeler, Wilcox

Health District 5-2: North Central Health District (Macon)

Babies Can't Wait Program
2520 Riverside Drive
Macon, GA 31204
(478) 745-9200 or Toll Free 1-888-449-0108
FAX: (478) 745-9040
Counties Served: Baldwin, Bibb, Crawford, Hancock, Houston, Jasper, Jones, Monroe, Peach, Putnam, Twiggs, Washington, Wilkinson

Health District 6: East Central Health District (Augusta)

Babies Can't Wait Program
1916 North Leg Road
Augusta, GA 30909
(706) 667-4279
FAX: (706) 667-4278
Counties Served: Burke, Columbia, Emanuel, Glascock, Jefferson, Jenkins, Lincoln, McDuffie, Richmond, Screven, Taliaferro, Warren, Wilkes

Health District 7: West Central Health District (Columbus)

Babies Can't Wait Program
705 17th Street, Suite 208
Columbus, GA 31902-00672
(706) 327-0189
FAX: (706) 327-1355
Counties Served: Chattahoochee, Clay, Crisp, Dooly, Harris, Macon, Marion, Muscogee, Quitman, Randolph, Schley, Stewart, Sumter, Talbot, Taylor, Webster

Health District 8-1: South Health District (Valdosta)

Babies Can't Wait Program
2700-C North Oak Street
Valdosta, GA 31602
(229) 245-6565 or 1-800-247-6538
FAX: (229) 245-6561
Counties Served: Ben Hill, Berrien, Brooks, Cook, Echols, Irwin, Lanier, Lowndes, Tift, Turner

Health District 8-2: Southwest Health District (Albany)

Babies Can't Wait Program
1306 South Slappey Blvd., Suite A
Albany, GA 31707
(229) 430-2700 or (229) 522-3627
FAX: (229) 420-1156
Counties Served: Baker, Calhoun, Colquitt, Decatur, Dougherty, Early, Grady, Lee, Miller, Mitchell, Seminole, Terrell, Thomas, Worth

Health District 9-1: East Health District (Savannah)

Babies Can't Wait Program
11706 Mercy Boulevard, Building #8 Door B
Savannah, GA 31420
(912) 921-7480
FAX: (912) 921-7490
Counties Served: Chatham, Effingham

Health District 9-2: Southeast Health District (Waycross)

Babies Can't Wait Program
1718 Reynolds Street
Waycross, GA 31501
(912) 284-2552 or 1-800-429-6307
FAX: (912) 287-6689
Counties Served: Appling, Atkinson, Bacon, Brantley, Bulloch, Candler, Charlton, Clinch, Coffee, Evans, Jeff Davis, Pierce, Tattnall, Toombs, Ware, Wayne

Health District 9-3: Coastal Health District (Brunswick)

Coastal Babies Can't Wait/Early Intervention Program
1609 Newcastle Street, Room 307
Brunswick, GA 31520
(912) 264-3961
FAX: (912) 262-2315
Counties Served: Bryan, Camden, Glynn, Liberty, Long, McIntosh

Health District 10: Northeast Health District (Athens)

Babies Can't Wait/Early Intervention Program
1077 Baxter Street, Suite H
Athens, GA 30601
(706) 369-6101
FAX: (706) 369-5709
Counties Served: Barrow, Clarke, Elbert, Greene, Jackson, Madison, Morgan, Oconee, Oglethorpe, Walton

ariana

" Thank you Babies Can't Wait for all of the support you have given to my family and me. You have truly been an asset to us. I know that without your early intervention my daughter would not have been doing as well as she is. Thank you Babies Can't Wait for recognizing children with special needs. Keep up the good work ."



eligibility

To evaluate the developmental status in the areas listed below, the state must provide a team that includes representatives from at least two different professional disciplines, who are trained to utilize appropriate methods and procedures. Depending on the presenting needs of the child, the team may include audiologists, physical therapists, nutritionists, social workers, speech and language pathologists, and other professionals.

- cognitive development
- communication development
- physical development, including vision and hearing
- adaptive development
- social and emotional development

service delivery

One intention of the federal legislation is to support families within the context of their lives and their communities. Services received through BCW are provided in the child and family's "natural environment," which means places and situations where children without disabilities or delays live, play, and grow. These include the child's home, child care settings, community play groups, libraries, toddler gym programs, etc. Through the evaluation process, families are encouraged to talk about their daily routines and identify ways in which early intervention can be supportive of them within the context of their lifestyle, culture, and community. Early intervention service providers support and coach family members and caregivers who can encourage their children to use newly acquired skills during daily activities and routines. During this reporting period, 88% of services were provided in natural environments, rather than in clinic or segregated settings.



resources

All formal and informal resources, determined to be necessary for the child and family through the evaluation/assessment process, are organized in an Individualized Family Service Plan (IFSP). Parents and service providers are partners in developing this plan. It is based on each family's resources, priorities, and concerns, and includes only the early intervention activities and supports that the family chooses and which are recommended as necessary to promote progress toward outcomes on the IFSP.

Part C of IDEA requires participating state programs to make the following early intervention services and supports available as appropriate for each individual child and family (and according to the IFSP):

- assistive technology
- audiology
- physical therapy
- vision services
- special instruction
- psychological services
- family training, counseling, and home visits
- health services (needed to enable a child to benefit from other early intervention activities)
- nutrition
- service coordination
- occupational therapy
- social work services
- speech language therapy
- transportation services
- medical services (certain diagnostic and evaluation services)
- nursing (needed to enable a child to benefit from other early intervention activities)

Each family is assigned a service coordinator whose job is to help the family coordinate the early intervention process, to access services and resources, and to work with the family to meet their unique needs. The service coordinator is a critical link to the community and to information and resources.

