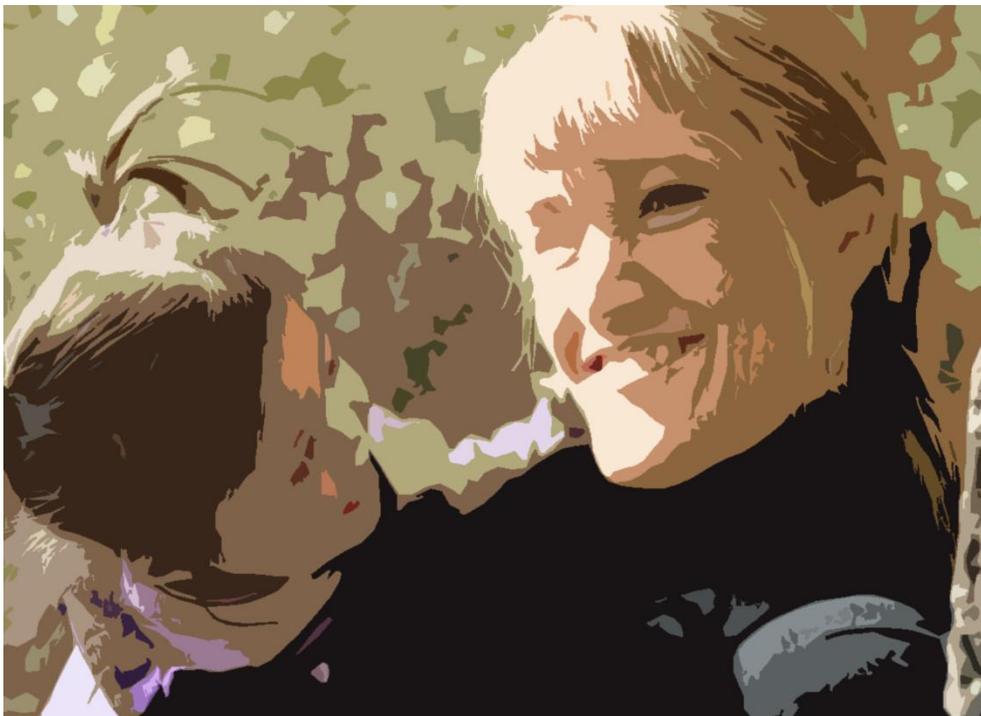


Family Centered Early Supports and  
Services Public Report 2015  
Report period 7/1/13-6/30/14



6/1/2015



“[Our provider] has helped our daughter tremendously! Every visit our daughter learns more and more from [her], she is great! During our time with [FCESS], our daughter has surpassed many goals set, and I am so thankful for these services offered to help. Without [her], I'm not sure if my daughter would be talking and expressing herself as well. We will miss our monthly visits with her! Thanks for the services and the opportunity to work with [FCESS]!”



*“Our responses were reflective of the fact we have only used the speech therapy services. Overall, we find [FCESS] an extremely effective and comprehensive provider of early intervention services. The communication program is excellent, the goals are clear and the outcomes for our children (2 children have gone through speech therapy) have been excellent. Also the ability of the therapist to go to my child's daycare for their weekly session is highly correlated with the successful outcomes as we are a dual-working family and it would be very challenging to make this work otherwise. Thank you for all you do!”*

“My grandson spends a lot of time at CHAD and spent a lot of time at Boston Children’s Hospital. So he was very behind in all areas of development. “[FCESS] has been unbelievable in his development. The info that we received was spot on, period.”

*“[FCESS] has been amazing working with our family. She is knowledgeable, respectful, understanding and overall very helpful and great with [our son]. He has made great strides since starting services.”*

“Our child has been receiving OT services over the past year and it has been a great experience. [Our provider] is very helpful in explaining [our child’s] progress and answering questions along the way. Thank you for offering these services to premature babies like ours and children with special needs throughout NH.”

*“Really great experience. [FCESS] was always so helpful and not only provided excellent service, but created a comfortable environment for us all. Always able to accommodate our needs and schedule, and always provided us with easy to follow steps to help us continue to improve physically.”*

The New Hampshire  
Family Centered Early Supports and Services Program  
is administered by  
The Department of Health and Human Services

Nicholas Toumpas, Commissioner  
Deputy Commissioners, Sheri Rockburn and Diane Langley

Bureau of Developmental Services

Bureau Administrator, Lorene Reagan  
Part C Administrator, Linda Graham  
Part C Coordinator, Carolyn Stiles  
Part C program specialist, Kerry Wiley

For information, Please Contact the Bureau  
at 271-5060  
or 1-800-852-3345 x5034

or [www.dhhs.nh.gov/dcbcs/bds/earlysupport/index.htm](http://www.dhhs.nh.gov/dcbcs/bds/earlysupport/index.htm)

For this report, the state Annual Performance  
Report (APR)

The state Performance Plan (SPP)  
and other data, forms or more information  
please refer to

[www.dhhs.nh.gov/dcbcs/bds/earlysupport/index.htm](http://www.dhhs.nh.gov/dcbcs/bds/earlysupport/index.htm)

2015

**New Hampshire Family Centered Early Supports and Services**

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1. Mission -including purpose of this report, vision and Strategic goals
2. How we do what we do (with a New Hampshire map of Area Agency Regions)
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6. Transitions
7. How we are funded
8. Interagency Coordinating Council
9. Compliance with Federal Performance Indicators

The purpose of this report is to let the public know how NH Family Centered Early Supports and Services (FCESS) programs complied with federal regulations for the reporting period of 7/1/13 to 6/30/14 compared to performance targets stated in the State Performance Plan (SPP). In most cases, NH's FCESS programs exceeded the federal requirements. This also is a report of general information gathered across the state.

