

**2805 Kingsway
Vancouver BC V5R5H9
Tel: (604) 451-5511 / Fax: (604) 451-5651
www.bc-cfa.org**

EARLY INTERVENTION PROGRAM

OUTCOMES MANAGEMENT REPORT
2024-2025

The Early Intervention Program receives funding from BC Ministry of Children and Family Development

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PROGRAM DESCRIPTION

The Early Intervention Program (EIP) is a community-based service for children with or at risk for developmental delays from birth to age five. The program supports children and their families living in the Vancouver, Burnaby, Richmond and North Shore regions.

Our values which include Family Centred Practice, Innovation, Kindness, Collaboration and Hope guide us in the delivery of service that enhance each child's development and promote participation in all aspects of their lives.

The EIP includes Occupational Therapy (OT), Physiotherapy (PT), Speech Language Pathology (SLP), and Social Work (SW) services. Services include:

- Coaching-based services delivered in-person or virtually in the home, community and clinic
- Resource information for families and parent workshops
- Toy & equipment library

Highlights:

- The new discharge report is used in all regions and reflects the client's strengths and support needs using a routine-based lens.
- The new F-words Goal plan was fully launched and used across regions.
- OT hosted kindergarten readiness groups prior to summer discharges.
- SW hosted multiple Acceptance and Mindfulness for Caregivers groups.
- PT offered pool group sessions to support the client's gross motor development.
- SLP hosted a storytellers group to support social communication, literacy and language development.
- Onboarding program information is now recorded and provided to parents/guardians during intake.
- Parents/guardians receive written and recorded information regarding the EIP processes and available services.
- 2 Rehabilitation Assistant positions were filled. RA services were fully integrated into the program.

PROGRAM UTILIZATION

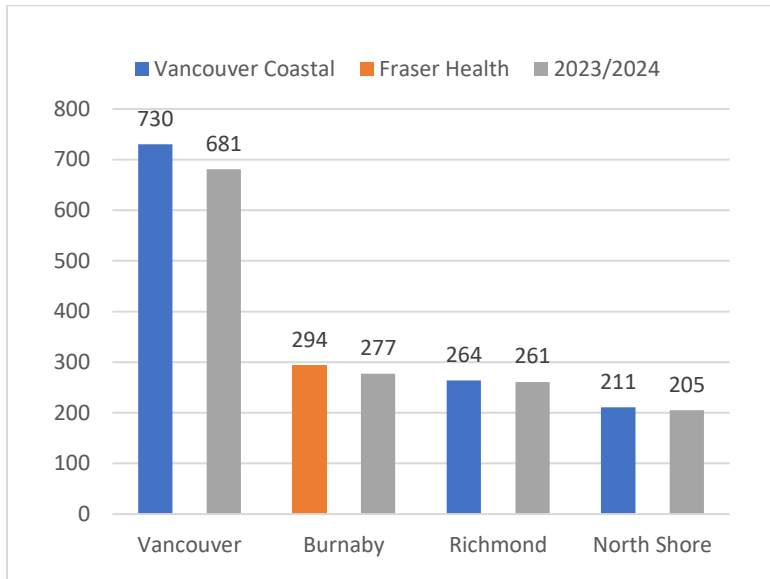


FIGURE 1: Number of Unique Children Served by Region

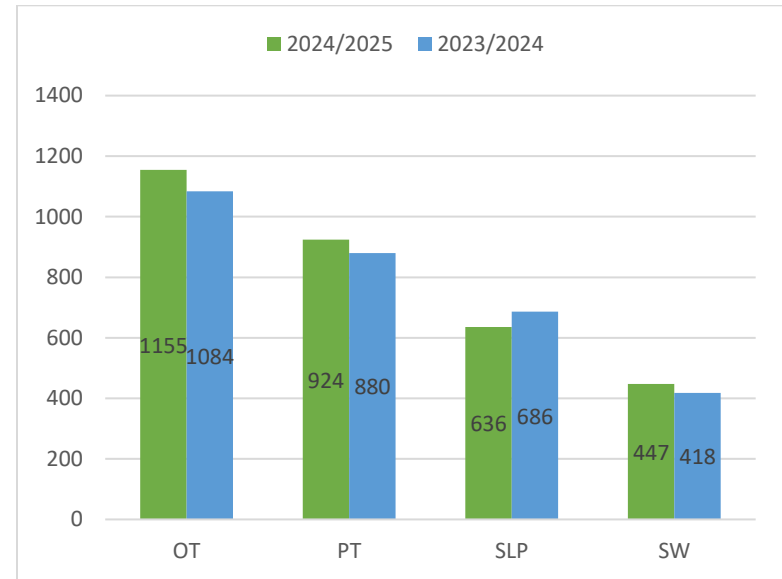


FIGURE 2: Number of Children Served by Discipline

Program Utilization Analysis – Children Served

The EIP provided services to 1499 children this year, an increase of 75 children over the previous year. Vancouver continues to see the most significant increase in clients, with both OT and PT serving more clients across regions than last year. SLP had a decrease in the number of children served, which is likely due to the collaborative effort of the Health Units to ensure that clients are referred and served at the most appropriate program for their support needs.