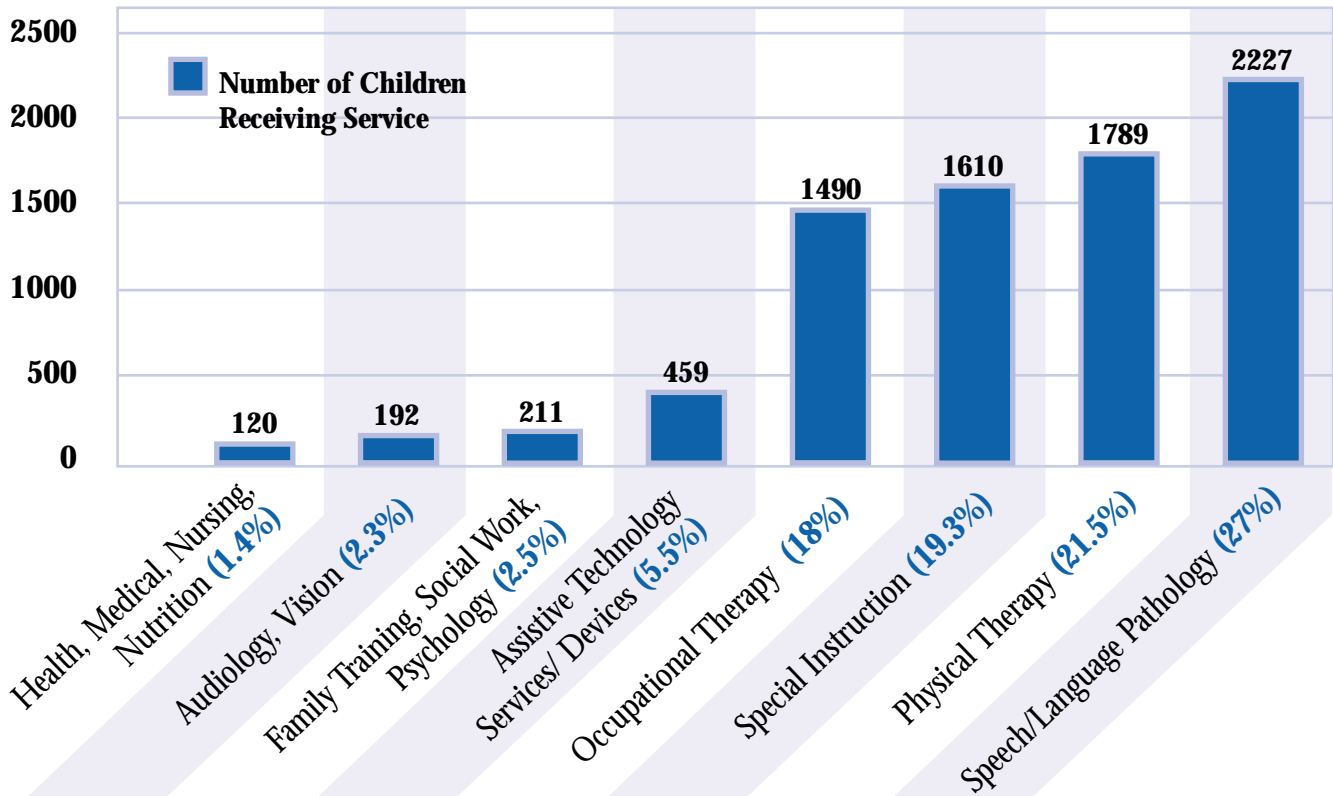
Beyond the federal requirements described above, family support may be available to families in BCW who need additional help in caring for children with disabilities. Some of these supports may include: respite care, support groups, and certain environmental modifications. Current information is also provided to connect families to community, state, and national resources. All supports build on existing social networks and resources; they also reflect the unique needs and strengths of each family. The goal is to empower the family to locate and utilize future supports.

Jaycee

"Jaycee is two years old and has Down syndrome. She has had five surgeries already and has two more to go. As soon as we came home from the hospital, she was enrolled in Babies Can't Wait. I don't know what we would have done without these people to help us! Her therapists come to our house to see her and she has come a long way. Our service coordinator is always there to answer my questions and help us. Thanks to Babies Can't Wait for helping Jaycee grow and learn!"

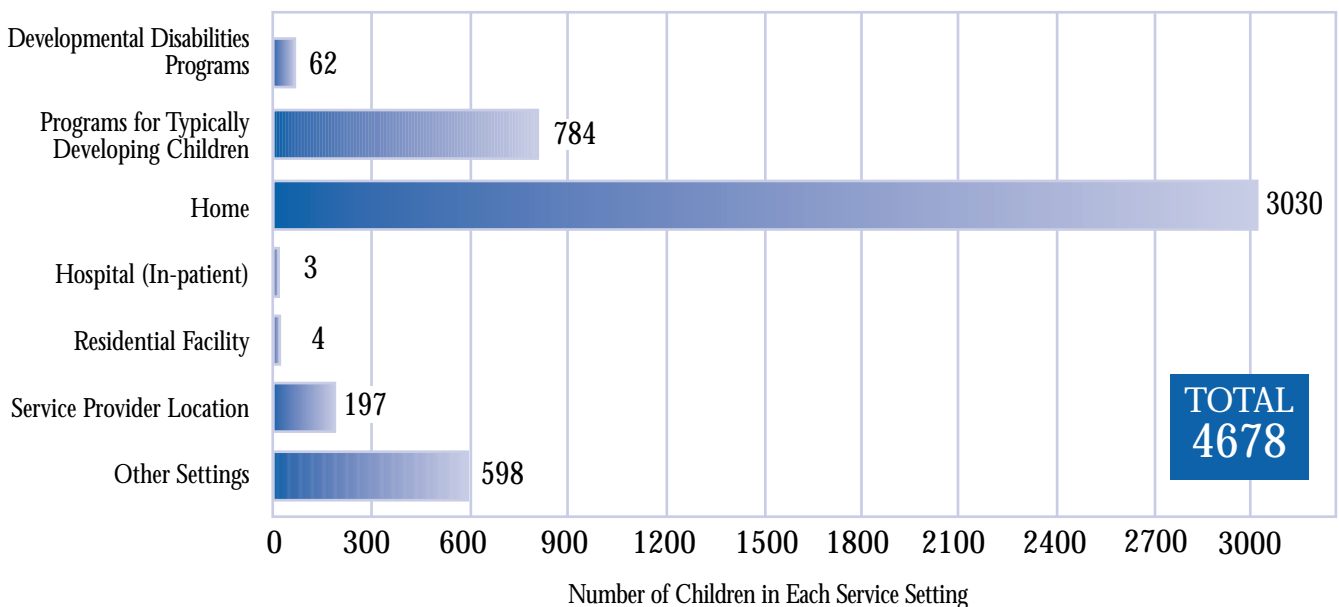


What services are provided _____ 2000-2001



Based on December 1, 2000 Count

Where services are provided _____ 2000-2001



Based on December 1, 2000 Count

funding

Who pays for Babies Can't Wait?