The Bureau of Developmental Services is pleased to issue this report.

## VISION

The Bureau of Developmental Services and the Area Agencies through which it contracts hold the following vision for all children and their families: \* All children and families are supported and encouraged to grow, learn, plan and share their lives with other children and adults within their communities; \*All children and families have access to available community resources to assist them in achieving their chosen goals; and \*All children and families are respected for their unique individual beliefs, values and culture.

## MISSION STATEMENT

Given the above vision for all children and their families, the Bureau of Developmental Services and the Area Agencies through which it contracts will: \*Enhance the development of children, ages birth through two years, who experience developmental issues and risks; \*Assist and support families' ability to care for their children, ages birth through two years, experiencing developmental issues and risks, and their families; \*Provide assistance and training to increase the ability and commitment of communities to embrace and support families and children ages birth through two years, experiencing developmental issues and risks; and \*Promote and expand family-centered supports, both formal and informal, throughout the state.

## STRATEGIC GOALS

The Bureau of Developmental Services and the Area Agencies through which it contracts will accomplish its' mission on behalf of children ages birth through two years with developmental issues and risks and their families by: \*providing ongoing information, education, training and assistance to children, \*families, communities and professionals; \*minimizing barriers and maximizing efficiency and resources for children and families through close collaboration with communities; and ensuring the quality, flexibility, and responsiveness of services and supports by monitoring their effectiveness and by collecting data and feedback from families, service providers and communities.

## How we do what we do

Services to children and their families are provided through the Area Agency serving the town in which the family lives. The Regions numbered and delineated on the map displayed here are served by the Area Agency listed on the left.

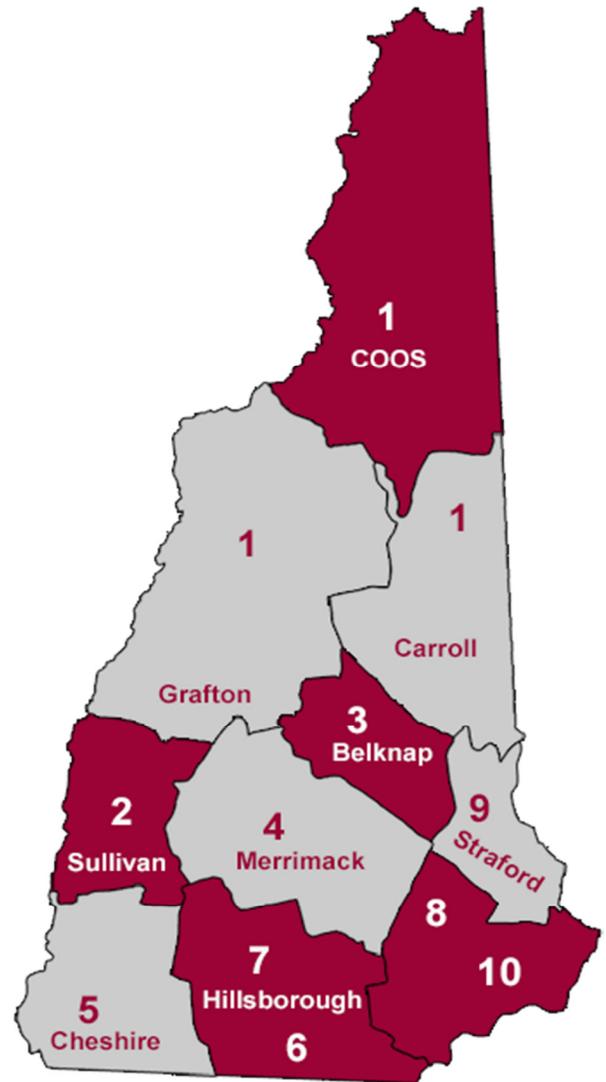
- Region 1 - Northern Human Services
- Region 2 - PathWays of the River Valley
- Region 3 - Lakes Region Community Services
- Region 4 - Community Bridges
- Region 5 - Monadnock Developmental Services, Inc.
- Region 6 - Gateways Community Services
- Region 7 - Moore Center Services, Inc.
- Region 8 - One Sky Community Services, Inc.
- Region 9 - Community Partners
- Region 10 - Community Crossroads

Each Area Agency provides developmental services, including Family Centered Early Supports and Services (FCESS), to individuals and their families throughout the lifespan. Specific referral information for FCESS is available

at

<http://www.dhhs.nh.gov/dcbcs/bds/earlysupport/index.htm>

The website has information on making a referral to FCESS. The eligibility Categories are listed. Intake Coordinators with the towns served and their contact information is listed in the program directory.



