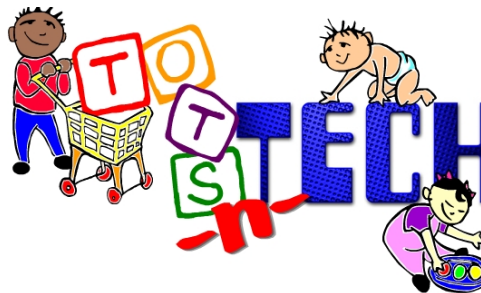

2007 Survey of Part C Coordinators and Assistive Technology



The Part C Program for Infants and Toddlers, although federally supported through IDEA, varies from state to state. In order to learn about how states provide Assistive Technology (AT) services and devices for infants and toddlers, coordinators of the Part C Programs in each state and the District of Columbia were surveyed with a written questionnaire in December 2003 and analysis of that survey was published previously (see Research Brief Volume 1, Number 4, 2004). In December 2007 Part C Coordinators were asked to participate in a similar survey.

Method

Based on the results of the 2003 survey three areas were identified that appeared to impact the use of assistive technology with young children: how AT is recorded on the IFSP, how AT devices are funded, and availability of resources for parents and providers. Questions related to these three areas were streamlined and included in the 2007 survey. Additionally, responses to an open-ended question related to barriers experienced (or reported) to providing AT for infants and toddlers in the 2003 survey were coded and collapsed into categories. These barrier categories were included in the 2007 survey as force choice options to a similar question about barriers. The 2007 survey was posted on the World Wide Web via an on-line survey collection organization. Via an email request, Part C Coordinators completed a 7-question, on-line survey in December 2007. A total of 29 (57%) of the 51 Coordinators completed the survey.

Results

Of the 29 completed surveys, 27 were from States that completed the December 2003 survey. Information from the following question categories was included: (a) documentation of AT on the IFSP; (b) funding; (c) resources for families and providers. All 29 survey responses were analyzed and summarized descriptively and results were compared to the December 2003 survey findings for the 27 states with two surveys.

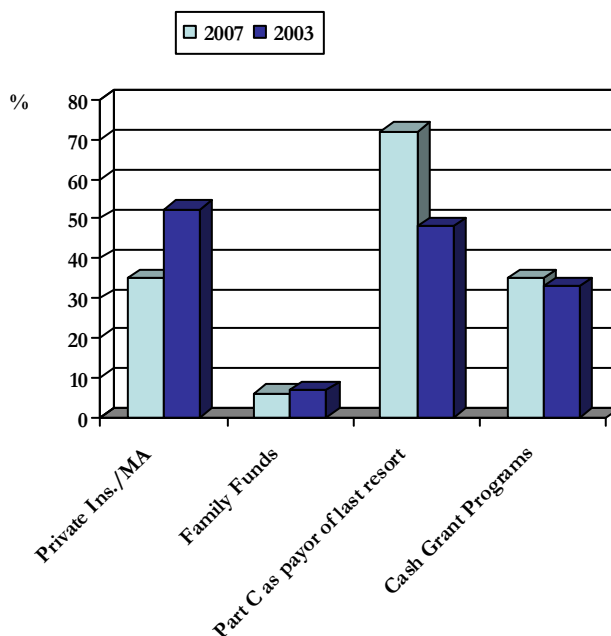
Documentation of AT on the IFSP:

Both the 2003 and 2007 surveys asked about how AT services and devices were recorded on the IFSP. In 2003 this question asked about the quantity of devices and services that were recorded on the IFSP (not listed, few, some, most, all) and the 2007 survey listed examples of how AT devices and services may be documented on and IFSP. The list of examples used in the 2007 survey was generated based on a previous review of IFSP documents from all 51 states.

Table 1 includes the 2007 response rates to and the example statements of how AT devices and services may be documented on and IFSP. Part C Coordinators were asked to check all example statements that applied to their state’s current IFSP document. Of the 29 states the majority of Part C Coordinators (79% or 23) reported that “AT is listed as a service option meaning that AT is listed as a separate service in the same way that special instruction or therapies would be listed.” Almost half (45% or 13) of the Coordinators checked the option indicating that “AT is linked to outcomes on the IFSP so that for each outcome, an area is included where ‘special accommodations or adaptations or equipment that can help make this happen’ are listed.” Only 14% or 4 Part C Coordinators indicated that “A whole section of the IFSP is dedicated to AT services/devices.” Of the 27 repeat states, forced choice responses to this question indicated that in 2003 12 (44%) of the 27 states recorded “all or most AT services on the IFSP” and 16 (59%) recorded “all or most devices on the IFSP.” Only 1 of the 27 reported both in 2003 and 2007 that “AT devices are not listed on the IFSP.”

