

**An Evaluation of the Effectiveness of the
Plumas Unified School District
Early Intervention Program
2001-2005**

Funded by:



Submitted by:

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February 2006

ACKNOWLEDGEMENTS

Many individuals have supported this evaluation effort. Tori Willits, Plumas Unified School District's SELPA Director, PUSD Secretary Jerri Dedekar, Carol Burney, PUSD Infant Development Specialist and Instructional Aide, Cindy Mansell, were instrumental in collecting the data needed for this report. Thank you for your assistance.

Thanks also to First 5 Plumas Executive Director, Ellen Vieira for providing guidance and Plumas County Child Care Development and Planning Council Coordinator, Christi Schmidt for her collaboration.

This report should be cited as follows:

Kocher, S.D. 2006. An Evaluation of the Effectiveness of the Plumas Unified School District's Early Intervention Program. First 5 Plumas, the Plumas County Children and Families Commission. Quincy, California. 16 pages.

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EXECUTIVE SUMMARY

This report evaluates the effectiveness of Plumas Unified School District's Early Intervention program which targets special services to Plumas County infants from birth to age three at risk of developmental delays. The goal of the program is to intervene early in a child's life with vital services that may reduce their need for special education services later. Before funding by First 5 Plumas, less than three Plumas County infants were identified annually as having special needs, while 10 to 12 children were identified for attendance at the Special Day Class preschool for 3 to 5 year olds with special needs. Clearly, most of special needs infants were being missed, and received no services until they reached three years old. The Early Intervention program was developed to fund qualified local staff to identify and serve more infants in the county.

Eligible infants receive infant stimulation home visits weekly or bi-weekly from an infant specialist involving activities that stimulate infants' social and intellectual development. They also receive physical and occupational therapy, speech instruction and other services as needed. The program served a total of 12 infants in the 2002 to 2003 fiscal year, 19 the following year, 25 last year and 9 so far this year. The number of home visits conducted by the infant specialist has ranged from 129 in the first full year of the program to 256 last year. The total program cost for the 2005-2006 school year was \$52,043; 67% percent was provided by First 5 Plumas, 25% was provided by PUSD and the Plumas County Child Care and Development Planning Council contributed 8%.

Service intensity records for the 32 infants most intensively served by the program since 2001 were compared to a group of 37 children not served with special education services until after age three. Data collected for this report show that the Early Intervention program achieved the desired outcomes:

#1: More Plumas County infants who are at risk for developmental delays were identified and served at an earlier age: The number of infants intensively served by PUSD in the first four years of the program increased from 4 low incidence infants to 32 infants with qualifying risk factors.

#2: Infants served by the program required a shortened time of intervention through special education. Twenty-two percent of infants served exited the program after meeting developmental goals. They exited after receiving services for a shorter period of time (23 months) than children who began services later (40 months). Their average age at exit was 2 ½.

#3: Infants had improved educational outcomes when served earlier. One third of infants served showed improvement in cognitive development within an 11 month testing period. Although this is lower than the 79% improvement rate for comparison group children, it occurred within a testing period half as long. Children served by both programs showed cognitive growth on the same magnitude as the comparison group, but in half the time.

#4: Infants were served by a comprehensive, accessible, and integrated system. Before initiation of the program, PUSD provided services only to low incidence infants and outreach to families was limited. Since First 5 Plumas funding, PUSD has dedicated its own financial resources for home visiting and nursing services. The Plumas County Child Care Planning and Development Council has coordinated and funded outreach to families to identify infants. This integrated approach has greatly increased the number of infants served and has improved their outcomes.

PROGRAM DESCRIPTION

Plumas Unified School District's Early Intervention program targets special services to Plumas County infants from birth to age three who are at risk of developmental delays. Special services offered include infant stimulation, physical and occupational therapy, speech and language therapy, counseling, respite care, and nursing services. The goal of the program is to intervene early in a child's life with vital services that may reduce their need for special education services later.

Funds have been provided to implement the Early Intervention program by First 5 Plumas since 2001. Before then, PUSD offered special services to children who had already reached the age of three and to children under three who are blind, deaf or orthopedically impaired (known as low incidence). Outreach and service provision to all other infants with developmental risks or delays was coordinated by the Far Northern Regional Center in Chico, California, which is about a two hour drive away from most residents of Plumas County.

Before funding by First 5 Plumas, between zero and three Plumas County infants were identified annually as having special needs. Despite low infant numbers, between 10 and 12 preschoolers were identified annually for attendance at the Special Day Class preschool for 3 to 5 year olds with special needs. Clearly, most of special needs infants were being missed, and received no services until they reached three years old.

The Early Intervention program was developed specifically to improve outreach and identification by funding qualified local staff to conduct outreach and identification within the local community. PUSD applied for funding from First 5 Plumas to become the lead agency for service provision to local infants at risk of developmental delays. First 5 funding allowed PUSD to add 0.50 FTE to the Special Day Class preschool teacher to conduct outreach and assessment of infants and offer infant stimulation services to those who qualified.

"Before First 5 Plumas, our number of infants being served varied only between zero and three. It had been that way for 15 years. Now, we have 13 infants that will have Infant Family Service Plans. It's the difference between not receiving services in the first three years and getting served early. We had it [early identification] on paper, but now it's really happening! We needed a local person doing the looking." -- Carol Burney, Early Intervention Program infant specialist.