# Referrals

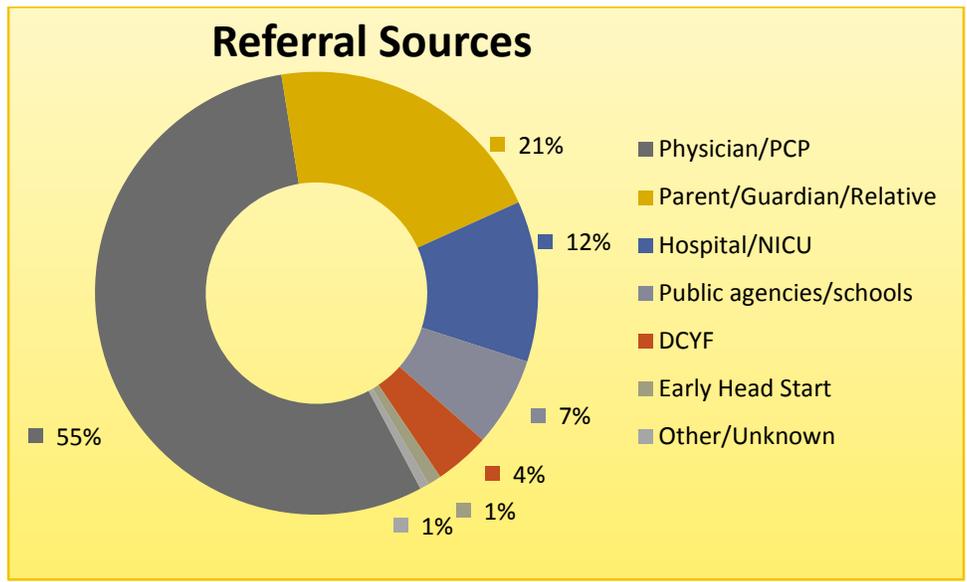
There are four ways in which a child may qualify for Family Centered Early Supports and Services.

1. The child has a diagnosed established condition that has a high probability of resulting in a developmental delay.
2. The child demonstrates atypical development.
3. The child is experiencing delays of 33% in one or more area of development.
4. The child is at risk for substantial delays

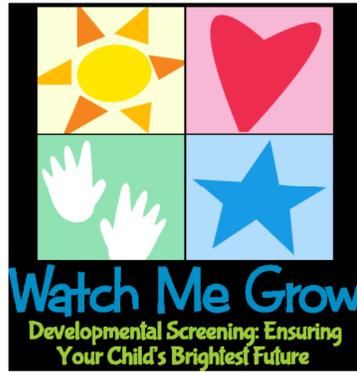
For specific information on referring a child or eligibility categories, please refer to [www.dhhs.nh.gov/dcbcs/bds/earlysupport/refer.htm](http://www.dhhs.nh.gov/dcbcs/bds/earlysupport/refer.htm)

2529 children were referred to FCESS during this report period.

Children are referred by a variety of sources. It is most common that family members, who know a child well, will have concerns about a child’s development. They make many of the referrals received at an Area Agency with the Intake Coordinator. Children who are not eligible are referred to other community resources.



## Watch Me Grow



Watch Me Grow (WMG) helps New Hampshire families to ensure their child's brightest future by tracking his or her growth and development. WMG is coordinated by the NH Department of Health and Human Services and the WMG Steering Committee, which includes representatives from state agencies and public and private organizations.

It is New Hampshire's developmental screening, referral and information system for families of children ages birth to six years. WMG is easy to use and has no cost to families.

### What does Watch Me Grow offer families?

- Information about children's health and development
- Developmental screening questionnaires based on the child's age
- Tips on how to help children grow and learn
- Timely connections to appropriate services, supports and resources when needed

### How Does it Work?

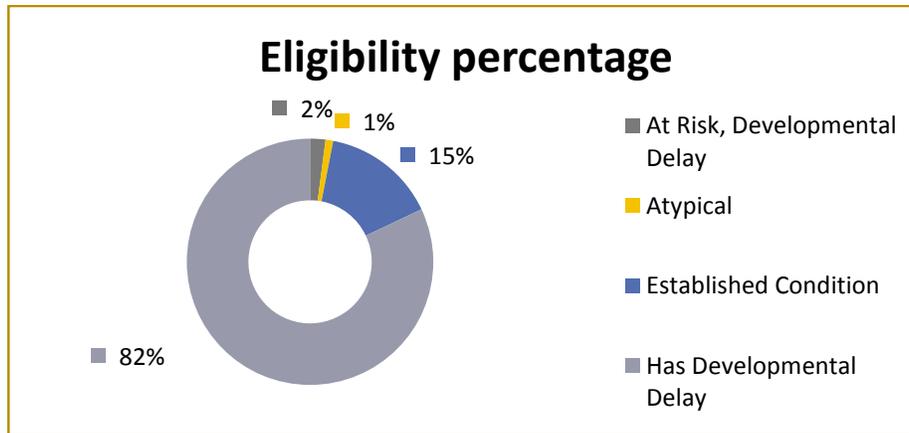
1. Parents get a copy of a screening from one of the resources.
2. They complete the screening questionnaire or complete it with help from the Family Resource center that gave it to them.
3. Return the questionnaire to the address listed on the form.

