



**BCACDI**  
The BC Association for Child Development and Intervention

# BC's Specialized Children Services

Year in Review:  
2019 / 2020



Prepared By:  
BCACDI

# Who is BCACDI

BCACDI member agencies, commonly referred to as Child Development Centres, are recognized leaders in innovation and collaboration who deliver services to children and youth with support needs to help them reach their full potential. We're skilled at delivering these essential services in the most cost-effective way, helping families manage health, developmental and social barriers. Child Development Centres have been building stronger futures for British Columbians for more than four decades. Our non-profit and charitable organizations are community-based and accountable to committed volunteer boards.

Programs and services our member agencies deliver include Early Intervention Therapies to assist with mobility, daily function, and communication challenges (Physiotherapy, Occupational Therapy, Speech-Language Pathology), the Infant Development Program to provide support and advice to families during the critical first few years of life, and the Supported Child Development Program to assist children and youth with support needs to participate in early learning and child-care settings. To address needs in their community many member agencies provide additional specialized services such as programs for children and youth with Autism Spectrum Disorder, parent training programs, and much more.

BCACDI has member agencies in each region of the province in both urban and rural settings. We also have members serving remote and Indigenous communities. This ensures we can provide a strong provincial sample of what is happening across BC.

**TO LEARN MORE VISIT OUR WEBSITE:  
[WWW.BCACDI.ORG/BCACDI-MEMBER-AGENCIES](http://WWW.BCACDI.ORG/BCACDI-MEMBER-AGENCIES)**

# Key Indicators

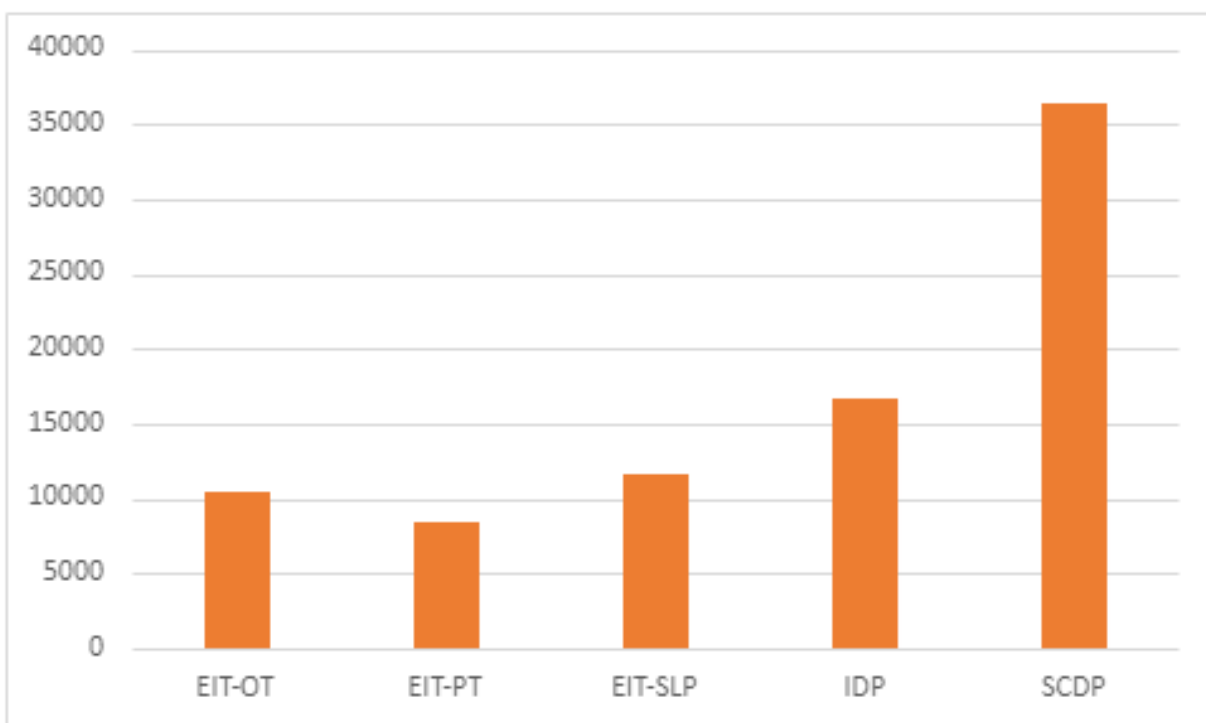
BCACDI is focusing our initial data work on monitoring service demand and service access for some of the main programs member agencies deliver. Service demand is being monitored by the number of referrals received and number of children served, and service access is being monitored by tracking the average wait time from the date a child is assigned to a program to the date service is initiated. The Association spent several years building consensus on definitions and the data collection process and will continue work to ensure the data reported remains valid and reliable. Data is collected once a year and reflects the previous fiscal year's service delivery (e.g. April 1, 2019 – March 31, 2020).