Those who qualify because of risk factors or delays in development are served with weekly or bi-weekly home visits that offer activities to stimulate infants' social and intellectual development. They also receive physical and occupational therapy, speech instruction and other services as needed.

The program served 12 infants in the 2002 to 2003 fiscal year, 19 in 2004, and 25 in 2005. The number served so far this year (2006) is 9. The number of home visits conducted by the infant specialist has ranged from 129 in the first full year of the program to 256 last year. The number of home visits per infants averaged from 10 to 11 during these years.

Table 1. Individuals served by the Early Interventional Program

Program Year	Individuals served each year				Home Visits	
	Infants	Age 3-5	Adults	Total	Number	Average # /Infant
2002-2003	12	3	20	35	129	10.8
2003-2004	19	5	33	57	219	11.5
2004-2005	25	10	41	75	256	10.3
July to December 2005	9	6	18	33	58	6.4

The Early Intervention program was funded for a total of \$52,043 in the 2005-2006 school year, not counting in kind (non-cash) support. Of this, \$35,000 (67%) was provided by First 5 Plumas and \$12,841 was provided by PUSD (25%), and \$4,202 (8%) was provided by the Plumas County Child Care Development and Planning Council. PUSD funds an instructional aide to make home visits with the infant development specialist and some time from a school nurse to advise on medical issues faced by infants. The Planning Council paid for printing and distribution of program outreach brochures throughout the county.

Table 2. Costs of Early Intervention Program in 2005-2006 School Year

Funded	First 5 Plumas	PUSD	PUSD In Kind Contribution	Plumas County Child Care Development and Planning Council	Total
Infant Development Specialist	\$35,000 (includes training and travel funds)	\$7,214	Use of classroom, telephone, computer, and supplies as needed	--	\$42,214
Instructional Aide	--	\$3,769		--	\$3,769
School Nurse	--	\$1,858		--	\$1,858
Printing/distribution of program outreach brochures				\$4,202	
TOTAL	\$35,000	\$12,841		\$4,202	\$52,043

INDIVIDUAL SUCCESS STORIES

Early outreach and services for special needs infants have led to some dramatic success stories. The stories of several of these infants are described here. “Katie”, “Jill”, and “Caleb” (not their real names) are all infants whose early development was improved by Early Intervention services.

“Katie”. Katie was born with multiple birth defects including clubfeet, vision problems, and fluctuating hearing loss from multiple ear infections. She also had an older brother with severe physical and mental disabilities. An Infant Family Service Plan (IFSP) was developed for Katie before she was two months old. She received multiple surgeries, health services, speech and physical therapy, as well as infant stimulation and massage services funded by First 5 Plumas. The infant specialist helped the parents recognize symptoms of recurrent infections and assisted them to seek medical care sooner than they otherwise would have. Katie had drainage tubes implanted which allowed her to recover hearing and to develop speech and language at a critical developmental period. Katie was dismissed from the program before she turned three because she was within normal limits in all developmental areas. She no longer requires any services.

“Jill”. Jill was a twin born at 27 weeks. Her sister lived only a short while. The infant specialist coordinated development of an IFSP for the twins while they were still in the hospital. This allowed their mother, a single parent, to be reimbursed for mileage to visit them in the hospital. Jill received a wide range Early Intervention services, including physical and occupational therapy, nutritional counseling, in home nursing, case management, and First 5 Plumas funded infant stimulation and infant massage when she got home from the hospital. Jill is now within normal limits in all developmental areas except for her motor skills. Because Jill has a mild case of cerebral palsy, she will need on-going physical therapy. However, she is enrolled in a mainstream preschool and no longer needs any other special services.

“Caleb”. Caleb was born with many physical problems including a bilateral cleft lip and palate, an imperforate anus, and an abnormal spine. Caleb was seen by pediatric surgeons, orthodontists, urologists, speech therapists, and genetics researchers and had numerous surgeries to correct these problems. His doctors and his parents were at first concerned that he might also have cognitive delays so Caleb’s mother was referred to the Early Intervention program.

“I was told to call, but I was a little skeptical at first. I had specialists coming out my ears at the time. I had so many I couldn’t even keep track of them. I didn’t want to add anyone. I was overwhelmed.” - Caleb’s mother

Eventually his mother decided to call. The Early Intervention infant specialist started weekly and bi-monthly home visits at age six months until he turned three. The goal of home visits was to stimulate cognitive development. Caleb and his parents were encouraged to use educational toys aimed at Caleb’s specific needs. These included whistles and bubbles which helped him learn to blow out despite his palate and lip problems, drums to detect and learn about rhythm, pull toys to develop his motor skills, and large books with props to develop pre literacy skills. When Caleb was delayed in reaching developmental milestones, she brought more advanced toys to challenge him in that area. Caleb’s mother says that Early Intervention services are different than the other special services he has received. She wishes this type of one on one service was available to many more families.

“It’s one on one. It’s different because she really knows him. She knows his traits and motor skills and the way he eats. It’s not like going to these people and he’s just another appointment. She knows him and cares about him. .. When I tell him she’s coming, he’s thrilled; he jumps up and down and runs for the door.