The Watch Me Grow child screening network is growing. Data collection continues to improve and the exciting new online ASQ will be available to families through the WMG website soon.

For more information: <http://watchmegrownh.com/about.php> about this screening program.

## Children who are eligible

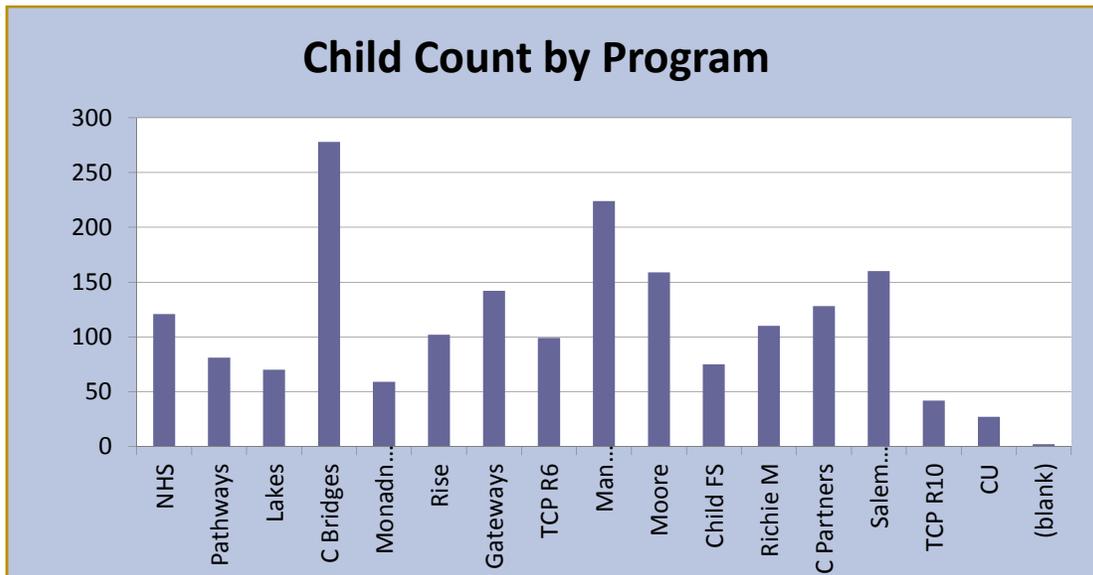
After referral and intake, a child is evaluated by a multidisciplinary team of two professionals from separate disciplines, such as a Speech Therapist and a Physical Therapist, to determine how a child is developing across several domains. This evaluation determines eligibility for FCESS. Children are often eligible in more than one area of development. This chart shows the distribution of children by eligibility category, with Developmental Delay the largest.



A 33% Developmental Delay is a delay in any one of these developmental areas: Adaptive, Cognitive, Communicative, Physical or Social/Emotional. Many children enter FCESS with more than one delay. We find that 49% of the children entering FCESS have communication as the first listed category in Developmental Delay.

<i>Domain</i>	<i>Percentage</i>	<i>Domain</i>	<i>Percentage</i>
Adaptive	4%	physical	17%
cognitive	2%	Social-emotional	2%
communication	49%	More than one	15%

Here we have a chart showing the number of children in each Region with an Individual Family Support Plan (IFSP) on December 1, 2014. There were 1879 children receiving services on that day. Please bear in mind that the number of children is constantly shifting as children reach their third birthday and move out of FCESS to other early childhood programs including local special education. Children also enter the program throughout the year and at any age between birth and three.



Boys tend to be enrolled more frequently with a percentage rate of 62% compared to girls of 38%

Ethnicity is compared to the general population of New Hampshire.

American Indian: 0.2%

Asian: 2.9%

Black: 1.1%

Hispanic: 3.4%

Multi-Racial: 4.3%

White: 88%



It is also important to compare children served by FCESS to the number of children living in New Hampshire of the same age as reported by the US Census of 2010.

Point in Time December 1, 2014

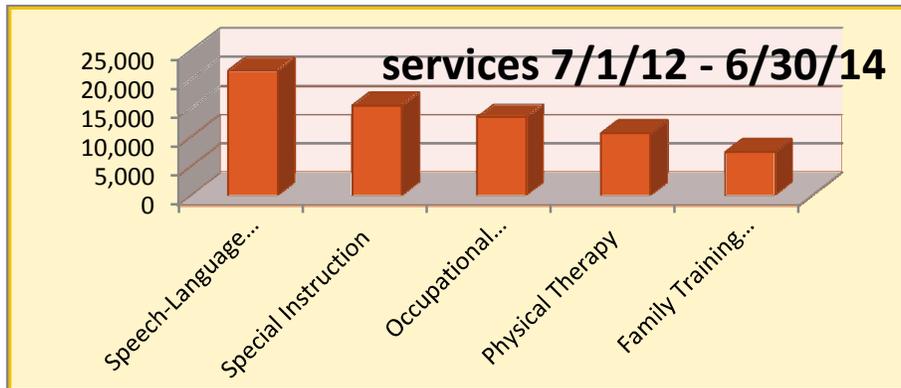
Percentage Birth to One Year: 2% of children birth to 1 year old were served by NH FCESS. This one day Point in Time data shows 263 children enrolled out of 12,991 in that age range.