At this time BCACDI's focus is on the three foundational programs most common to member agencies: Infant Development, Supported Child Development, and Early Intervention Therapies. Supported Child Development is broken into two categories: Consulting Support and Extra Staffing Support. An example of Consulting Support is when a SCD Consultant spends time working with staff at a childcare setting assisting to help create an environment that is more inclusive for a particular child. Extra Staffing Support is when the SCD support worker is assigned as an extra staff within a childcare setting to work with a specific child or children who would otherwise be unable to participate in that setting. Early Intervention Therapies is broken into three rehabilitation professions: PT – Physiotherapy, OT – Occupational Therapy, SLP – Speech-Language Pathology.

# 2019/2020 by the Numbers

The majority of BCACDI member agencies utilize the same client management software system and are supported by their software vendors in the submission process. For the 2019/20 data collection BCACDI had a 74% participation rate.

## OVERVIEW OF CLIENT VISITS BY PROGRAM

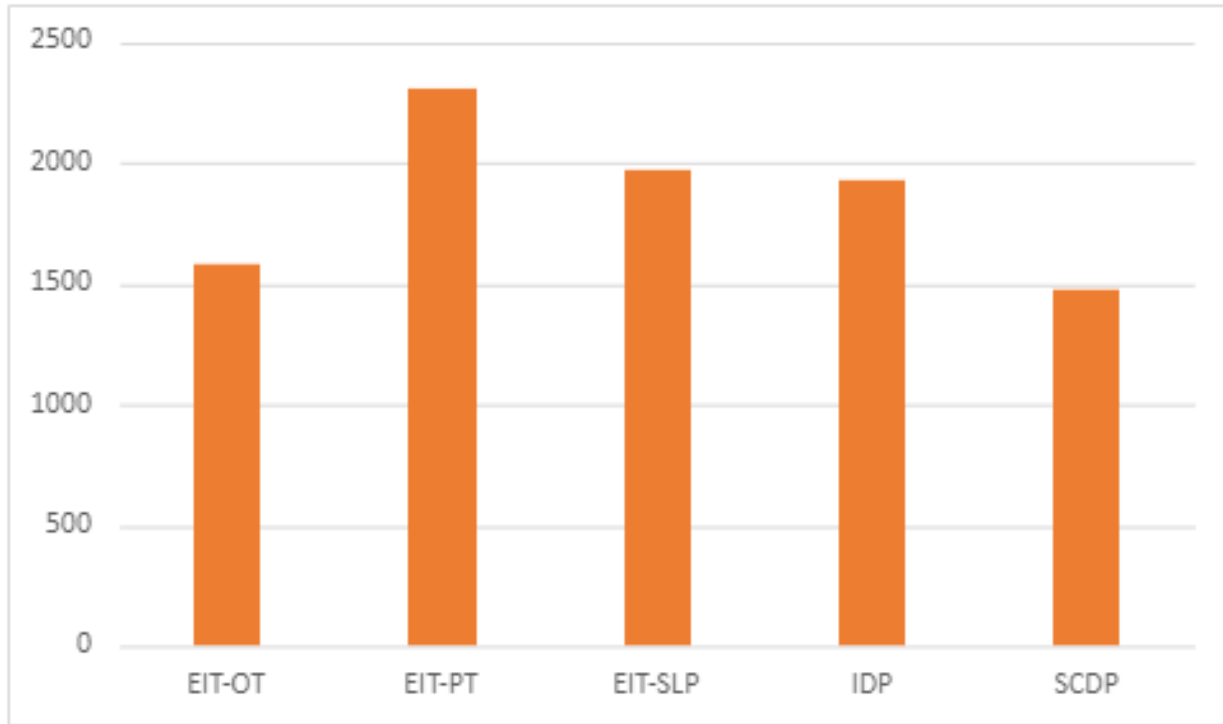


EIT – Early Intervention Therapies  
OT – Occupational Therapy  
PT – Physiotherapy