I appreciate it so much, the whole program. It’s so good for him. It’s comforting to know that he’s doing ok and there’s someone from the outside who’s telling us that. With a child that has special needs, it’s hard to know what’s right all the time, especially when there are other problems too. The feedback on how he was doing with different things was great.”-Caleb’s mother

Caleb’s development has progressed normally. He aged out of the Early Intervention program and the only special service he continues to receive is speech therapy.

QUANTITATIVE STUDY

Desired outcomes from the program were specified in the original grant application from Plumas Unified School District. These include:

- **Outcome #1:** More Plumas County infants who are at risk of developmental delays will be identified and served at an earlier age.
- **Outcome #2:** Infants served by the infant stimulation program will require a shortened time of intervention through special education.
- **Outcome #3:** Plumas County infants who are served will have improved educational outcomes due to being served earlier.

In addition, the goal of First 5 Plumas in funding the application was to improve the systems serving special needs children and their families. Specifically that:

- **Outcome #4:** Plumas County infants will be served by systems that are more comprehensive and accessible, and better integrated across agencies.

Information to judge the achievement of desired program outcomes was collected by the evaluation specialist on contract to First 5 Plumas. Program records for the 32 infants intensively served by the infant program through December 2005 were reviewed to quantify the length of services provided to infants. Scores on standardized assessments were also recorded in order to identify growth in learning areas occurring after services were begun.

Outcomes of the infants served by the Early Intervention program were then compared to a group of children who were not served with special education services until after the age of three. A list of all children who received special education services from PUSD starting between the ages of three and seven since 1999 was developed. The list was ordered by date of birth and the first 37 children with complete records were selected to constitute the comparison group. All of the comparison group children had their first Individualized Educational Plan (IEP) before the implementation of the Early Intervention program.

The underpinning for this analysis is the assumption that the comparison group children (who only received services after age three) would have benefited from services at a younger age if the Early Intervention program had been in existence when they were infants. The analysis evaluates whether the infants served by Early Intervention have better outcomes than the comparison group because they received interventions earlier.

PUSD files for the comparison group children were reviewed to quantify the length and types of services received by each child. IEPs for infants served by the Early Intervention program but that continued to receive services after age three were also reviewed.

An obstacle to collecting data was the relative lack of documentation of the infant program. Although Infant and Family Service Plans (IFSPs) were developed for each infant, some of these were no longer available for review. PUSD complies with requirements for maintaining special education records for low incidence infants and for children three and over. Since there were no analogous requirements for maintaining infants' records, some were discarded. Gaps in the records were filled by reviewing case histories with the infant development specialist and program aide.

RESULTS

Findings on the types of referrals received by PUSD, the reasons for referrals, the number of infants served, the types and durations of services offered, and growth on standardized test scores are described below.

NUMBER OF INFANTS SERVED: Plumas Unified School District serves infants who are referred to the program because they face a risk of delay in their development or because someone has noticed that their development is slower than that of their peers. Risks that qualify an infant for services include medical problems such as premature birth, low birth weight, an extended hospital stay or breathing problem, transitory hearing problems due to recurring ear infections, prenatal drug exposure, and several other medical conditions. Qualifying risks also include social factors such as having a developmentally delayed parent or being placed in foster care.

Once an infant is referred, PUSD's infant specialist conducts an assessment of the infant's cognitive, social, physical and language development. Those that score very low or have the appropriate risk factors are declared eligible for services formulated through an Infant-Family Service Plan (IFSP). All services are free to the family and families may discontinue or refuse services at any time. Infants are periodically reassessed to determine their developmental levels and those that have met the goals in their IFSPs may be dismissed from the program.

Program records show that 32 infants were intensively served in the first four years of the Early Intervention program, or about 8 per year. This includes 4 low incidence infants (deaf, blind or orthopedically impaired) that would have been served by PUSD even without the Early Intervention program, or about 1 infant per year. Therefore, a total of 28 additional infants were served through First 5 Plumas funding, or about 7 per year. This is a seven-fold increase in the number of infants served.

REFERRALS: PUSD has placed several referral systems in place as part of the Early Intervention program and staff has conducted training and outreach to local medical and social service providers to encourage them to refer infants who may qualify for the program. Data collected from PUSD records shows that the source of referrals for Early Intervention services is significantly different than for older children. Infants served by the Early Intervention program are most likely to be referred for services by medical providers (31%). They are also referred by other service providers (9%), their parents (6%), Far Northern Regional Center (6%), day care providers (3%), and social services (3%).

Before the Early Intervention Program began, children were most likely to be referred for PUSD special services by preschools (19%) or by parents themselves (11%). They were also referred by WIC (5%), elementary schools (5%), medical providers (3%), Far Northern (3%), and social services (3%). Unfortunately, no referral source was recorded for 41% of infants and 51% of older children.

