

September 12, 2024

Dear New York State Education Department Partner:

The Early Intervention Coordinating Council (EICC) is a 30-member advisory council established in New York State Public Health Law. The EICC assists the New York State Department of Health (the Department) in the administration of the Early Intervention Program, a federal entitlement program governed by Part C of the Individuals with Disabilities Education Act (IDEA). This comprehensive Program supports infants and toddlers, birth to age three, with developmental delays or disabilities by delivering quality services to approximately 70,000 eligible children in NYS annually. Birth to three is a critical period for early brain development and builds the foundations for later learning and success. In fact, one out of every three children that receive EI services do not require special education services when they reach school age. If children still require specialized supports and services, they tend to require less intensive services.

Following the COVID-19 pandemic, there has been a marked reduction in the number of special education teachers, speech-language pathologists, occupational therapists, and physical therapists working in the NYS EI Program. In the first quarter of 2024, there were 13,220 people of various disciplines delivering EI services in NYS, a decrease of nearly 8% from the first quarter of 2019. However, according to the New York State Office of Professions, the number of licenses issued in key disciplines such as speech language pathology and physical therapy increased by 14% and 32% respectively from 2019 to 2023, growth that has not translated to the Early Intervention Program.

This has resulted in increased wait times for children to begin these critical developmental services. According to the NYS Early Intervention Annual Performance Reporting (APR) Data, prior to the COVID-19 pandemic in reporting period 2019-2020, 83% of children in NYS received their EI services within 30 days of their service planning meeting. That compliance rate was similar in the NYC Early Intervention Program. However, during reporting period 2022-2023, that number had dropped by 20%, with only 63% of children receiving their EI services within 30 days in NYS. Local School Districts across New York State are reporting that children are entering preschool special education services with more significant delays and service needs than what was experienced prior to the COVID-19 pandemic.

To examine the disparity between the number of therapists obtaining licensure versus the number entering the EI workforce, the EICC Workforce Capacity Taskforce worked in partnership with the City University of New York Research Network to examine the certification and licensure requirements across the four most-authorized disciplines in Early Intervention: early childhood special education, occupational therapy, physical therapy, and speech-language pathology, and to make recommendations to increase EI workforce capacity. Based on the findings of this report¹

1 Shannon, J.D., Bergen, M., Beaumont-Bowman, S., Elenko, B., and McFadden, K. (2024) *Building the Early Intervention*.

https://www.health.ny.gov/community/infants_children/early_intervention/eicc/docs/2024-3-14_academic_partners_research.pdf , the EICC and the New York State Department of Health

Bureau of Early Intervention leadership would like to engage your office at the State Education Department to discuss the findings of the report and work in collaboration to:

1. Clarify current licensure and credentialing requirements to allow for the competency areas for the delivery of Early Intervention evaluations and services to the birth to three population to be integrated into curricula for Early Childhood Special Education, speech language pathology, occupational therapy and physical therapy under current NYSED licensure and credentialing requirements for each profession.
2. Clarify current licensure and credentialing requirements to allow for fieldwork hours delivered under the supervision of Early Intervention providers providing facility, group, home, and community services to count towards licensure and credentialing requirements for Early Childhood Special Education, speech language pathology, occupational therapy, and physical therapy.
3. Explore the integration of Early Intervention competency language into continuing education requirements for occupational therapists, physical therapists, and speech language pathologists.
4. Discuss the creation of an Interdisciplinary Extension in Early Intervention and an Annotation for Teaching-Supporting Infants and Toddlers with Disabilities in Early Intervention utilizing existing models for annotations and extension under NYS Education Law.

Creating opportunities within the licensure and credentialing requirements for students in the four most authorized disciplines in Early Intervention to learn about EI core competencies and to engage in clinical experiences with infants and toddlers and their families in EI settings is key to addressing the workforce shortages being experienced across all counties in New York State. Currently, there is a lack of college-level EI course content, and related clinical experiences devoted to EI and the birth to three population. In addition, there are no incentives or enhancements available to providers to offer clinical supervision for students interested in entering the EI workforce. This is a major driver in the persistent decline in EI workforce capacity and the timely delivery of EI services to infants and toddlers birth to three with developmental delays and disabilities.

Thank you for this opportunity to share this information with you. We hope to meet with you soon to begin a much-needed partnership to build early intervention workforce capacity that will significantly impact the developmental path and future success of our youngest New Yorkers