Program Utilization Data	2024-2025	2023-2024
Children Served	1499	1424
By Region		
Vancouver	730	681
Burnaby	294	277
Richmond	264	261
North Shore	211	205
By Discipline		
OT	1155	1084
PT	924	880
SLP	636	686
SW	447	418

TABLE 1: Program Utilization Data

PROGRAM UTILIZATION

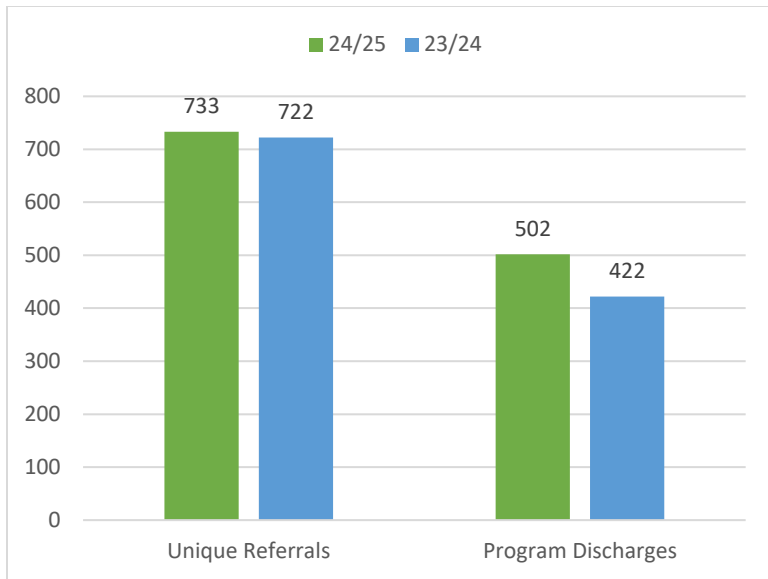


FIGURE 3: Program Utilization

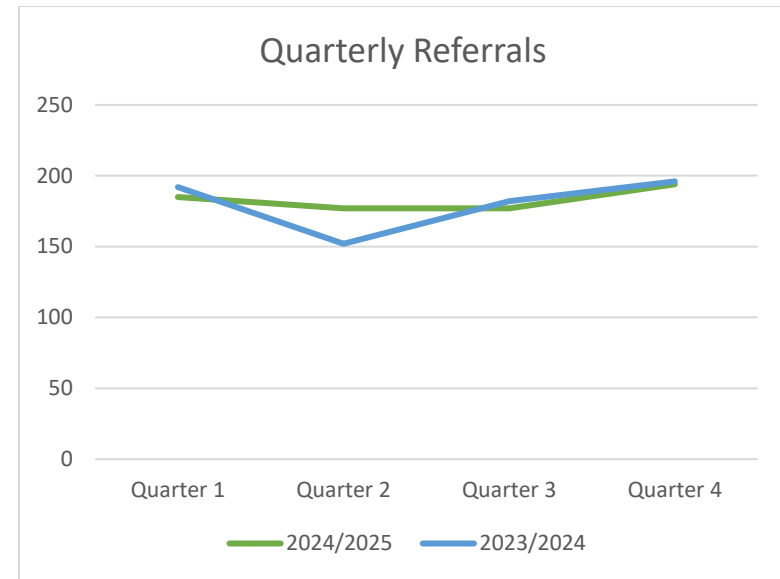


FIGURE 4: Referrals Received Quarter to Quarter

Program Utilization Analysis – Referrals

Unique referrals have increased slightly, and more children were discharged in 2024/2025 compared to the previous year (a 19% increase in program discharges). Although the rise in unique referrals was modest, more children were served this past year (which is the trend each year). This is likely due to the increasing number of children with complex support needs in the community requiring services from an interdisciplinary program. Referrals remained stable over the year and did not show a drop in Quarter 2, unlike in the previous year.