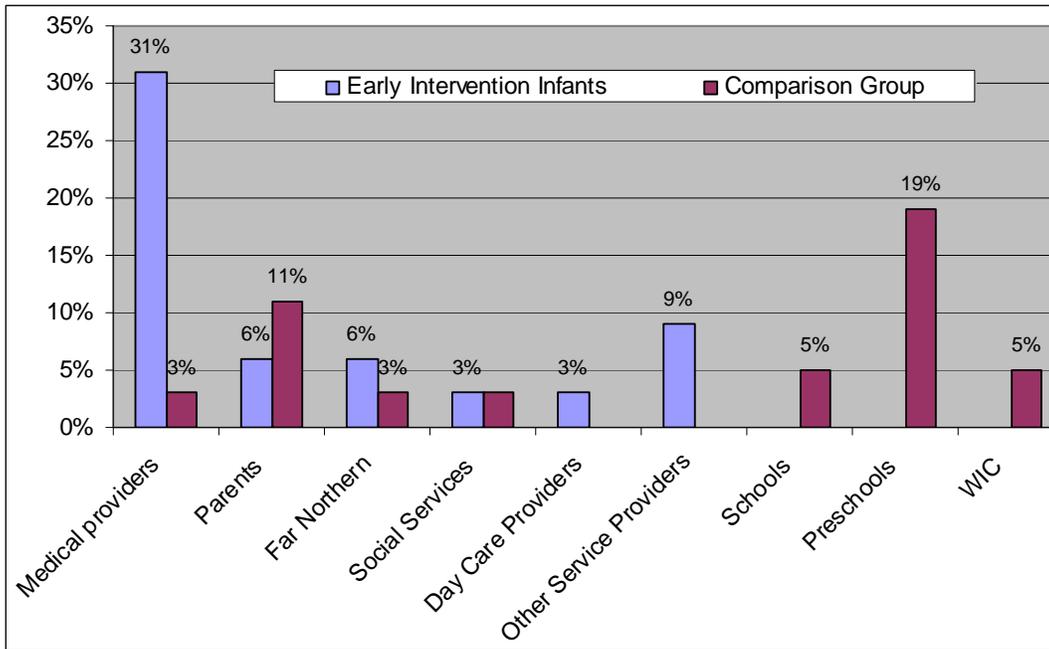


Figure 1. Referral source for Early Intervention infants and Comparison Group

REFERRAL REASON: The reasons cited for referring a child for Early Intervention services are also significantly different than for older children. Infants served were most likely to be referred because of medical reasons (34%) or speech and language delays (34%). They were also referred because of premature birth (9%), developmental delays (9%), social risks (6%), and motor delays (3%). Before the program was established, children over three were most likely to be referred to PUSD for special services because of speech and language delays (75%), developmental delays (11%), medical reasons (8%), and motor delays (3%).

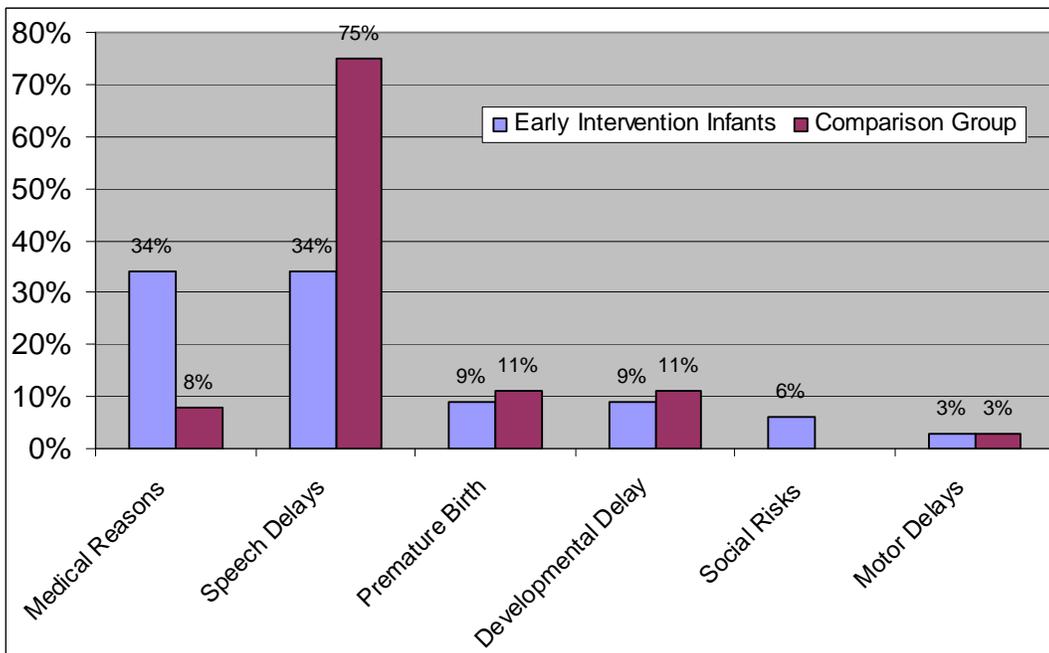


Figure 2. Referral reason for Early Intervention infants and Comparison Group

SERVICES RECEIVED: Infants in the Early Intervention program are offered a variety of services focused on advancing their physical, social and intellectual development. Infant stimulation is offered by the infant development specialist funded through First 5 Plumas. This involves weekly to monthly home visits with the infant and family to assess the infant’s progress and provide activities to stimulate the infant’s development in deficient areas. The infant development specialist also recommends other therapeutic services, which are offered by professionals in each field and paid for by Far Northern Region (not through First 5 funding). One exception to this is infant massage, which is paid for through another First 5 grant.