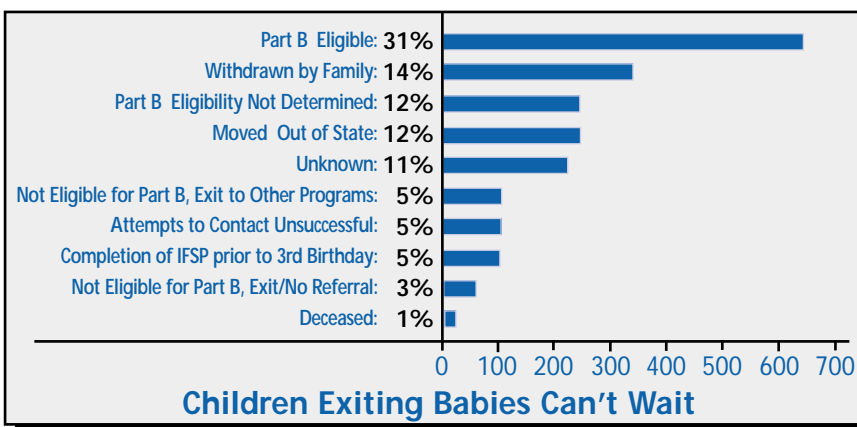
One of the expectations of the federal Part C legislation is that states will fund services and supports through various sources. The federal money Georgia receives for early intervention must be used to supplement funds from other sources such as state appropriations, Medicaid, PeachCare for Kids, private insurance, Title V Children with Special Health Care Needs, parent fees, etc. Service coordinators assist families in identifying resources for all needed services and supports. At no time are early intervention services denied because of a family's inability to pay, as defined by the Financial Analysis for Cost Participation (Appendix C of the BCW Program Standards Fiscal Policies).

transition

What happens when a child is no longer eligible for Babies Can't Wait?

Some children will leave BCW before or at age three years and participate in programs and activities with or without specialized assistance and services. All children leaving BCW must have a plan for their "transition" from early intervention. The service coordinator will assist the family and serve as a link between BCW and whatever is to follow in order to ensure a smooth, seamless transition to other services or systems appropriate for the child and his/her family. This process begins at least six months prior to a child's third birthday and enables the family to become familiar with their public preschool special education personnel, private preschool opportunities, Head Start, and other options in their community. As families prepare to leave BCW, their service coordinators make sure that appropriate community referrals are made to programs within the health department and other agencies to assure health and other needs are addressed.

During the period between 12/01/99 and 11/30/00, 2091 children who exited Babies Can't Wait. The table below illustrates reasons for exiting BCW.





What is the State Interagency Coordinating Council?

Under Part C of IDEA, each state must have an advisory body made up of consumers, public and private providers, legislators, and representatives from state agencies that provide or pay for early intervention services.

This body is called the State Interagency Coordinating Council (SICC) and is appointed by the Governor to advise and assist the Georgia Department of Human Resources (DHR) in its early intervention responsibilities.

The mission of the Georgia SICC is to advise and assist the Department of Human Resources Division of Public Health, and other agencies responsible for serving infants and toddlers, birth to age three years with developmental delays and disabilities and their families, in providing an appropriate, family-centered, comprehensive service delivery system to promote optimal child development and family functioning.

The Executive Committee is the management arm of the Council and sets the agenda for meetings, in addition to acting on the Council's behalf between Council meetings. In addition to the Executive Committee, the Council has four standing committees: Finance, Personnel Preparation, Service Delivery, and Public Awareness. These committees work to identify current issues, gather information, and make informed recommendations to the Council, and ultimately to DHR. Through these activities, they assist DHR in developing an early intervention system of the highest quality, which seeks to balance family-centered services with fiscal responsibility.

State ICC Membership

PARENTS OF CHILDREN WITH DISABILITIES

Walter Black (Acworth)

Betty Nelson (Statesboro)

PUBLIC PROVIDERS OF EARLY INTERVENTION SERVICES

Blanche DeLoach, R.D., L.D. (LaGrange)

Lynne D. Feldman, M.D. (Valdosta)

PRIVATE PROVIDERS OF EARLY INTERVENTION SERVICES

Milagros Cordero, Ed.D., OTR/L (Atlanta)

Tish Seay, Ed.D. (Milledgeville)

STATE AGENCY REPRESENTATIVES

Phil Pickens

Department of Education
Division for Exceptional Students

Russ Toal

Department of Community Health

Lanier Dasher

Office of the Commissioner of Insurance

Kathleen E. Toomey, M.D., M.P.H.

Department of Human Resources
Division of Public Health

Juanita Blount-Clark

Department of Human Resources
Division of Family and Children Services

PERSONNEL PREPARATION

Cindy Vail, Ph.D.

Department of Special Education
University of Georgia, Athens

HEAD START

Robert Lawrence, Ph.D.