DEMOGRAPHICS

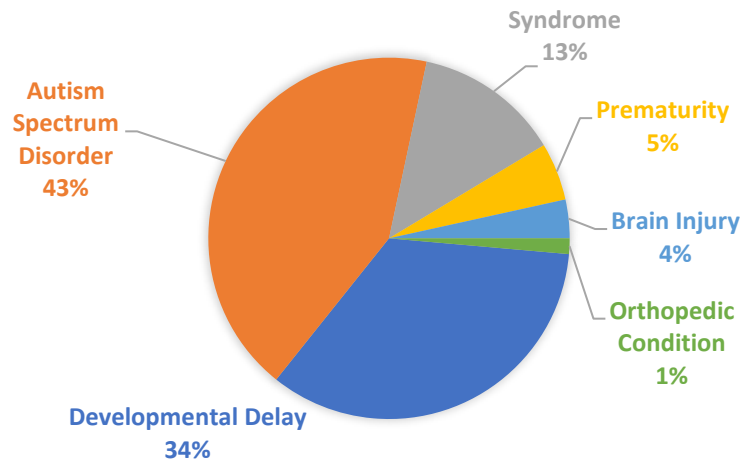


FIGURE 5: Global Diagnosis of Children Served

Demographics Analysis

The largest diagnostic categories include:

- Autism Spectrum Disorder:** Autism is the most frequent diagnosis reported. This percentage may still be underrepresented, as many children are waiting for assessment and, therefore, included in the Developmental Delay category. In addition, this does not capture children who have a different primary diagnosis, such as a Syndrome or a Neuromuscular condition and have Autism as a secondary diagnosis.
- Developmental Delay:** This category includes children undergoing diagnostic investigations (waiting for Autism assessment, genetic testing, imaging), children with no known diagnosis, children that have not been assigned a diagnosis in our record system and children given the developmental delay diagnosis by their medical team. All

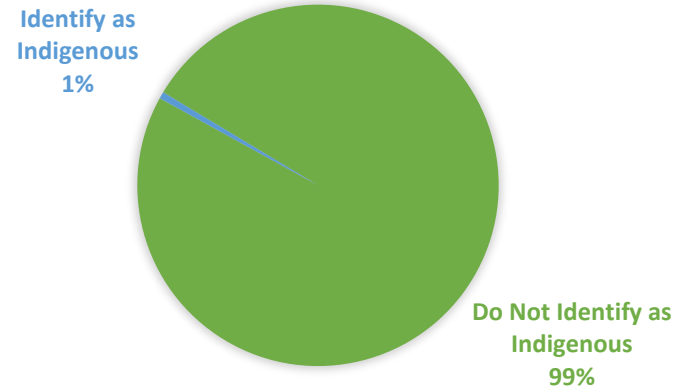


FIGURE 6: Clients Served that Identify as Indigenous

children who are eligible for our program present with a functional developmental delay.

Most of the clients we serve do not self-identify as Indigenous. This percentage may be an underrepresentation as we do not explicitly ask families in forms or interviews; instead, it is recorded if the family shares and volunteers this information. The program strives to support Indigenous Reconciliation and to provide services demonstrating cultural humility using a trauma-informed lens.

2024/2025 PERFORMANCE IMPROVEMENT PLAN

Area for Improvement	Action Plan	Results
<p><i>Client: Make it quick and easy for us to access services</i></p>	<p>Rehabilitation Assistant (RA) services will be added as a new service stream. Both positions will be filled and actively integrated into the program.</p>	<p>Both RA positions were filled for a significant portion of the year, and all disciplines have referred clients to them for intensive bursts of service.</p> <p>RA services have also supported hosting groups and workshops.</p>
	<p>New group offerings occur throughout the year from all disciplines, allowing for points of service while waiting on the waitlist or during a transitional time.</p>	<p>OT, PT, SLP, and SW all offered groups that allowed clients to access services throughout the various stages of the program.</p>
<p><i>Client: Connect clients to other people to share experiences and knowledge</i></p> <p>Families will have the opportunity to connect and learn together.</p>	<p>Families will have access to group orientation as they onboard to the program.</p>	<p>In-person group onboarding was delayed; however, the same information was recorded and is now sent to families during intake, allowing them to learn more about the program before their first appointment.</p>
	<p>Families can connect with others while attending groups while waitlisted for service.</p>	<p>Families have had multiple opportunities for connection over this year, including parent-only groups, parent-and-child groups, joint appointments from our Student-Led Clinic and during our Centre-wide family fun nights.</p>
<p><i>Excel- Deliver high-quality, evidence-based services</i></p> <p>Documentation is useful, efficient and family-centred.</p>	<p>The goal plan reflects the client and family's hopes and goals and is used in all regions.</p>	<p>All regions utilize the goal plan to collaborate with families and community partners, creating a plan based on the family's hopes and goals.</p>
	<p>The program discharge report is family-centred. It reflects the client's support needs and strengths and is rooted in their daily routines.</p>	<p>All regions are utilizing the new discharge report, which describes the client's day through routines and provides suggestions to support their participation.</p>
<p><i>Client: Expand services</i></p> <p><i>People and Organizational</i></p>	<p>Explore the option of expanding the student-led clinic to include OT.</p>	<p>Funding was obtained to support the trial of an Occupational Therapy student-led clinic and a Speech</p>

