



EARLY INTERVENTION PHYSICAL THERAPY

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OBJECTIVES

- Students will have a basic knowledge of what early intervention is and the laws behind it.
- Students will understand the difference of early intervention between states, and will learn more about the specific early intervention laws in North Carolina.
- Students will learn about the process of receiving early intervention, the practitioners involved, and PT role.
- Students will understand the benefits of early intervention, and major concepts behind early intervention.
- Students will review an early intervention case study.

WHAT IS EARLY INTERVENTION?

- Treatment of children ages 0-3
- Services are provided under the Individuals with Disabilities Education Act (IDEA) Part C
- Available for children with or at risk for developmental delay



IDEA PART C



- Created in 1986
- Purpose was to minimize developmental delay and reduce costs on society

IDEA PART C

- States are mandated to provide identification, evaluation, treatment, and follow-up services
- Most importantly these services are provided at **NO COST** to the family



IS IDEA PART C THE SAME FROM STATE TO STATE?



- No, States do have different criteria of child eligibility
- Different State Agencies are often selected as the “lead agency” for Part C services

NORTH CAROLINA EARLY INTERVENTION

- The North Carolina Early Intervention Branch (NCEI) is part of the NC Division of Public Health⁴
- There are currently eighteen Children's Developmental Services Agencies (CDSAs) across North Carolina
- To find your local CDSA please visit www.beeearly.nc.gov



NORTH CAROLINA EARLY INTERVENTION



- In North Carolina a child is eligible for early intervention if they have been determined by the CDSA to have:
 1. Developmental Delay
 2. Established Conditions

NORTH CAROLINA EARLY INTERVENTION

Qualification criteria for developmental delay:

- Cognitive Development**
- Physical Development**
- Communication Development**
- Social-Emotional Development**
- Adaptive Development**

NORTH CAROLINA EARLY INTERVENTION

■ Qualification criteria for existing conditions:

- Congenital Anomaly/Genetic Disorders/Errors of Metabolism
- Congenital Infections
- Autism
- Attachment Disorder
- Hearing Loss
- Visual Impairment
- Neurologic Disease/CNS Disorders
- Neonatal Conditions

HOW DOES A FAMILY GET STARTED WITH EARLY INTERVENTION SERVICES?

- Contact local CDSA for referral
- An interdisciplinary team will then schedule a time to come to the family home for the initial evaluation



FIRST STEPS IN EARLY INTERVENTION



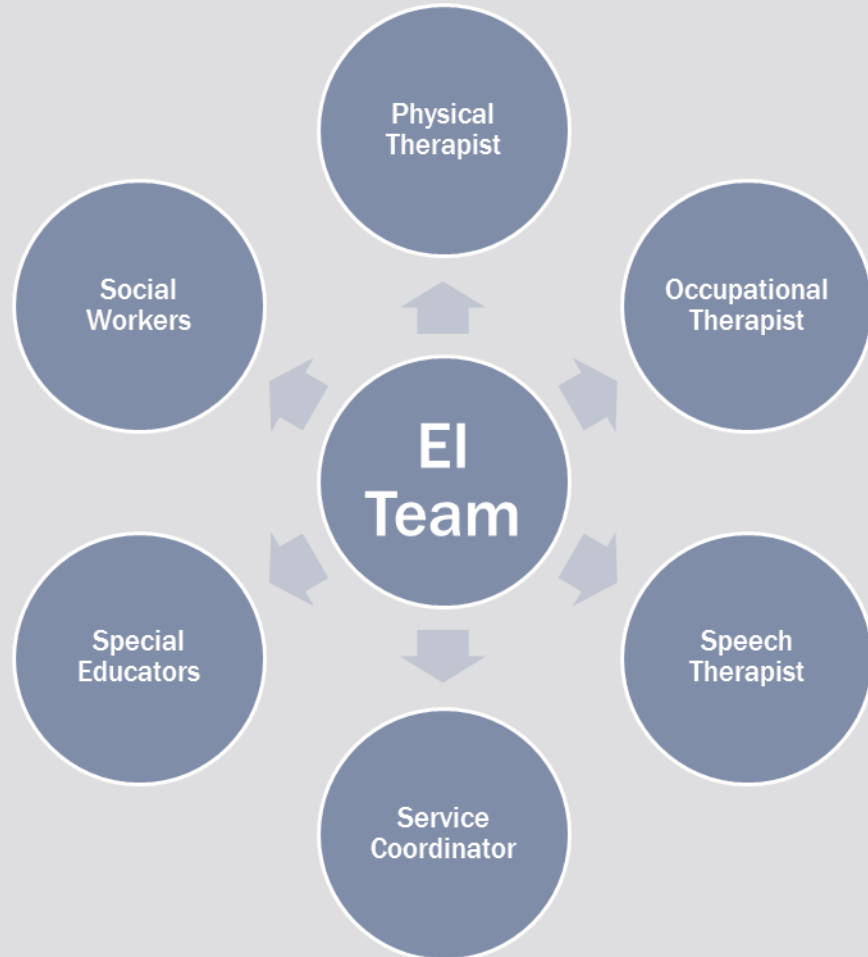
- initial contact meeting with the service coordinator