Funding:

In the current survey, 72% or 21 Part C Coordinators indicated that Part C funds are used to pay for the device if listed on the IFSP and as the *payer of last resort* as compared to December 2003 when only 48% indicated this source being used “very frequently.” The second most frequently reported source of funding on the 2007 survey was a family’s private insurance, Medicaid, or other third party payers (10 states or 35%) compared to 2003 when it was the most frequently used source. Family funds were reported as the “most frequently” used source of funding for AT devices only 6% of the time which was also reflected in the December 2003 survey where only 6.8% of the Part C Coordinators reported family funds as “very frequently” the primary source of funding AT devices. Though they did not indicate if it is the “most” or “less frequently” used source of funding for AT devices, 35% or 10 of the 2007 Part C Coordinators indicated that cash grant programs for use in purchasing AT devices are available in their state.



Milbourne, S., & Campbell, P. (2008). Report of assistive technology training for providers and families of children in early intervention, *Research Brief Volume 2, Number 1*. Tots n Tech Research Institute. Available from <http://tnt.asu.edu>.

Table 1

State N = 29	At this time, there is no specific place on the IFSP where AT services/devices are listed.	Check boxes are used to indicate the need for AT	Check boxes are used under the family resources, concerns or priorities section	A whole section of the IFSP is dedicated to AT services/devices	There is an AT Authorization page	AT is listed as a service option	AT is linked to outcomes on the IFSP	AT is included on a section for transition planning
CT						<input type="checkbox"/>		
DC	<input type="checkbox"/>							
DE						<input type="checkbox"/>		
HI					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ID						<input type="checkbox"/>		
IL					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IN		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
KS						<input type="checkbox"/>	<input type="checkbox"/>	
KY		<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MI						<input type="checkbox"/>		
MN			<input type="checkbox"/>			<input type="checkbox"/>		
MO		<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MS						<input type="checkbox"/>		<input type="checkbox"/>
MT			<input type="checkbox"/>				<input type="checkbox"/>	
ND		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NE						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NJ		<input type="checkbox"/>				<input type="checkbox"/>		
NM						<input type="checkbox"/>		
NV		<input type="checkbox"/>				<input type="checkbox"/>		
NY		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PA		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RI						<input type="checkbox"/>		
TN				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
TX		<input type="checkbox"/>						
UT						<input type="checkbox"/>		
VA						<input type="checkbox"/>		
WI						<input type="checkbox"/>		
WV							<input type="checkbox"/>	<input type="checkbox"/>
WY			<input type="checkbox"/>				<input type="checkbox"/>	
Total	1 3%	9 31%	5 17%	4 14%	7 24%	23 79%	13 45%	9 31%

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Resources for families and providers:

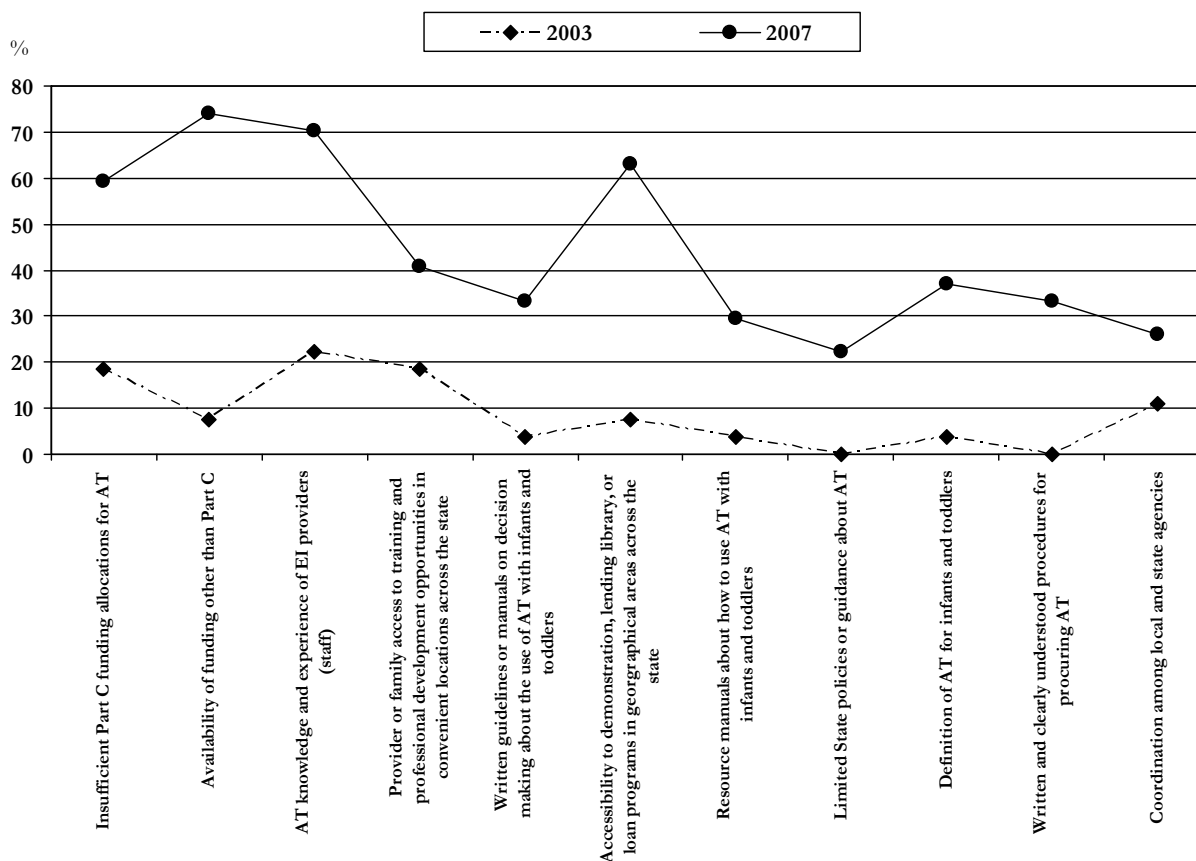
As in December 2003 the current survey asked Part C Coordinators to indicate how common or not common was the use of various methods by families and providers to learn about AT devices. Of the 29 Coordinators who responded to the 2007 survey 20 or 69% indicated that there are walk in lending libraries for toys and materials and 12 or 41% indicated availability of lending library mail-service for toys and materials. The availability of the walk-in lending libraries was reported slightly higher in 2003 than in 2007. When state-to-state comparison was conducted of the 27 repeat states, more Part C Coordinators in 2003 indicated that there were demonstration centers available (n = 20 or 74%) compared to 2007 (n = 9 or 33%). In both surveys we asked about the availability of AT equipment loan programs for borrowing equipment or devices. When comparing 2003 and 2007 responses for the 27 repeat states, 25 or 93% of the Part C Coordinators indicated that these loan programs were available in 2003 compared to 20 or 74% who indicated availability in 2007.