Head Start State Collaboration Project
Office of School Readiness

CHILD CARE

Susan Maxwell

Georgia Child Care Council

PERMANENT REPRESENTATIVES

Charles Hopkins

Department of Human Resources
Division of MH/DD/AD

Eve Bogan

Department of Human Resources
Division of Public Health

Sheila Langston

Department of Education
Division for Exceptional Students

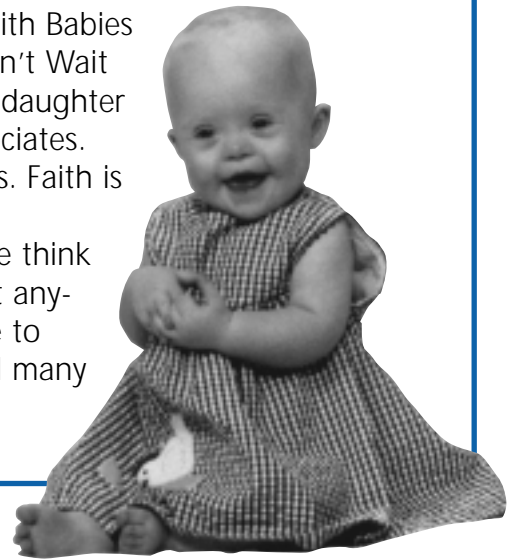
Argartha Russell

Department of Community Health
Division of Medical Assistance

Jon M. Anderson

Right from the Start Medicaid Outreach Project

"Our daughter, Faith, was born April 12, 2001. She has Down syndrome. We learned of the diagnosis in the 16th week of pregnancy through amniocentesis. Prior to Faith's birth we became involved in a local support group for parents of children with special needs. At one of those meetings, we met Marsha Browning, Service Coordinator Supervisor with Babies Can't Wait. I cannot begin to explain how much Marsha and Babies Can't Wait mean to us. They are always there for us - just a phone call away. Our daughter receives the best possible care, thanks to Babies Can't Wait and its associates. Goals are set for Faith, and when those goals are met, we set new ones. Faith is advancing at a much faster rate than we ever dreamed possible. During every meeting with Marsha, we are asked if there is anything we think Faith needs, anything BCW can do for us, or if we are concerned about anything. That means a lot to us. We feel we are doing everything possible to give Faith every advantage in life. Our little girl is very special to us, and many of her achievements are due to the tireless work of Babies Can't Wait."



licc

What are the Local Interagency Coordinating Councils?

In an effort to develop and maintain an effective, family-centered, community-based early intervention system, each of Georgia's 19 health districts has at least one local interagency coordinating council (LICC). No two communities are alike, therefore, collaborative efforts evolve and operate differently from one location to another. As independent groups, these local councils play a key part in the collaborative process. Modeled in membership after the SICC, LICCs advise and assist the local health district on all aspects of the local BCW system. They take into consideration both state and local policies, as well as the provision of direct services. LICCs are an integral part of Georgia's early intervention system.

2000-2001 Allocations

Fund Sources:

July 1, 2000 – June 30, 2001

State Funds (SFY 01): \$9,908,641

Federal Funds (FFY 99): \$10,497,445

Carryover to FY 2001: \$650,000

TOTAL FUND SOURCES : \$21,056,086

EXPENDITURES: July 1, 2000 – June 30, 2001

STATE OFFICE EXPENDITURES

Operations	\$ 904,445
Training & Technical Assistance	\$ 968,926
SICC	\$ 178,768
TOTAL STATE OFFICE EXPENDITURES	\$ 2,052,139

LOCAL PROGRAM EXPENDITURES (Grant-In-Aid)

Service Coordination	\$5,556,082
Administrative/Infrastructure	\$3,910,891
Evaluation & Assessment	\$1,707,180
Family Support	\$ 498,475
Early Intervention Services	\$7,331,319
TOTAL GIA EXPENDITURES	\$19,003,947

quality assurance

Reaching new standards of service and care

BCW is continuing its extensive process of self-assessment and improvement planning, part of the federal Office of Special Education Programs' (OSEP) monitoring of the early intervention system in Georgia. The steering committee submitted its self-assessment report to OSEP in January, 2001. After reviewing the report, OSEP decided that no on site visit from their office was necessary. The steering committee is now working on an improvement plan to resolve issues identified in the self-assessment and implement procedures to make the BCW system more responsive to family needs.

The BCW Data System is now a very prominent tool in the ongoing monitoring/improvement process. This system enables the state office to track key performance indicators, both in aggregate form and by individual district. This information is reported back to each district on a quarterly basis for its use as a management tool in the overall effort to improve services to families. Soon districts will be able to retrieve this information without having to wait for the quarterly report to be sent to them.

Babies Can't Wait (BCW) is currently in the second three-year program review cycle. Each district is reviewed once every three years by a team comprised of family members and public and private providers of early intervention services.

Babies Can't Wait - Helping Families

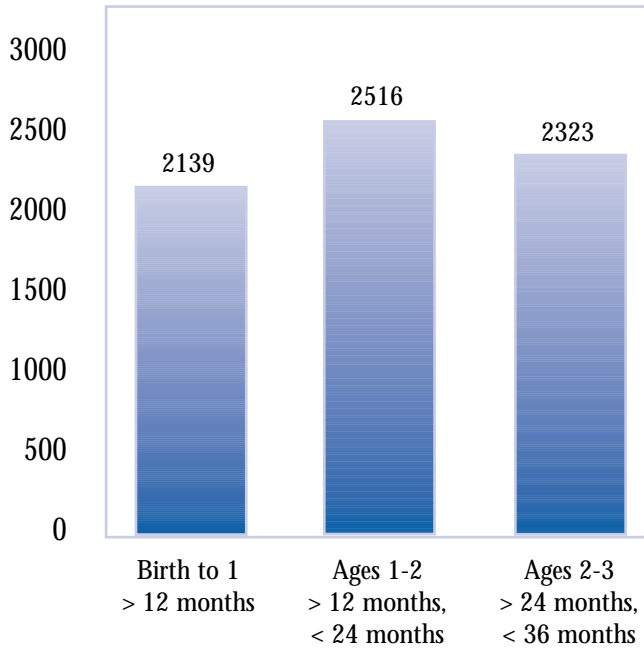
"Katy Ann was diagnosed at seven months with Down Syndrome and we were referred to Babies Can't Wait. Katy Ann has accomplished much in her short life, partly due to the efforts and knowledge of her therapists through Babies Can't Wait. She began drinking from a cup and feeding herself with assistance at 18 months and independently by two years of age. She started walking at 20 months of age, over four months earlier than the average age for children with Down Syndrome, and now is running and climbing stairs. She is almost dressing and undressing herself completely and has begun potty training. Katy Ann has met most of her goals and no longer needs to receive regular occupational or physical therapy. Katy Ann has begun putting words together to make sentences and uses sign language to facilitate her communication skills and to reduce frustration while she continues to receive speech therapy. Katy Ann began attending a ballet class in 2001 and also participates in the two year old preschool class at our church where she is able to keep up with her peers.

Our Babies Can't Wait coordinator keeps me, as a parent, informed of upcoming events and has encouraged me to attend State and local interagency coordinating council meetings. Babies Can't Wait also informed and encouraged me to participate in the Partners in Policymaking class through the Governor's Council on Developmental Disabilities and Atlanta Alliance on Developmental Disabilities. I facilitate a Down Syndrome Play Group in my area and am often able to talk with families of children diagnosed with Down Syndrome as they are initially entering Babies Can't Wait.