Percentage Birth to Three: 4.6% of children birth to 3 were served by FCESS. This one day Point in Time data shows that 1879 children were enrolled out of 40,474 in that age group. This represents more than the national average.



## Service Delivery to Families and Children

Once a child has been evaluated and determined eligible, an Individual Family Support Plan (IFSP) is developed with the therapists and family to identify the needs and strengths of the child and concerns of the family. It is planned to maximize the use of the therapist's intervention to help the family support the development of their child.



The most common services provided in New Hampshire are Speech, and Special Instruction.

### Envisioning the future with the SEE Change Project-

A partnership has formed between NH Part B (preschool age children) and NH Part C using the Division of Early Childhood (DEC) Recommended Practices to improve outcomes for children and families in the Birth-5 population. This initiative brought together an impressive team of interested state and local leaders. The State Leadership Team includes representatives from state office FCESS, Preschool Special Education, Head Start Collaborative, Child Care, Division of Children, Youth and Families, Maternal and Child Health, Higher Education, Preschool Technical Assistance Network, Parents, local FCESS and Preschool programs. Programs participating were chosen from throughout the state and are working hard to bring the DEC Recommended Practices to the professionals in their programs and the families that they serve.

### State Systematic Improvement Plan

The state of NH, at the request of OSEP participated in an extensive infrastructure and data analysis to determine where the best place to aim quality improvement efforts would be. Efforts to improve the professional development system by ongoing coaching and mentorship would enhance many areas of our system. Data analysis and Root Cause Analysis led us to choose Child Outcome Summary Training, Cultural Competency, and DEC Recommended Practices (SEE Change Project above). With the help of stake holders, we determined these projects would give us a good return for our efforts.

Children in FCESS are served in their natural settings, usually their homes. Of the 1879 children with IFSPs on this day, 94% were served in either their home or a program for typically developing children, such as a childcare. The remaining 6% were served in other settings. These “other” settings are used to reach specific goals and are used for a limited period.

### **Family Outcomes:**

Families are asked on a yearly basis to rate their experience with FCESS in three areas. This program year:

- 87 % of those surveyed expressed an increased knowledge of their rights
- 91 % felt they had learned to communicate their children’s needs to family, friends and pediatricians and others
- 87 % felt FCESS had helped their child grow and learn.



Programs and projects to support children with autism and their families:

Funds in the federal Part C grant to NH, (14%), are reserved and dedicated to providing additional supports to infants and toddlers with a diagnosis of autism. Once a child has a diagnosis, a family may apply for these funds through the Area Agency to use towards the course of treatment they believe will benefit their child the most. Several programs have internal programs with comprehensive strategies for the child and parents, both center based and home based.

Community Partners in Region 9 organized training for providers throughout the state in the Early Start Denver Model to enhance the skills of staff working in each area as well as the capacity of programs to use this family-friendly model of intervention.

The NH Council on Autism coordinates efforts throughout the state to support and initiate activities on behalf of children and adults with autism.

SPARK NH, Spark NH is a private-public partnership charged with creating a comprehensive coordinated system of programs and supports for young children and their families. For more information, please visit the plan on the website: <http://sparknh.com/>

Family Outreach:

The Family Resource Connection: Housed at the NH State library, the Family Resource Connection (FRC) has an Online Lending Library with over 5,000 titles relating to current issues of concern to families with children. FRC has a toll-free phone number (1-800-298-4321) for NH residents to call for information, resources and referrals. If you are a resident of NH, you may borrow materials from the collection for FREE. FRC sends requested books, videos and other materials directly to *YOUR* local public library for convenient drop-off and return of items. <https://www.nh.gov/nhsl/frc/index.html>

NH Family Voices: NH Family Voices aims to achieve family-centered care for all children and youth with special health care needs and/or disabilities. Through our national network, we provide families with tools to make informed decisions, advocate for improved public and private policies, build partnerships among professionals and families, and serve as a trusted resource on health care. <http://nhfv.org/who-we-are/mission-and-vision/>

## **Child Outcomes**

Children who stay in the program 6 months are included in the Child Outcomes data report. States report data nationally on three outcomes:

- A. Social relationships which includes getting along with other children and relating well with adults
- B. Use of knowledge and skills which refers to thinking, reasoning, problem solving, and early literacy and math skills, and
- C. Taking action to meet needs, which includes feeding, dressing, self-care, and following rules related to health and safety.