2024/2025 PERFORMANCE IMPROVEMENT PLAN

<p><i>Capacity: Create meaningful and flexible careers to recruit, retain and engage top talent.</i></p> <p>New roles offer staff leadership opportunities while reducing wait times through the introduction of new service streams.</p>		<p>Therapy student-led clinic. Both positions were posted, and they will begin in the summer of 2025.</p>
<p><i>Collaborate: Strengthen external partnerships.</i></p> <p>Community partners have the necessary information to make informed decisions regarding referrals to the EIP.</p>	<p>Eligibility criteria are clear and readily available. Staff meet regularly with community partners to address questions regarding referrals.</p>	<p>Leadership meets regularly with community partners to collaborate regarding referrals and service delivery. Eligibility continues to remain unclear at times due to the complex needs of our clients and the specificity of our services within the program and amongst disciplines.</p>

2024-2025 PROGRAM OUTCOMES

SERVICE ACCESS

Objective/Outcome	Performance Indicator	Target	Measure Applied To	Achieved Outcome		
				2024-2025	2023-2024	2022-2023
Clients are able to access services in their preferred language	Percentage of respondents that answer “agree” or “strongly agree” to: we were able to receive services in our preferred language	95%	All clients	96%	94%	94%
Services are quick and easy for all clients to access	Percentage of respondents that answer “agree” or “strongly agree” to: It was quick and easy for us to access services	90%	All clients	86%	81%	69%
Reduce the time children spend waiting for service	Average wait to receive an initial service plan	14 days	All new referrals	8 Days	2 weeks	6 weeks
	Total average wait time	6 months	All new clients	6.7 Months	6.8 months	7 months

Service Access Analysis:

The Early Intervention program has continued to reduce the initial wait time, with clients receiving a service plan within 8 days of their referral. However, wait time on our regular waitlist continues to average over 6 months. According to our client experience survey, parents reported that the initial entry into the program was quick and efficient, and that in urgent situations, clients are seen promptly (such as referrals due to feeding and swallowing challenges). However, they also report that the overall wait time for regular service remains too long.

“Timely service for feeding”- Parent responding to the question: What went well?

“Screening was fast, but waitlist to see provider for services is very behind. We are currently still waiting.” - Parent

RESOURCES USED TO ACHIEVE RESULTS FOR THE PERSONS SERVED (EFFICIENCY)

Objective/Outcome	Performance Indicator	Target	Measure Applied To	Achieved Outcome		
				2024-2025	2023-2024	2022-2023
All staff spend the majority of their time on client service	All client-related time as a percentage of the total daily stats reported by staff.	75%	All EIP staff	66.5%	77.4%	82%

Efficiency Analysis:

Staff spend the majority of their time on client-related work. In addition to client appointments, the service includes accessing funding for equipment and assessments, supporting key transition periods, report writing and collaborating with community partners to increase participation. This year, we saw a drop in our percentage, which could be in part due to onboarding several new staff members, which requires a significant amount of time learning about the agency, the role, the role of our community partners and funding sources.

“All the communication guidance and help I receive from all the services, and how, as a team, we work on my son's goal plan together, not only with the service at BCCFA but also by connecting all the teams together with the Behaviour Interventionist and the manager at the daycare.”- Parent response to: What went well?

RESULTS ACHIEVED FOR THE PERSONS SERVED (EFFECTIVENESS)

Objective/ Outcome	Performance Indicator	Target	Measure Applied To	Achieved Outcome		
				2024-2025	2023-2024	2022-2023
Families have increased knowledge and have gained skills to help their child achieve their goals	The percentage of respondents who 'agree' or 'strongly agree' to: I have gained new knowledge or skill during this workshop/ group or training.	100%	All Workshop/ Group participants	100%	76%	100%
	Percentage of respondents who 'agree' or 'strongly agree' to: we have made progress towards our goals.	95%	All clients	92%	92%	88%
	Percentage of short-term outcomes that are rated as 'achieved'	75%	All clients	80%	81%	83%

Effectiveness Analysis:

Multiple groups were offered this year to support regular service, offer service while on the waitlist, or to support the kindergarten transition. These were very well attended and received by clients and families. Staff have fully integrated the use of the F-words framework to collaborate with families in creating meaningful goals based on their values and are rooted in their daily routines, which results in positive outcomes.