Katy Ann has reached many goals that for the typical child would be a fairly easy feat, but has taken a lot of effort and hard work for her, her family and her therapists. The Babies Can't Wait program has played a major role in the development of our daughter. It has been exciting to see not only what our daughter has accomplished but also the sheer joy that she has when she conquers something that she is working on. I am thankful to the Babies Can't Wait program and for the State of Georgia who has had the foresight to utilize this program and continue to finance and support it by offering early intervention to the children of Georgia."



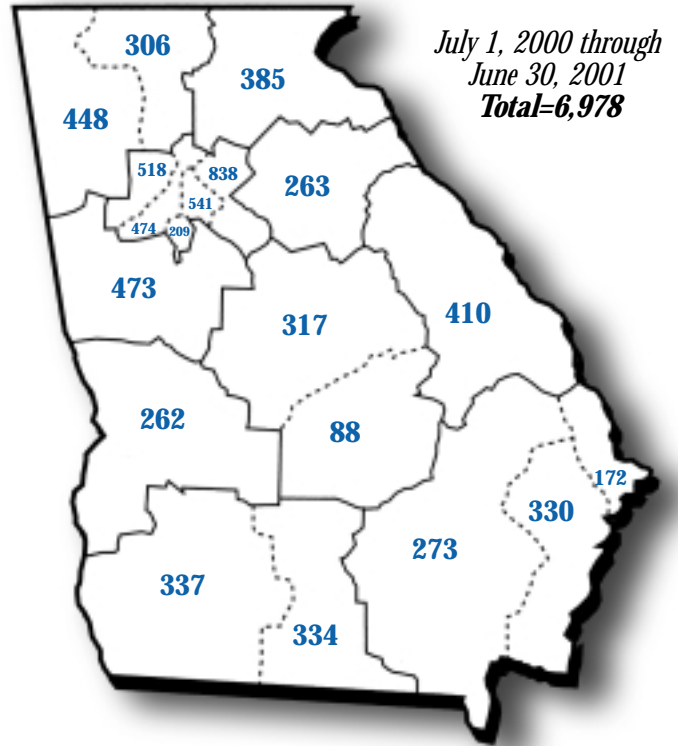
Unduplicated Child Count by Age



July 1, 2000 through June 30, 2001

Total=6,978

Unduplicated Child Count By District



The Child Count on December 1, 2000 was 3,427.

Samuel
"Samuel has made tremendous progress. He is now two years old and walking, talking, climbing, and doing all the things kids his age do. His vision has also improved. We credit much of his success to the therapists who have helped him and our family. We appreciate all of the help we have received from Babies Can't Wait!"

Shelton

Claire

Shelly

Luke

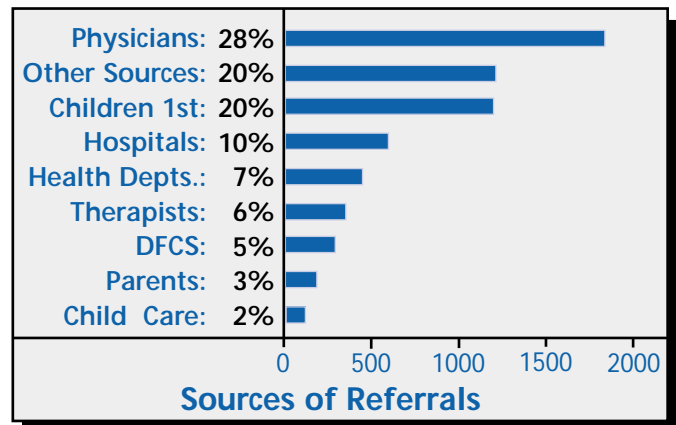
Shelby
"Babies Can't Wait is an exceptional program and I would recommend it to anyone whose child needs services. I tell everyone that we are in Babies Can't Wait and that I don't know where we would be without it."

referrals

Over 6,100 children were referred to Babies Can't Wait between July 1, 2000 and June 30, 2001. Referrals to Babies Can't Wait can be made by anyone. Twenty percent of referrals came from the Children 1st system, the Division of Public Health system single point of entry, while 28% of referrals were received from physicians. The remaining referrals came from other community sources, including families, child care providers, additional health department programs, early intervention providers, and other organizations.

During the reporting period, the BCW Central Directory referred 465 calls to the BCW program, added 460 new providers and resources, and referred 4,213 callers to early intervention providers. The Central Directory website received an average of 1,644 hits per day, with 5,115 searches conducted by visitors to the web-based Special Needs database during the year.

Babies Can't Wait works closely with Children's Medical Services and other Children with Special Needs programs as well as with the Children 1st programs throughout the state to ensure timely referrals of potentially eligible children to the program. Each local Babies Can't Wait program is expected to develop and maintain a strong local referral network.



credentialing system

As a component of Georgia's Comprehensive System of Personnel Development, training modules in six areas of early intervention competencies have been developed to ensure that personnel have a basic knowledge foundation and an understanding of "best practice" in early intervention when working with infants and toddlers and their families. The six skill areas, known as Project SCEIs (Skilled Credentialed Early Interventionists), include:

- typical and atypical development in infants and toddlers
- family systems and family involvement
- evaluation and assessment
- program implementation and evaluation
- administrative and team processes
- professionalism in early intervention.

During this reporting period, modules were revised and updated to ensure that content is current and reflective of best practices in early intervention and early childhood. Modules are provided at two training levels: paraprofessional and professional. Training is offered at no cost and is available to anyone providing services through Babies Can't Wait (BCW) and to families of children in BCW. Individuals with extensive training and knowledge may take the standardized Early Childhood Special Education Exam (PRAXIS) rather than completing the six SCEIs modules.

