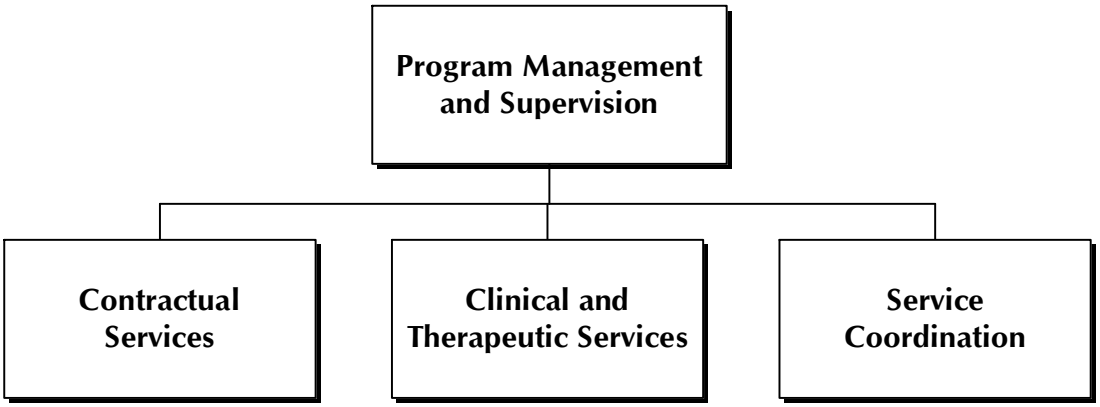
Fund 106
Community Services Board (CSB) - Early Intervention Services



Mission

To support and serve eligible children and their families in order to enhance their day to day activities, facilitate community integration, and promote their overall development. Early Intervention Services (also known as Infant and Toddler Connection or ITC) collaborates with community stakeholders to identify every infant and toddler having a developmental delay, a diagnosis with a high probability of delay, and/or atypical development in a timely manner. ITC staff has the expertise to incorporate and advance best practices in the provision of federally-mandated early intervention services and support.

Budget and Staff Resources

Agency Summary				
Category	FY 2008 Actual	FY 2009 Adopted Budget Plan	FY 2009 Revised Budget Plan	FY 2010 Baseline Budget
Authorized Positions/Staff Years				
Regular	20/ 20	20/ 20	20/ 20	20/ 20
Grant	21/ 21	23/ 23	23/ 23	23/ 23
Expenditures:				
Personnel Services	$3,366,698	$3,856,163	$3,965,649	$4,197,598
Operating Expenses	2,032,971	1,690,714	1,951,914	1,693,114
Capital Equipment	0	0	0	0
Subtotal	**$5,399,669**	**$5,546,877**	**$5,917,563**	**$5,890,712**
Less:				
Recovered Costs	($1,930)	$0	($260,000)	($260,000)
Total Expenditures:	**$5,397,739**	**$5,546,877**	**$5,657,563**	**$5,630,712**
Revenue:				
Fairfax County	$2,600,279	$2,690,227	$2,691,427	$2,727,912
Fairfax City	41,117	41,117	41,117	41,117
Falls Church City	18,636	18,636	18,636	18,636
State DMHMRSAS	1,050,957	964,234	710,190	995,818
Federal Other	881,514	711,514	995,818	710,190
Medicaid Option	216,470	394,986	394,986	410,796
Program/Client Fees	491,727	726,163	726,163	726,243
Fund Balance	97,039	0	79,226	0
Total Revenue	**$5,397,739**	**$5,546,877**	**$5,657,563**	**$5,630,712**

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Position Summary					
	Program Management		**Daytime Development Center**		**Service Coordination**
1	MR Specialist V	1	MR Specialist IV	2	MR Specialists III
1	MR Specialist IV	1	MR Specialist III	2	MR Specialists II
1	MR Specialist II	3	MR Specialists II		
1	Administrative Assistant IV	2	Physical Therapists II		
		2	Occupational Therapists II		
		2	Speech Pathologists II		
		1	Administrative Assistant II		
			Grant Positions		
	Program Management		**Daytime Development Center**		**Service Coordination**
1	Administrative Assistant III	3	Physical Therapists II	16	MR Specialists II
		3	Speech Pathologists II		
TOTAL POSITIONS					
20 Positions / 20.0 Staff Years					
23 Grant Positions / 23.0 Staff Years					

FY 2010 Funding Adjustments

The following funding adjustments from the FY 2009 Revised Budget Plan are necessary to support the FY 2010 program:

- **Employee Compensation** **$216,059**
  An increase of $216,059 in Personnel Services is associated with salary adjustments necessary to support the County's compensation program.