Eighty-six percent of the infants served by the Early Intervention program received infant stimulation home visits. Thirty-one percent also received speech and language instruction, 27% received occupational therapy, 17% received physical therapy, and 55% receive other services including infant massage, respite care, and financial reimbursement for travel required for medical appointments for infants.

In contrast, 95% of the comparison group children not served until after age three received speech and language instruction. Twenty-two percent received occupational therapy and 5% received other services. Forty-three percent received instruction in a special day class, the majority in PUSD’s special needs preschool and then within elementary schools as they got older. Eleven percent received instruction focused on a specific learning disability in a resource room in an elementary school.

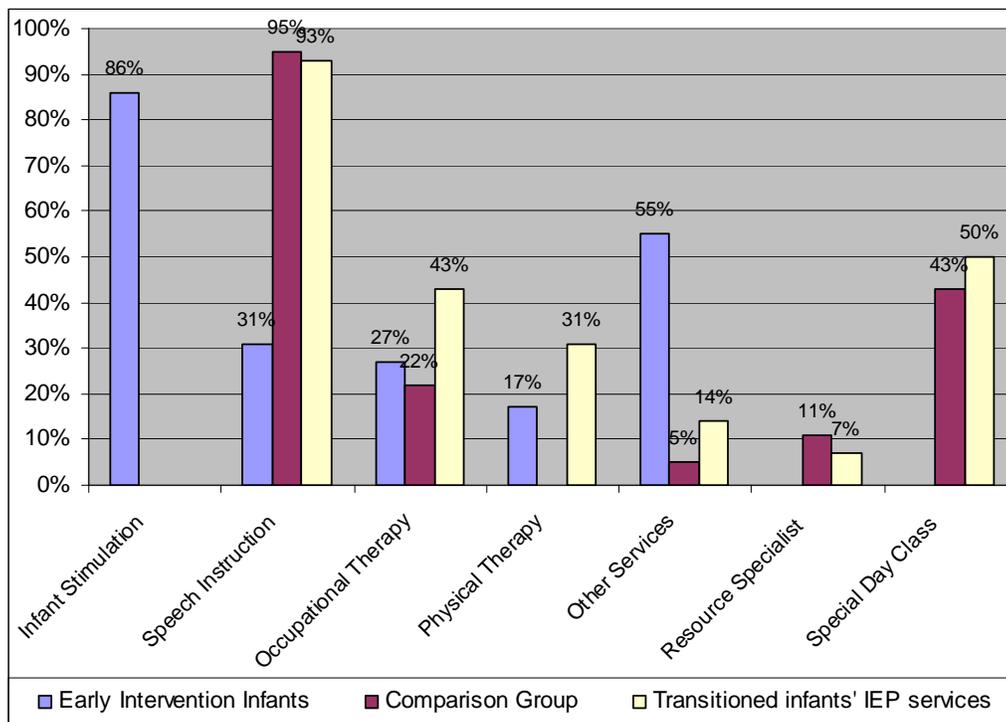


Figure 3. Type of services received by Early Intervention infants and Comparison Group

Fourteen of the 32 infants (44%) served by the Early Intervention program continued to receive services after turning three and transitioning to an Individualized Educational Plan (IEP). These children served by both the infant program and an IEP received speech and language services (93%), occupational therapy (43%), physical therapy (31%), and other services (14%). Fifty percent were placed in special day classes and 7% saw a resource specialist.

DURATION OF SERVICES: Special developmental services are provided to infants and children ages three and over until they meet goals set out in their IFSPs or IEPs, respectively. Children who meet their goals, move away, or whose families refuse further services are dismissed from the programs. Children are only eligible for the Early Intervention program up until age three, thus the maximum duration of services possible is 36 months. Children who still need services after turning three are transitioned into IEPs which may qualify them for services up to age 18.

The average length of time a child received Early Intervention services was 18 months. Twenty-eight percent received services for six months or less, 21% for six to twelve months, 14% for twelve to eighteen months, 17% for 19 to 24 months, 7% for 25 to 30 months, and 14% for 31 to 36 months. Thirteen percent of infants are still receiving Early Intervention services.

The average length of time a comparison group child received IEP services was 42 months. Nine percent received services for a year or less, 20% for one to two years, and 6% two to three years. Another 6% received services for 3 to 4 years, 32% for 4 to 5 years, and 23% for 5 to 6 years. Thirty-eight percent are still receiving services.