*Please see the next page for details on the outcomes results in individual programs.*

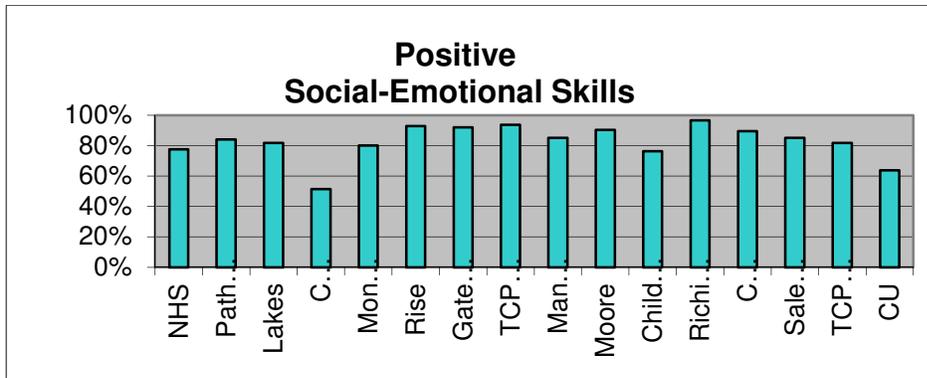
### **What does the outcome data mean?**

Family Centered Early Supports and Services serve young children with the full range of delays and disabilities including children with severe disabilities and degenerative conditions. Individualized goals are established for each child. For children with severe disabilities, skill acquisition will proceed slowly and some children may even lose skills. For other children, the program helps them catch up with other children their age.

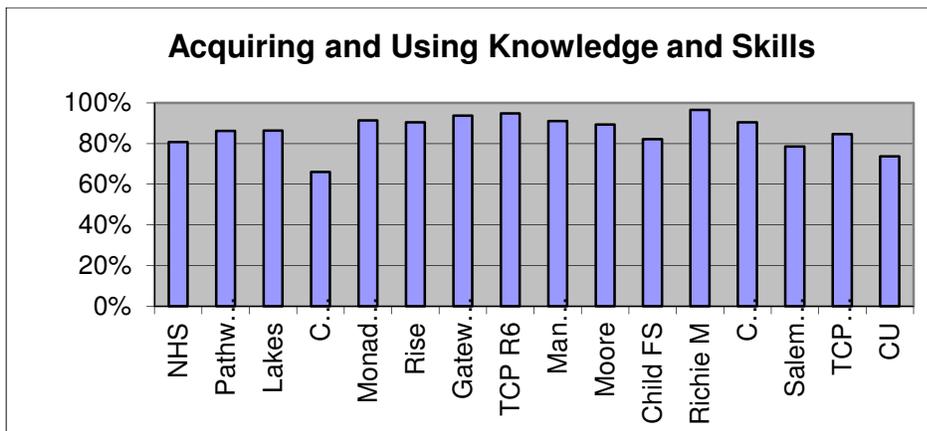
Until these data were collected, we did not know that so many children were showing such good outcomes. Additional data reported by states showed that nearly all children acquired new skills during their time in the programs. As we begin to use data on child outcomes to plan for program improvement, we would expect to see even better results in the future.

For more information about child outcome measurement, please visit the National Early Childhood Outcomes Center: <http://www.fpg.unc.edu/~eco/>

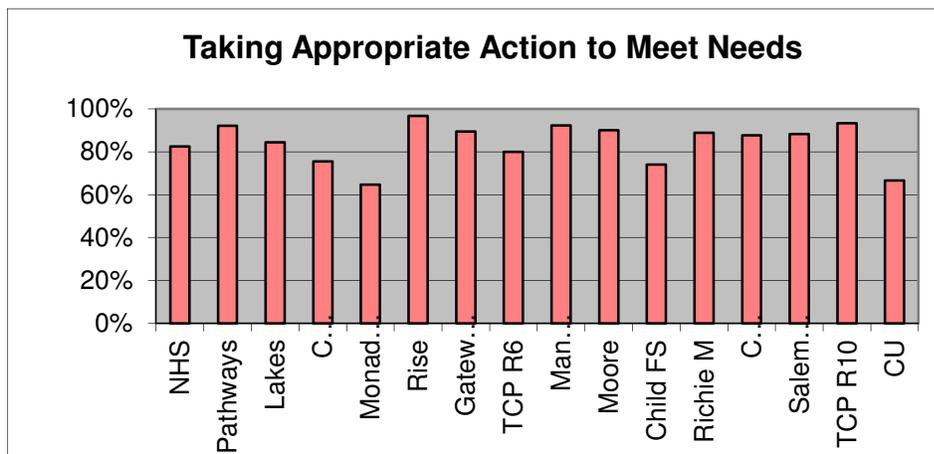
**A. Positive Social Emotional Skills:**



**B. Acquiring and Using Knowledge and Skills:**



**C. Taking Appropriate Action to meet needs**



## Transitions

All children leave FCESS at three years old. Their third birthday becomes a celebration and a departure. Approximately one third of FCESS children are referred to the local school district to evaluate their eligibility for preschool special education services (Part B). To ensure a smooth transition for children leaving FCESS, each family, Area Agency, the program provider and local school district work closely with each other in the months preceding a child’s third birthday to ensure a smooth transition for the child and his family.

This chart shows the reasons children leave FCESS.