- will ask about the child's medical history, strengths, weaknesses, and parental developmental concerns

FIRST STEPS IN EARLY INTERVENTION

- Interdisciplinary initial evaluation to determine eligibility for services



PT ROLE IN INITIAL EVALUATION



- Parent/Caregiver interview
- Observation and Evaluation
- Standardized Testing

AFTER THE INITIAL EVALUATION

- If the child met the qualifications for early intervention then an Individualized Family Service Plan (IFSP) will be formed
- An IFSP is a legal document based on family needs



INDIVIDUALIZED FAMILY SERVICE PLAN

- The IFSP is required by law to include certain items related to the child's case, plan of care, and family situation



STARTING EARLY INTERVENTION TREATMENT



- Now that the IFSP is in place it is finally time to start treatment!!
- Depending on the child's needs different providers will come on a weekly basis to help reach developmental goals

PT TREATMENT

- Focus on facilitating developmental milestones
- Strengthening through function
- Using toys, positioning, and parents to encourage movement
- Educate parents on techniques they can incorporate into daily routine to help with development!



WHY IS EARLY INTERVENTION IMPORTANT?

- Flexible neural circuits during first 3 years
- Positive early experiences strengthen brain
- Improve developmental outcomes
- Less costly when addressed early in life
- Positive impact

WHAT ARE THE CONCEPTS BEHIND EARLY INTERVENTION?

- Natural Environments
- Multi-Disciplinary Team
- Family Centered Care

FAMILY CENTERED CARE

- Treatment is centered around the family's needs, not just the child's needs
- Encourages family choice regarding aspects of intervention
- Parent and practitioner collaboration is key to success
- Educate and EMPOWER parents



FAMILY CENTERED CARE RESEARCH



- Please see attached evidence table
- meta-analysis of 31 studies done by Shonkoff and Hauser-Cram⁸
- RCT by Blauw-Hospers et al.⁹

NATURAL ENVIRONMENT TREATMENT

- Settings that are natural for the child's age peers who have no disability
- Real-life experiences
- Day to Day activities



NATURAL ENVIRONMENT RESEARCH

- See attached evidence table
- cross sectional study by Dunst et al. of sixty three children and parents.¹²
- another cross sectional study by Dunst et al. of 801 children and parents.¹³



CASE STUDY: LITTLE MISS L



LITTLE MISS L INITIAL EVALUATION

- 7 months old
- decreased flexibility in her right gastrocnemius and both hamstrings
- She was able to sit with independently during play
- had not yet learned to weight shift to quadriped position (hands and knees to crawl) from sitting, or push up to quadriped from prone
- Her primary mode of movement was through bottom scooting



LITTLE MISS L TREATMENT

- Apprehensive towards therapist at first
- Reaching outside BOS in sitting
- Stretching
- Transition to quadriped
- Crawling
- Playing in kneel/tall-kneel
- Pulling up to stand and cruising

LITTLE MISS L



- Miss L progressed nicely with treatment, and mom and dad did a great job at incorporating therapy activities into daily play!
- Miss L is currently 19 months old

LITTLE MISS L



LITTLE MISS L



LITTLE MISS L



LITTLE MISS L

■ video

LITTLE MISS L

- video

LITTLE MISS L

■ video

LITTLE MISS L

■ Interview with Mom:

- initial concerns

- involvement

- suggestions for PTs

- incorporation of PT into daily routines

- challenges

- pros and cons of home treatment

- satisfaction with treatment

THE END

■ **Thank you for listening!!**

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