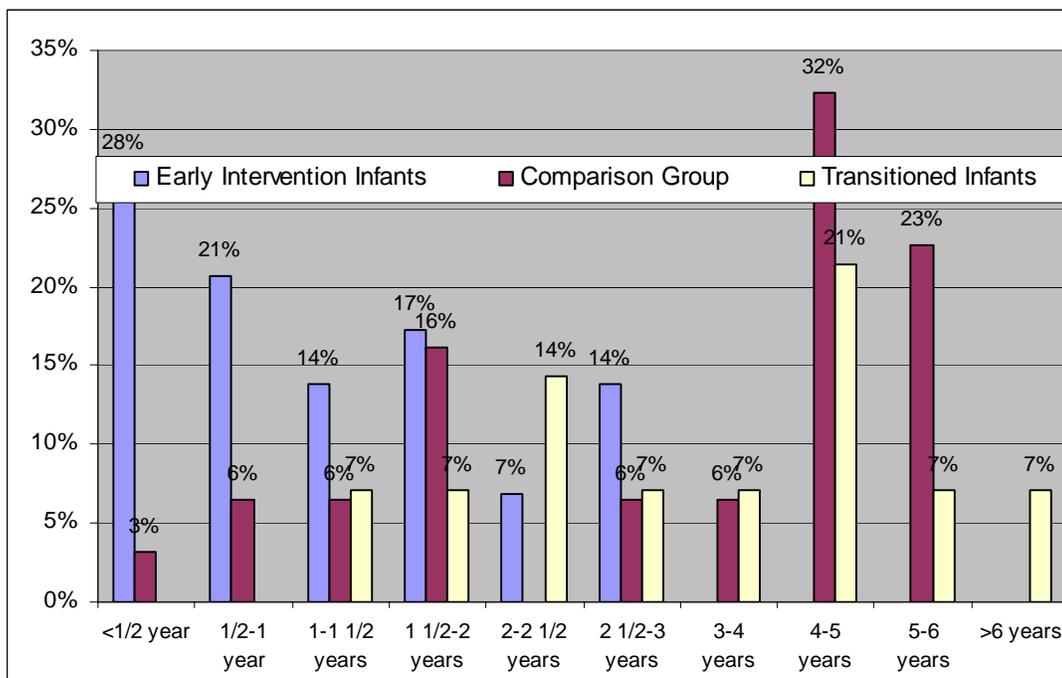


Figure 4. Average duration of special services for Early Intervention infants and Comparison Group

Of the 14 students who transitioned from the infant to the IEP program, 14% were served for a total of one to two years by both programs combined, 21% for two to three years, 7% for three to four years, 21% for four to five years, and 14% for five or more years. Those still receiving services have been served for a total of 42 months on average.

SERVICE COMPLETION: Dismissal from special services because an infant has met all development goals constitutes a success for the Early Intervention program. Twenty-two percent of infants served were able to discontinue services because they achieved the goals within their infant services plan. Thirteen percent discontinued services due to moving out of the district, and another 9% refused services. Thirteen percent are still receiving services and are not yet 3 years old. Forty-four percent continued to receive services through an IEP after reaching age three. Referral reason does not significantly affect the disposition of an IFSP or IEP.

These rates are similar to service completion rates for children in the comparison group, who were not served until after age three, although their age at time of dismissal was obviously greater. Twenty-nine percent of comparison children were able to discontinue services due to achievement of goals within their IEPs. Thirty-eight percent continue to receive special services. Twenty-one percent discontinued services by moving away and 3% by refusal. Outcome of 9% was not known. Of the infants that moved on to IEPs, 14% later exited due to goal completion and 79% are still receiving services. Another 7% moved away.

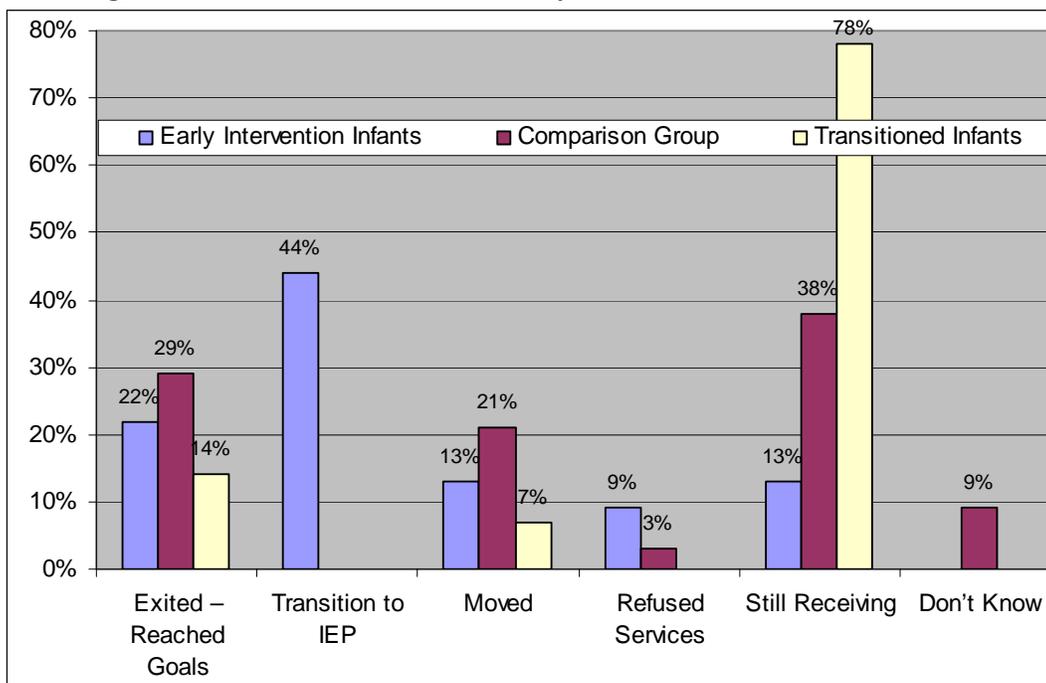


Figure 5. Disposition of service plans for Early Intervention infants and Comparison Group

SERVICE DURATION AT EXIT: The infants who exited the Early Intervention program after meeting their goals were able to do so after receiving services for a shorter period of time than those who did not receive services until after they turned three. This also constitutes a success for the Early Intervention program.