"My child has met huge development goals from the work done with the various therapies she receives" - Parent

"My child started to walk and made a lot of progress with the help from BCCFA"- Parent

"My speech delayed son is making big social strides and responding well to the strategies we have implemented" -Parent

EXPERIENCE OF SERVICES RECEIVED AND OTHER FEEDBACK – PERSONS SERVED

Objective/Outcome	Performance Indicator	Target	Measure Applied To	Achieved Outcome		
	Percentage of respondents that answer “agree” or “strongly agree”			2024-2025	2023-2024	2022-2023
Families are satisfied with the services offered by the EIT program	We have a clear understanding of the supports and services available from the BCCFA	90%	All clients	93%	87%	81%
	We were involved in developing our goals, strategies and/or service plan	100%	All clients	95%	97%	94%
	Services from the BCCFA have made a positive difference in our lives	95%	All clients	96%	91%	88%
	We were treated with respect and courtesy during our time receiving services from the BCCFA	100%	All clients	99%	99%	97%
	We were satisfied with the quality of services we've received from the BCCFA	95%	All clients	92%	89%	88%

Experience of Persons Served Analysis:

Overall, parent feedback scores continue to increase, indicating that parents appreciate the holistic support they receive from the EIP. The F-words framework is used with the family throughout their time in the program, ensuring that services are provided in a meaningful way based on the client and family’s unique strengths and support needs.

“Services with our OT, PT and SLP has made a positive impact on our son. I've seen him progress with his skills in just one session with OT. Our SLP is so attentive and is always providing constructive feedback. We couldn't be happier with these services.” – Parent

“We thought all the staff treated us with kindness and respect. The OTS are great with kids and listen to our concerns.” - Parent

“We especially appreciate the help in organizing everything and coming up with a holistic plan” - Parent

EXPERIENCE OF SERVICES RECEIVED AND OTHER FEEDBACK – COMMUNITY PARTNERS

Objective/Outcome	Performance Indicator Percentage of respondents who answered “agree” or “strongly agree”	Target	Measure Applied To	Achieved Outcome		
				2024-2025	2023-2024	2022-2023
The program eligibility criteria are clear	The program eligibility criteria are clear.	90%	All referring agencies	74%	71%	77%
The referral process is simple and easy to understand	The referral process is simple and easy to understand.	95%	All referring agencies	87%	96%	92%
Partners are satisfied with the services offered by the BCCFA	I am satisfied with the services offered by the BCCFA.	100%	All referring agencies	87%	75%	92%

Experience of Community Partners Analysis:

The clarity of the EIT program’s eligibility criteria remains an ongoing challenge. Due to the complex support needs and diversity of the children we serve, it has been difficult to create clear guidelines that respond to all situations. As a result, we have established multiple touchpoints between our community partners and leadership to discuss possible referrals and promptly address questions regarding eligibility.

“Love the online referral system it makes it easy to put in a referral” – Community Partner

“Your therapists are hardworking and many are excellent collaborators” – Community Partner

“You make referrals easy and you connect well with us when you have questions. I also appreciate that it is one referral point for many communities. We completely rely on the rapid response feeding team. And we love initiatives that have come out of your centre (Feeding Community of Practice)”- Community Partner

2025/2026 PERFORMANCE IMPROVEMENT PLAN

BCCFA Strategic Priorities	Initiatives	Targets
<p>Delivering Exceptional and High Quality Services</p>	<p>Reduce program wait times by optimizing workflows, increasing capacity and prioritizing services in alignment with REDI commitments.</p>	<ul style="list-style-type: none"> • Children will receive a screen within 6 weeks of the intake plan. • Provide service streams for children on the waitlist, including increased group offerings and Student-Led Clinic appointments for OT, PT, and SLP.
	<p>Expand program advisory committees to ensure diverse client and family voices actively shape services.</p>	<ul style="list-style-type: none"> • Trial an advisory group and recruit families to include a diverse group that can provide feedback on our processes, reporting, and service delivery.
<p><i>Growing our Impact and Influence</i> Deepen and expand services to address unmet needs</p>	<p>Expand student-supported delivery models across our services to improve accessibility and capacity across multiple disciplines.</p>	<ul style="list-style-type: none"> • Launch OT and SLP student-led clinics. • Offer interdisciplinary student-led service as able with OT, PT and SLP. • Clients will have access to new service streams, including intensive bursts and joint same-discipline appointments.