ExitReason	F	M	Grand Total
Attempts to Contact Unsuccessful	54	72	126
Completion of IFSP Prior to Reaching Maximum Age for Part C	161	216	377
Deceased	3	4	7
Moved Out of State	48	42	90
Not Eligible for Part B, Exit With No Referrals	31	49	80
Not Eligible for Part B, Exit With Referrals to Other Programs	41	81	122
Part B Eligible, Exiting Part C	259	538	797
Part B, Eligibility Not Determined	20	72	92
Withdrawal by Parent or Guardian	72	97	169
<b>Grand Total</b>	<b>689</b>	<b>1171</b>	<b>1860</b>

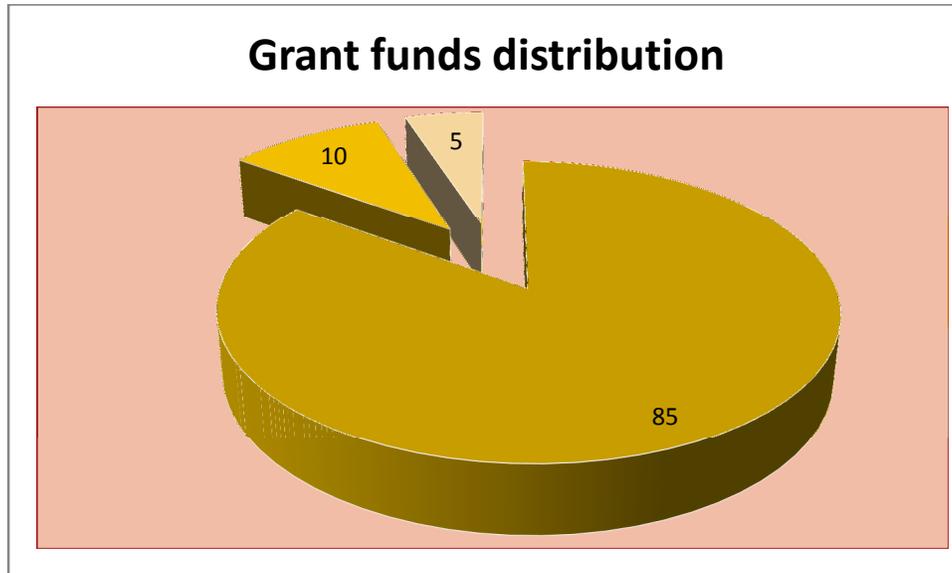
Many children meet their goals while enrolled in FCESS. They graduate and continue on their developmental track. Others reach the age of three and are not eligible for school district services, although they were referred.

Most often, they are referred into the community for other programs. These may be preschools, playgroups or other locally focused groups. Some children, because of their disability, may be eligible for preschool special education through their school district. Others may be eligible for school district services but may also be eligible to receive Area Agency services. There is tremendous diversity in the population of children enrolled in FCESS and their growth.

We applaud the work of all. Teamwork ensures our success.

## Funding for the program:

In NH, 85% of the Part C grant to the state is used for direct service in the programs providing services children and families. 10% goes to support the state office staff. 5% goes to support the trainings, initiatives and campaigns to raise public awareness of child development and Part C work as well as the work of the Interagency Coordinating Council.



# New Hampshire Interagency Coordinating Council

Part C of IDEA requires the establishment of an Interagency Coordinating Council (ICC). It is an advisory group to the Bureau of Developmental Services for the NH Family Centered Early Supports and Services program. The composition must include key individuals representing state viewpoints as well as parents of children with disabilities.

Every effort is made to have members from all regions of the state. Different communities represent different perspectives.

## Members calendar year 2014

Chair—Vacant  
Vice Chair—Charna Aversa  
Vice Chair—Sharon LaLiberte  
Secretary—Diane Bolduc  
Members at Large—Gloria Fulmer

## Mandatory Categories

Child Care—Ellen Wheatley  
BDS/FCESS—Linda Graham  
Foster Care—Eileen Mullen  
Head Start—Charna Aversa  
Health Insurance—Sonja Barker  
Homeless Education—Lynda Thistle Elliott  
Legislator—Mary Jane Walner  
Medicaid—Jane Hybsch  
Mental Health—Robin Raycraft Flynn  
Personnel Prep—Pat Cantor  
Special Ed—Ruth Littlefield

## Parents

Michelle Lewis  
Heidi Bright  
Sharon LaLiberte  
Nicole Gallant  
Jessica Bowen

## FCESS Providers

Gloria Fulmer  
Diane Bolduc

The purpose of the NH ICC is to promote and increase the quality of Family Centered Early Supports and Services (Part C of IDEA) and Preschool Special Education (Part B/619) supports and services to eligible children, birth through five years and their families.

The meetings are open to the public and are posted on this website:

<http://www.dhhs.nh.gov/dcbcs/bds/icc/index.htm>

## NHICC Recommended Categories

Area Agency/CSNI—Lenore Sciuto  
Special Medical Services—Sharon Kaiser  
PIC—Michelle Lewis

Preschool Special Education—Rochelle Hickmott-Mulkern  
Pediatrician—Kelly White  
Family Voices—Terry Ohlson-Martin

# COMPLIANCE WITH FEDERAL PERFORMANCE INDICATORS

## Local Indicators for New Hampshire

### Family Centered Early Supports and Services

The data collected were collected during the 2013-2014 monitoring period.