The six infants who exited ranged in age from 30 months to 38 months at time of exit. Average age at exit was 34 months. Fifty percent had received between one and two years worth of services. Thirty-three percent received services for two to three years and 17% for less than a year. The average length of service provision was 23 months.

The ten children in the comparison group that exited their IEPs due to goal completion ranged in age from five to nine. Average age of exit was 7½. Thirty percent received services for one to two years, 10% for 2 to 3 years, 20% for 3 to 4 years, and 40% for 4 to 5 years. The average length of service provision was 40 months.

The two students who were dismissed from special services after participating in both the Early Intervention program and IEP services averaged 44 months of total service in their infant and IEPs.

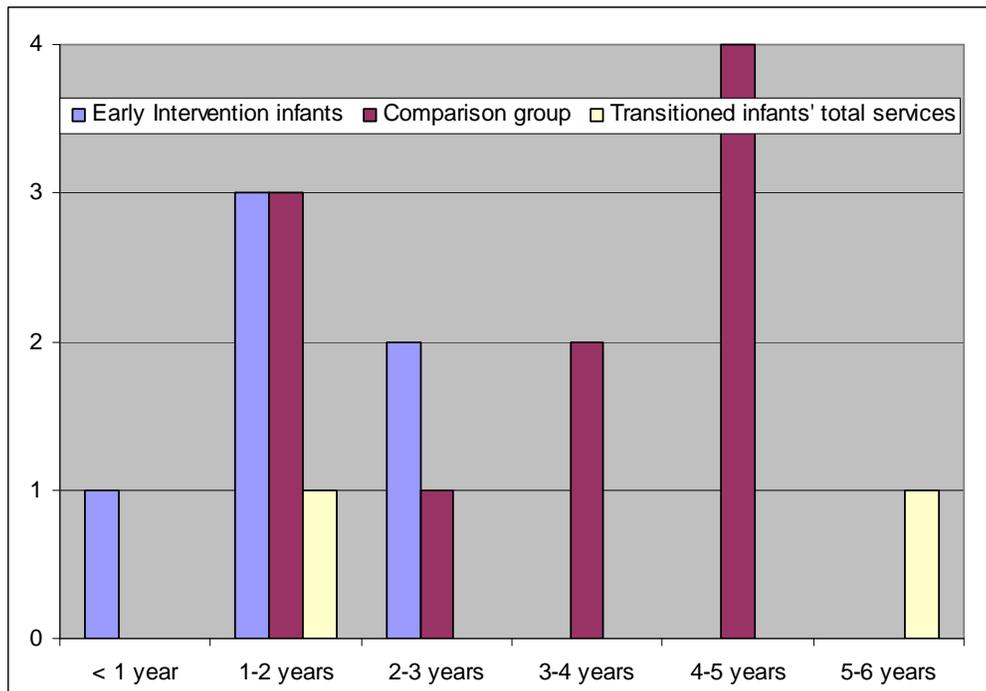


Figure 6. Length of services for Early Intervention infants and Comparison Group before exiting services

SKILLS GROWTH: The infants and children served with special services are commonly assessed using standardized tests including the Bayley Infant Development Test, Battelle Developmental Index, Vineland, Weschler, Kaufmann Brief Intelligence Test, Preschool Language Scale, Arizona Test of Articulation, and numerous others. These tests typically assess the performance of a child in cognitive, language, motor, social, or adaptive skills using a score normed against samples of children of the same age. Typical scores of children receiving services are very low at entry, commonly 65 on a scale in which 100 is considered normal. This typically translates to a developmental level lower than 1% of children that age. Normed scores from the same or different tests have been compared here to assess whether there is acceleration in a developmental domain that was initially delayed before receiving intensive services.

Standardized test scores show that the infant program as well as interventions for children three and over led to gains in the desired developmental areas although the size and percentages of gains is higher for the older comparison group. Older children received services for longer and had longer periods of time between comparable test scores than infants. Interestingly, those served by both programs showed the fastest growth.

Two sets of standardized scores were available for 14 of 37 comparison group students (38%). Seventy-nine percent increased at least 5 points in a developmental domain by the time of the second test. Fifty percent of students increased cognitive or mental scores while 29% increased language or communication scores. The average increase in score was 27 points. Fourteen percent gained from 6 to 15 points, 29% gained from 16 to 30 points, 21% gained from 31 to 45 points, and 14% gained from 46 to 60 points. The average amount of time between scores was 22 months.

Two sets of comparable scores were available for 9 of 32 infants served by the early intervention program (28%). 33% showed an improvement in cognitive or mental skills. Average improvement was 17 points. Eleven percent gained from 6 to 15 points and 22% gained from 16 to 30 points. The average period between tests was 11 months.