Barriers

Both the 2003 and 2007 surveys asked questions related to barriers experienced in providing AT for infants and toddlers. In 2003 the question was posed as an open-ended question where Part C Coordinators generated responses. These responses were coded and collapsed into 11 “barrier” categories. In 2007 the barrier categories were included as force choice options and Part C Coordinators were asked to check the “top five barriers experienced in providing AT for infants and toddlers.” Figure 1 represents a comparison of the 27 repeat respondent states’ responses. As evident in the figure, a smaller percent of states listed barriers in 2003 than in 2007 and this difference may in part be related to the change in the structure of the question from open-ended to forced choice selection. In 2007 the top five barriers selected by the 29 Part C Coordinators include:

	Number (percent) of states that selected the barrier
1. Availability of funding other than Part C funds	20 (69%)
2. AT knowledge and experience of early intervention providers (staff)	20 (69%)
3. Accessibility to demonstration, lending library, or loan programs in geographical areas across the state	18 (62%)
4. Insufficient Part C funding allocation for AT	16 (55%)
5. Provider or family access to training or professional development opportunities in convenient locations across the state	13 (45%)

Figure 1



Discussion

The federally funded Part C Program for infants and toddlers vary from state to state. This survey explored areas of (a) documentation of AT on the IFSP; (b) funding; (c) resources for families and providers; and (d) barriers to providing AT. Although 44 states responded to the 2003 survey, only 29 completed the survey in 2007; 27 Part C coordinators completed the survey at both time points.

In the majority of states that responded to the survey AT is listed as a service option on the IFSP document and almost half of these 29 states there is a place on the IFSP where AT is linked directly to child and family outcomes. Four states have a whole section of the IFSP dedicated to documentation of AT and in contrast one state has no specific place on the IFSP where AT services/devices are listed. Almost three quarters of the Part C Coordinators indicated that Part C as the payer of last resort is the most frequently used source of funding AT devices for infants and toddlers with the second most frequently reported source being a family's

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private insurance, Medicaid, or other third party payers. In the current survey lending libraries, both walk-in and mail-service libraries, as well as demonstration centers that are in or within a reasonable distance from a family's community are reported as being available in the majority of states. The top five barriers reported or experienced by Part C Coordinators in 2007 include barriers related to funding, availability of early intervention providers knowledgeable and experienced in using AT with infants and toddlers, and access to convenient training and professional development, demonstration, lending library, or loan programs.

Upon comparison of the 27 states that completed both the 2003 and the 2007 surveys there are a few notable findings. The two most frequently reported sources of funding AT for infants and toddlers in 2003 and in 2007 are Part C funds as the *payer of last resort* and a family's private insurance, Medicaid, or other third party payers however, the reported highest frequency of use has shifted from the latter to the former. Second, the availability of the walk-in lending libraries and demonstration centers was reported slightly higher in 2003 than in 2007 and more Part C Coordinators indicated in 2003 than in 2007 the availability of AT equipment loan programs for borrowing equipment or devices.

Overall, recording AT as a service option on the IFSP is reportedly the primary means of documentation. Few states have a dedicated section for AT and one state continues to not record AT on the IFSP. Funding for AT is still reported as primarily either Part C as the payer of last resort or a family's private insurance, Medicaid, or other third party payers. There is a reported decrease in the availability of walk-in lending libraries, demonstration centers and AT equipment loan programs and access to these programs was reported as one of the top five barriers to providing AT for infants and toddlers. Finally, a high number of states report additional barriers that relate to inadequate funding, limited access to training, and the availability of qualified personnel.