- **Carryover and Miscellaneous Adjustments** **($242,910)**
  A net decrease of $242,910 is due to a decrease of $260,000 in Operating Expenses for the carryover of one-time encumbered funding, offset by increases of $15,890 in Personnel Services to support ongoing grant awards and $1,200 in Operating Expenses for an increase in the County's mileage reimbursement rate.

Changes to FY 2009 Adopted Budget Plan

The following funding adjustments reflect all approved changes in the FY 2009 Revised Budget Plan since passage of the FY 2009 Adopted Budget Plan. Included are all adjustments made as part of the FY 2008 Carryover Review and all other approved changes through September 15, 2008:

- **Carryover Adjustments** **$110,686**
  As part of the *FY 2008 Carryover Review*, the Board of Supervisors approved an increase of $110,686, comprised of increases of $109,486 in Personnel Services and $261,200 in Operating Expenses, offset by an increase of $260,000 in Recovered Costs. This includes increases of $260,000 for encumbered items; $30,260 in adjustments to current grant awards; and $1,200 for an increase in the County's mileage reimbursement rate; offset by a decrease of $180,774 in funding adjustments and realignment between CSB agencies to reflect projected FY 2009 expenditures.

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Key Performance Measures

Goal
To provide early intervention services to infants and toddlers with disabilities and their families to reduce or eliminate the effects of disabling conditions.

Objectives
- To complete evaluations and develop an Individualized Family Service Plan (IFSP) for 100 percent of families within 45 days from intake call.

Indicator	Prior Year Actuals			Current Estimate	Future Estimate
	FY 2006 Actual	FY 2007 Actual	FY 2008 Estimate/Actual	FY 2009	FY 2010
Output:					
Individuals served	1,739	1,850	2,110 / 2,044	2,223	2,443
Efficiency:					
Annual cost per individual served	$1,635	$1,467	$1,466 / $1,590	$1,633	$1,678
Service Quality:					
Percent of families who agreed that early intervention services made them feel more confident in meeting their child's needs	96%	96%	95% / 95% 1/	95%	95%
Outcome:					
Percent of families who received completed IFSP within 45 days of intake call	86%	94%	100% / 81%	100%	100%
Average number of days from referral to completion of IFSP	35	38	32 / 34	32	32

(1) The FY 2008 survey results will be made available by the State for each CSB in early CY 2009.

Performance Measurement Results
In FY 2008, one of three of ITC's service quality and outcome goals were met or exceeded. The FY 2008 survey results indicating the percentage of families who agreed that early intervention services made them feel more confident in meeting their child's needs will be available in early CY 2009; the goal of 95 percent is being used as the FY 2008 actual until it can be updated.

The average number of days from referral to completion of an Individualized Family Service Plan (IFSP) was 34 days in FY 2008, versus a goal of 32 days. This indicator was a new performance measure added in FY 2006 to evaluate the actual time required for completion of an IFSP. In combination with the indicator highlighting percentage of IFSPs completed within 45 days, this indicator allows more precise measurement of ITC's performance and efficiency. For the entire fiscal year, the percentage of families receiving a completed IFSP within 45 days of intake call was 81 percent versus a federally-mandated goal of 100 percent. Difficulties in complying with this mandated requirement were seen in the early part of FY 2008 (i.e., prior to several staff therapist positions being filled). As of February 19, 2008, ITC was in 100 percent compliance with this requirement for the remainder of that fiscal year.

ITC of Fairfax-Falls Church served 2,044 infants and toddlers in FY 2008, a 10 percent increase above the FY 2007 level of 1,850. This continued increase in the number of children served is reflective of the large and rapid growth in demand for early intervention services consistently seen over the past several years. This trend is expected to continue in the future. Consequently, ITC was not able to maintain 100 percent compliance with the federally-mandated requirement that IFSPs be completed within 45 days of intake call, and/or meet the average number of days from referral to completion of IFSP target of 32 days. The rapidly increasing demand for early intervention services and staff vacancies arising from insufficient reimbursement rates or revenues from other sources continues to contribute significantly to this shortfall. In addition, the rapid growth in service demands and unavailability of pediatric therapists is not only being seen by ITC of Fairfax-Falls Church, but also by the private providers with whom ITC contracts locally and in local Part C systems throughout the State.

The actual annual cost per individual served with local dollars in FY 2008 was $1,590, thereby exceeding the anticipated annual cost of $1,466 per individual served by 8 percent. This variance is due primarily to lower than anticipated collection of non-County revenues from Medicaid and other third-party insurance carriers projected to offset some of the local dollars needed in FY 2008. Unfortunately, the availability of both local and non-County revenue sources are expected to remain extremely limited for the foreseeable future.