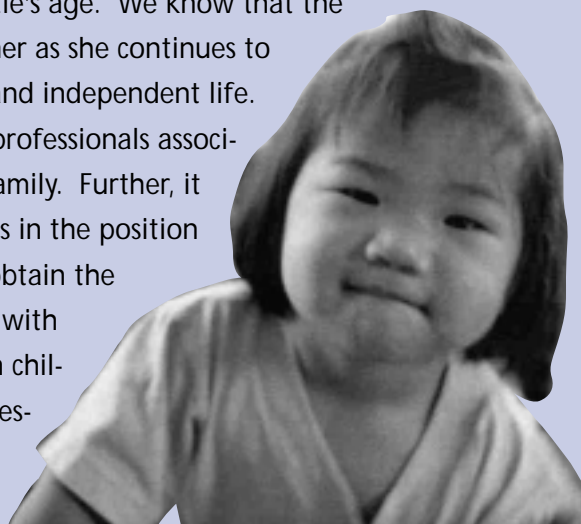
Completion of the modules or achievement of a passing score on the PRAXIS exam within two years of employment and/or contracting is required for paraprofessionals, service coordinators, and persons providing and/or supervising special instruction in BCW.

Upon completion of the six modules, a voluntary early intervention credential may be completed by individuals. Credentialing involves a mapping process that synthesizes the content of the six modules through the application of case study and is specifically linked to the individuals' role in the BCW system.

In addition, continuing education requirements become effective for individuals upon completion of the six modules, regardless of whether or not a credential is pursued/obtained. Paraprofessionals are required to complete ten contract hours per year specific to children birth to eight years and/or their families; five of these hours must be specific to young children with disabilities. Professionals must complete twenty contact hours every two years specific to children birth to eight years and/or their families; ten of these hours must be specific to young children with disabilities.

Babies Can't Wait - Helping Families

"Katie was adopted from China in March of 2000. In late April and early May of 2000, Katie was diagnosed with a serious illness which nearly resulted in her death and subsequently resulted in severe hearing loss, paralysis, and other conditions. From the moment of our first contact with the professional and compassionate staff at Babies Can't Wait, we felt very relieved and grateful for their assistance and care. A wonderful physical therapist has helped our daughter to walk and even run, when we were told that she may never walk. Babies Can't Wait helped us find a local audiologist who addressed Katie's hearing aid needs and connected us with Children's Medical Services for assistance in obtaining hearing aids. When Katie received a cochlear implant, Babies Can't Wait was able to help us access auditory verbal therapy. We were also relieved to know that many of the Babies Can't Wait therapists would come to our home to work with Katie, instead of requiring us to go to an outside formal office. This has been a wonderful and convenient way for Katie to receive the assistance she needs, in an informal setting in which she is more comfortable and surrounded by her siblings, two of whom are also Katie's age. We know that the early intervention Katie has received will greatly benefit her as she continues to grow and develop, helping her to lead a fully functional and independent life. We will be forever grateful to Babies Can't Wait and the professionals associated with them who have helped our daughter and our family. Further, it is our hope that other families, who might find themselves in the position we were in with Katie, will also have the opportunity to obtain the assistance we were so blessed to receive from our contact with Babies Can't Wait. We hope other families, like ours, with children who can't wait, might also receive these quality professional and compassionate services."



activities & progress

BCW is involved in many efforts statewide to enhance the quality of services available to children with special needs and their families. During this reporting period, BCW collaborated with a variety of agencies and groups to promote integration of services and to support initiatives that will benefit children with special needs throughout Georgia.

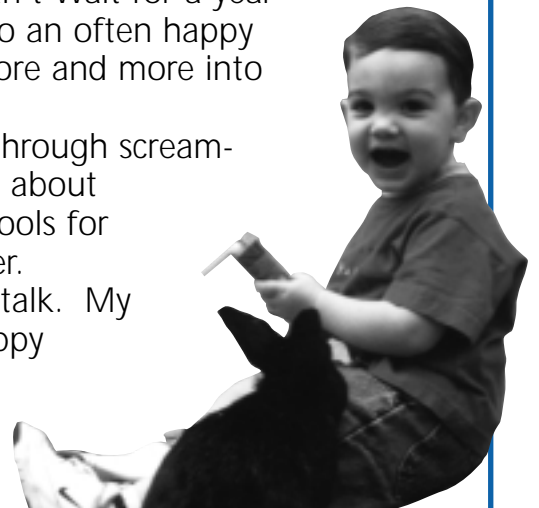
- **Healthy Child Care Georgia** - A project to improve health and safety in child care settings.
- **Governor's Council on Developmental Disabilities Family Support Policy Council** - A group of key stakeholders with the mission of ensuring consistent access to family support resources throughout Georgia. Collaborating partners include the Governor's Council on Developmental Disabilities, Family Connections, Babies Can't Wait, Division of Mental Health/Developmental Disabilities/Addictive Diseases, family members, and private agencies.
- **Universal Newborn Hearing Screening and Intervention** - Worked with UNHSI program and Georgia PINES (Parent Infant Network for Educational Services) to ensure consistent early orientation to hearing loss for all families of infants identified through early screening and detection. Collaboratively developed educational orientation materials to be used in orientation to hearing loss with all families of infants with hearing impairments.
- **Georgia Association on Young Children (GAYC) Annual Conference** - Co-sponsored this large staff development opportunity for providers of child care, preschool special education, Head Start, early childhood education, human services, and early intervention.
- **Georgia Child Care Training Calendar** - Publicized Babies Can't Wait training opportunities for interested child care providers statewide.

In an effort to further promote and support inclusion of children with special needs in community-based child care settings, a training module was developed for child care providers and piloted in several areas of the state. This module addresses inclusion, early intervention, and working with a team within the context of a child care setting to meet the needs of a child with special needs.

Connor

"Connor is three years old and is an amazing beautiful child with a diagnosis of Pervasive Developmental Disorder. After being in Babies Can't Wait for a year he is a different child. He has gone from a miserable child to an often happy child. When Connor was first diagnosed, he was going more and more into his own little world.

At two years old the only way he could communicate was through screaming. Our service coordinator with Babies Can't Wait told us about books to read, conferences to attend, service providers, schools for Connor, and how to apply for the Medicaid Deeming Waiver. After a few weeks of special instruction, Connor started to talk. My son who used to only be able to scream can now sing "Happy Birthday" to me and say..."Mommy, can I go ride bike?" Early intervention works. With early intervention done the right way, my son will not be a burden on society."