The New Hampshire Bureau of Developmental Services Family Centered Early Supports and Services provides the supervision required by the federal

government to administer this grant. This is public oversight and is called monitoring. Programs are monitored to ensure that children and families are receiving the services as well as to ensure that services are in compliance with state and federal regulations governing

Family Centered Early Supports and Services.

For detailed information on the rules HeM510 and HeM 203 governing FCESS please see the rules [at http://www.gencourt.state.nh.us/rules/state\\_agencies/he-m.html](http://www.gencourt.state.nh.us/rules/state_agencies/he-m.html)

The degree to which programs comply with IDEA requirements is measured by comparing the data from each program against the targets established by NH for the eight “performance indicators” identified by the federal Office of Special Education, US Department of Education.



## 2014 Local Determinations for Family Centered Early Supports and Services

The results from each program are displayed here.

Region	Program	Indicator 1 Timely Services	Indicator 2 Natural Settings	Indicator 7 Timely IFSPS 45 Day Timeline	Indicator 8a Transition Plan	Indicator 8b Referred to LEA	Indicator 8c 90-day transition conference	Financial Audit Findings	Uncorrected non-compliance	Timely submission of data
1	Children Unlimited	100%	100%	100%	100%	100%	100%	N	N	Y
1	Northern Human Services	100%	100%	100%	100%	100%	100%	N	N	Y
2	Pathways	100%	100%	100%	100%	100%	100%	N	N	Y
3	Lakes Region Community Services	100%	100%	100%	100%	100%	100%	N	N	Y
4	Community Bridges	100%	100%	100%	100%	100%	100%	N	N	Y
5	MDS-ESS	100%	100%	100%	100%	100%	100%	N	N	Y
5	Rise...for Baby and Family	100%	100%	100%	100%	100%	100%	N	N	Y
6	Gateways ESS	100%	100%	100%	100%	100%	100%	N	N	Y
6	The Children's Pyramid	100%	100%	100%	100%	100%	100%	N	N	Y
7	Easter Seals-Manchester	100%	100%	100%	100%	100%	100%	N	N	Y
7	Moore Center ESS	100%	100%	100%	100%	100%	100%	N	N	Y
8	Child and Family Services	100%	100%	100%	100%	100%	100%	N	N	Y
8	Richie McFarland Children's Center	100%	100%	100%	100%	100%	100%	N	N	Y
9	Community Partners	100%	100%	100%	100%	100%	100%	N	N	Y
10	Easter Seals - Salem	100%	100%	100%	100%	100%	100%	N	N	Y
10	The Children's Pyramid	100%	100%	100%	100%	100%	100%	N	N	Y

These are the descriptions for the Indicators listed:

Indicator 1, Timely Services: refers to how often IFSP services were provided on or before the projected start date for each service that the parent gave consent for on the child's IFSP.

Indicator 2, settings where services were/are provided: refers to the places where services are rendered. Services should be provided in the home, a child care facility or other place where all children grow and learn.

Services to only a few children, less than 6%, were delivered in other than these natural settings. These providers developed a plan and timeline to provide services in a natural setting in the future.

Indicator 4. (See next page for Family Outcomes)

Indicators 5 and 6: Indicator 5 refers to the children birth-1 with an IFSP compared to children living in that region. Indicator 6 compares the children birth -3 with an IFSP with the general population. These indicators are shown on page 10 of this report.

Indicator 7, Timely IFSPs: refers to the 45 day timeline between a referral and the family's consent for the IFSP to start.

Indicator 8a, Transition Plan: refers to the requirement for transition plans to be developed for all children before they leave FCESS starting at 24 months, if they are enrolled at that time.

Indicator 8b, Notification to the local school district (LEA): refers to the requirement for FCESS to notify the local LEA that a child is receiving services at 24 months. Parents are given the opportunity to decline their child's information being given to the school district.

Indicator 8c, Transition Conference: refers to the conference between the family and the program and the school district that must be held 90 days or more before the child turns 3 years old.

**Indicator 4, Family Outcomes:** Refers to the answers to a survey sent out once a year to families enrolled for 6 months or longer in FCESS and their responses to these questions:

1. Has FCESS helped you to know and understand your rights?
2. Has FCESS been helpful in supporting you to communicate your child's needs?
3. Has FCESS helped your child make progress?

Region	FY14	Understand rights	Communicate needs	Make progress
1	Children Unlimited	75%	92%	83%
	NHS ESS	93%	90%	90%
2	Pathways	90%	93%	90%
3	LRCS	100%	100%	91%
4	Community Bridges	69%	84%	69%
5	MDS	50%	50%	50%
	Rise	82%	87%	93%
6	Gateways ESS	93%	98%	83%
	TCP-6	97%	97%	95%
7	ES-Manchester	75%	83%	75%
	Moore Center Services	96%	91%	89%
8	RMC	86%	94%	94%
9	Community Partners	87%	89%	87%
10	ES-Salem	82%	92%	84%
	TCP-10	88%	100%	94%