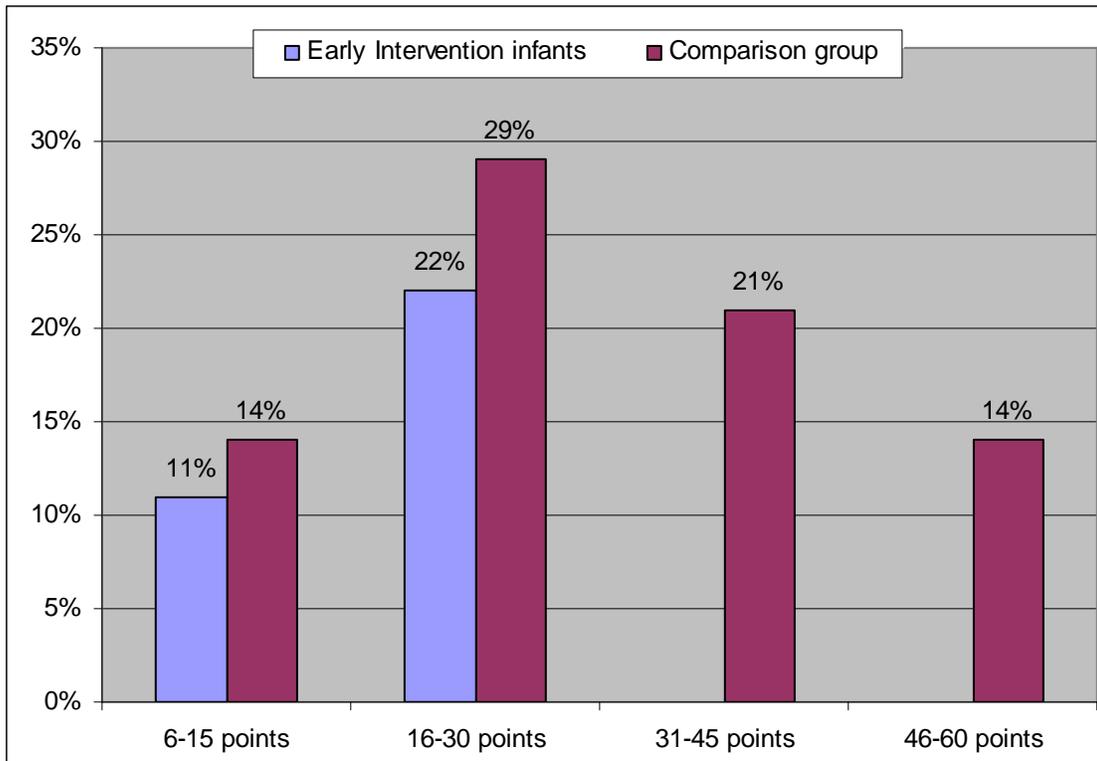


Figure 7. Developmental growth for Early Intervention infants and Comparison Group

Only two children who were served by both the Early Intervention program and IEPs had two test scores to compare. Both grew in cognitive development by an average of 24 points in the 9 months between the two scores.

CONCLUSIONS

Service numbers, qualitative information and quantitative data all described here shows that the PUSD Early Intervention program has successfully achieved its goals. Assessment and referral systems have been established to identify and serve infants that would have gone unserved before implementation of this program. Infants have received a range of needed high quality services that have allowed a substantial percentage to accelerate their development in previously deficient areas. Infants were able to exit special services after a shorter period and at a much younger age than children not served until age three.

Outcome #1: More Plumas County infants who are at risk for developmental delays will be identified and served at an earlier age: The number of infants intensively served by PUSD increased by seven fold in the first four years of the Early Intervention program. Thirty-two infants with qualifying risk factors were served, as opposed to the 4 low incidence infants that would have been served without the program.

Outcome #2: Infants served by the infant stimulation program will require a shortened time of intervention through special education. Twenty-two percent of infants served exited the Early Intervention program after meeting their developmental goals. They were able to do so after receiving services for a shorter period of time (23 months) than children who began services later (40 months). Their average age at exit was 2 ½.

Outcome #3: Plumas County infants who are served will have improved educational outcomes due to being served earlier. One third of infants served showed improvement in cognitive development within an 11 month testing period. Although this is lower than the 79% improvement rate for comparison group children, it occurred within a testing period half as long as for older children. The only two children served by both programs with comparison scores showed cognitive growth on the same magnitude as the comparison group, but in less than half the time.

Outcome #4: Plumas County infants will be served by systems that are more comprehensive and accessible, and better integrated across agencies. The goal of First 5 Plumas in providing funding for the Early Intervention program was to improve the systems in place to serve children with disabilities and special needs. Data presented here show that this goal was achieved with great success. Before initiation of the Early Intervention program, PUSD provided services only to low incidence infants and outreach to families was limited. Since receiving funding from First 5 Plumas, PUSD has also dedicated financial resources to home visiting and nursing services and the Local Child Care Planning and Development Council has coordinated and funded outreach to families to identify and reach additional infants. This collaborative approach has greatly increased the number of infants served and has improved their developmental outcomes. The investment by First 5 Plumas has helped to enhance services for special needs infants and their families, improved access, and increased service coordination, agency collaboration, and resource investment.