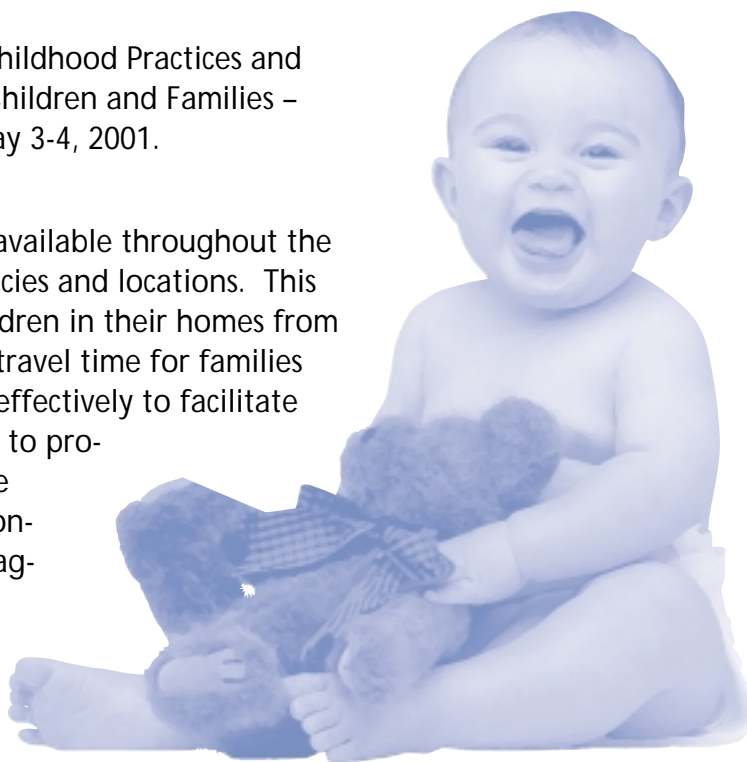
Parent Support & Parent Education - Thirteen BCW Parent Educators are employed and working throughout Georgia to provide support, information, and resources to families of infants and toddlers with special needs. These Parent Educators, including one statewide cultural diversity specialist, support families one-on-one and in group settings, develop local/regional newsletters and support groups, and assist in the planning and provision of the annual conference for families of children in BCW. During this reporting period, two parent conferences were held: one for families statewide and one pilot conference for Latino families during which simultaneous interpretation equipment was tested. Planning is underway to combine the two conferences and use the equipment to facilitate involvement of non-English speaking families during the next reporting period.

Professional Development - Professional development opportunities were offered by the BCW Technical Assistance (TA) Unit in the priority areas of evaluation and assessment, inclusion, cultural competence, and effective team collaboration. Ongoing TA was provided in various content areas, including fiscal policies, data collection and entry, eligibility, report writing, and functional outcomes and strategies. Continued analysis of data and IFSPs suggest that TA activities have resulted in more appropriate outcomes for children.

In order to continue to assist and support local BCW programs and providers in developing and enhancing skills necessary to ensure quality provision of early intervention services, the following professional development activities occurred during this reporting period:

- Carolina Curriculum for Infants and Toddlers with Disabilities – February 22, 2001.
- The Missing Link: Do You Know What You're Missing – May 30, 2001 and June 27, 2001.
- 24/7: Making the Most of Services in the Natural Environment – June 29, 2001.
- Culture, Diversity, Disability, and Families: Considerations for Special Education Service Providers – teleconference presented through the Pennsylvania Department of Education and Pennsylvania Training and Technical Assistance Network was made available to participants at four locations throughout Georgia on March 29, 2001.
- Collect, Select, Reflect: Adapting Early Childhood Practices and Materials to Honor the Diversity of our Children and Families – Higher Education Research Institute – May 3-4, 2001.

Telehealth – Video conferencing technology is available throughout the state and in a number of private provider agencies and locations. This technology enables providers to work with children in their homes from a remote site, resulting in decreased costs and travel time for families and providers. This technology has been used effectively to facilitate team involvement in the development of IFSPs, to provide therapy consultations, and to supervise the provision of special instruction by paraprofessionals. Services for children with low-incidence diagnoses are often enhanced by the use of telehealth technology to access services via video conferencing.



challenges

A lack of available personnel, particularly speech-language pathologists and occupational therapists, continues to make access to services a challenge. The use of telehealth video conferencing technology has been one approach to address this issue. However, the federal mandate to serve children in natural environments is made more difficult by these issues. This challenge is compounded by the fact that third party reimbursement is often unavailable for services provided outside of clinic settings.

The mandate to serve children in natural environments, unless their developmental outcomes cannot be achieved in that setting, has been the focus of extensive training and service delivery reconfiguration in order to effectively meet the needs of children and families. In order to continue to improve the quality of the service delivery system, training continues through the involvement of families, child care providers, therapists, special instructors, and BCW Staff.

Georgia coordinates and uses existing community resources to make early intervention services available. Because team members are usually not

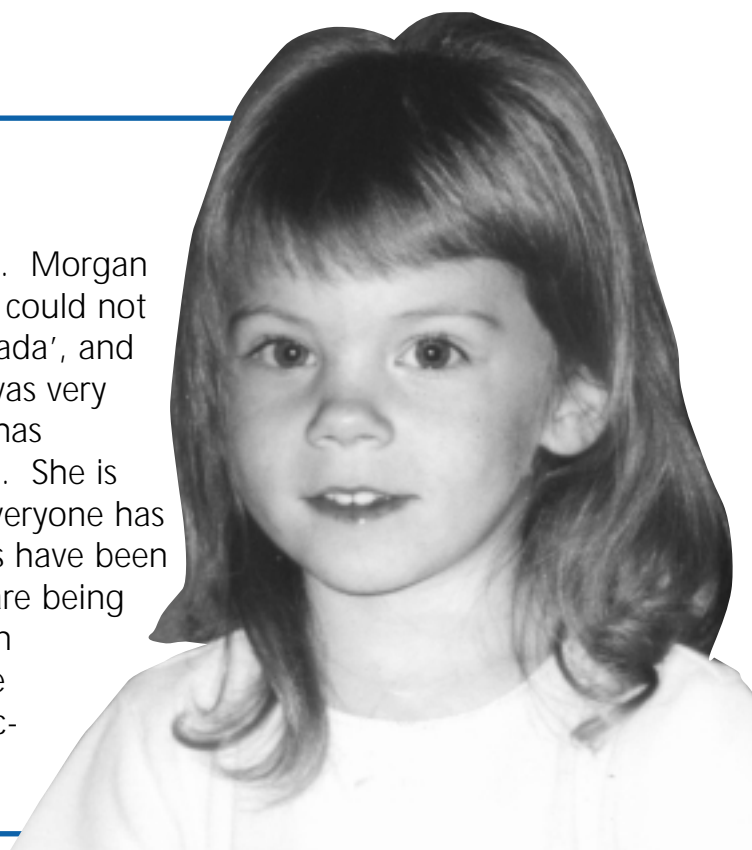
co-located, the establishment and recruitment of true multidisciplinary teams is a challenge. BCW has explored technical assistance, training, and rate structures as strategies to ensure the integrity of the team process. This continues to be a challenge.

To ensure that services are streamlined and families are given access to the full range of available Maternal and Child Health services, health department services for children are being restructured at the state and district levels. While this benefits families, it is a challenge to incorporate the early childhood special education mandates of Part C in a health agency. State and local BCW staff participate on a number of work groups to ensure that integration occurs within the context of the legislative intent of IDEA.

Georgia is geographically large and continues to struggle to provide effective teams to serve children and families. The Technical Assistance Unit, along with local BCW programs, continues to develop strategies for more effective teaming among professionals.

morgan

"Babies Can't Wait is a wonderful program. Morgan started this program at the age of one and could not say more than a few words like 'mama', 'dada', and 'bye-bye'. Her walking was terrible. She was very unstable. Now at age two her vocabulary has expanded. She is trying to make sentences. She is climbing and going up and down steps. Everyone has been great. Our coordinator and therapists have been very helpful, making sure Morgan's needs are being met, keeping the communication lines open between myself and them, and keeping me updated on Morgan's progress. I would recommend them to anyone.



goals

As we move forward, a continued goal and emphasis for Babies Can't Wait is increased collaboration and integration with other public health programs that serve children with special needs and their families. Such integration will ensure the most comprehensive services possible for the child and family without unnecessary duplication.

Another major focus has been the development of Georgia's Improvement Plan as the next phase of the Continuous Improvement Monitoring Process. Future efforts will be guided by the outcomes and activities identified in this plan. Components will include improvement planning and activities in the areas of child find and identification, transition, family-centered services, state-level supports and structures, and service delivery.

A third emphasis will involve development and provision of training in a variety of modalities throughout the state designed to support continued enhancement of the BCW system through service delivery models that facilitate full implementation of the natural environments mandate. Individualized programs for eligible children will be primarily implemented by a single provider, with ongoing consultation provided by team members from other disciplines. Each child's therapy will be integrated into daily routines and therapists will continue to have direct contact with children in order to be effective while decreasing the number of professionals who interact with a child on a daily basis. Therapists and educators will maintain accountability for information shared while providing support and coaching to family members and caregivers who can encourage a child to use skills during daily activities, when early intervention providers are not present. Ultimately, the true intent of early intervention, to enhance the capacity of family members to more fully provide for the needs of their children and to enhance each child's development, will be realized through such changes. In order to ensure the effective provision of these evidence-based service delivery practices, ongoing collaboration with therapy associations, families, referral sources, higher education faculty, and potential funding sources will be ongoing at the state and local levels.

Babies Can't Wait - Helping Families

"Taylor was born on April 4, 1999, a healthy baby girl weighing 6 pounds, 12 ounces. At 10 days of age, she developed a fever of 102 degrees. She was rushed to the hospital and diagnosed with bacterial meningitis. She was also experiencing seizures as a result of the fever. At 4 months of age, we noticed that Taylor was not using her right hand and learned that she had experienced a stroke. Her physical therapist referred us to Babies Can't Wait. Taylor began receiving occupational therapy and speech-language pathology in addition to physical therapy. At one year of age, Taylor was fitted with an ankle-foot orthotic (AFO) brace that helps her to walk without her foot turning outward. She was also fitted for a hand splint that helps her hand to stay open and her thumb to stay out. Today Taylor is walking and running, speaking some words, continuing to make progress. Her therapists have been very helpful and a blessing to Taylor and our family. I am thoroughly pleased with the Babies Can't Wait program and would recommend it to anyone whose child has special needs."



Georgia Department of Human Resources

Jim Martin, Commissioner

DIVISION OF PUBLIC HEALTH

Kathleen E. Toomey, M.D., M.P.H., Director

FAMILY HEALTH BRANCH

Rosalyn K. Bacon, M.P.H., Director

PROGRAMS & SERVICES

Eve Bogan, M.A.

OFFICE OF CHILDREN WITH SPECIAL NEEDS

Wendy Sanders Chapman, M.Ed., Team Leader

Wendy Miller, MPA, CSN Operations Support Manager

BABIES CAN'T WAIT PROGRAM

State Office Staff

Stephanie Moss, M.A.
Program Manager

Helen Dulock, R.N., D.N.S.
CSN Nursing Specialist

Bob Herrin
Quality Assurance Coordinator

Susie J. Rhoden
CSN Program
Associate

SeQuoyah Johnson
CSN Program
Assistant

CONTRACTED TECHNICAL ASSISTANCE/CSPD STAFF

Marti Venn, Ph.D.
Valdosta State
University

Karla Hull, Ed.D.
Valdosta State
University

Mary Rugg, M.Ed.
University
of Georgia

Sharon Meek, M.Ed.
Assistive Technology
Consultant

Sarita Reddy, Ph.D.
University
of Georgia

Julie Lee, Ph.D.
Valdosta State
University

Connie Myers Jennings, Ph.D., CCC-SLP
Valdosta State
University

Peggy Gallagher, Ph.D.
Georgia State
University

**To receive a copy of this
Report, please contact:**

Stephanie Moss, BCW Program Director
2 Peachtree Street, N.W., Suite 11-206, Atlanta, GA 30303-3186
404-657-2726 • skmoss@dhr.state.ga.us

Website: <http://health.state.ga.us/programs/bcw/>





DHR
GEORGIA
DEPARTMENT OF
HUMAN RESOURCES