SLP – Speech-Language Pathology  
IDP – Infant Development Program  
SCDP – Supported Child Development Program

BCACDI member agencies participating in this year's data collection collectively provided more than 83,000 client visits. The Supported Child Development Program had the highest number of client visits due to the nature of the program – providing direct, daily support to children in early learning and childcare settings. The expectation is that pressure on this program will continue to grow due to the focus in BC on increasing the number of childcare spaces.

## OVERVIEW OF REFERRALS BY PROGRAM

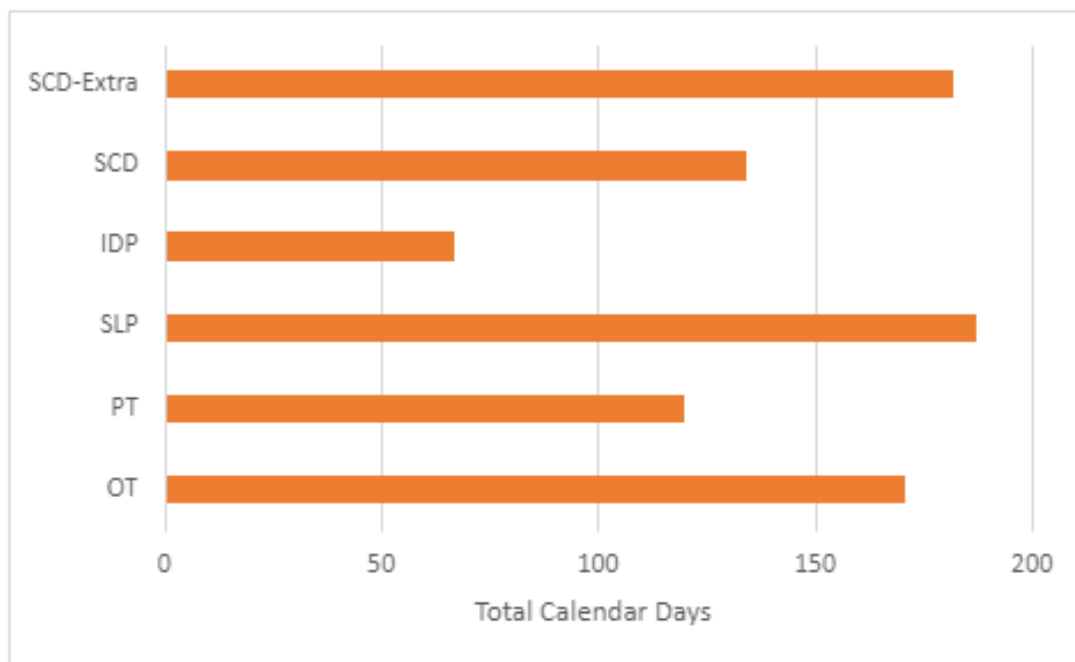


EIT – Early Intervention Therapies  
OT – Occupational Therapy  
PT – Physiotherapy

SLP – Speech-Language Pathology  
IDP – Infant Development Program  
SCDP – Supported Child Development Program

BCACDI member agencies participating in this year's data collection handled more than 10,000 referrals to the 3 foundational programs captured in this report. Referrals typically come from public health nurses, pediatricians, and family physicians. Parents can also self-refer their child. This year's report demonstrates a significant demand in the Early Intervention Therapies Program.

## OVERVIEW OF AVERAGE WAIT TIMES



SCD-Extra – Supported Child Development Program  
IDP – Infant Development Program  
PT – Physiotherapy  
SCD – Supported Child Development  
SLP – Speech-Language Pathology  
OT – Occupational Therapy

Timely access to the specialized services and supports that can empower children and families and help them reach their full developmental potential is a priority for BCACDI. Currently there is no mechanism in place to standardize and monitor the wait times families face once referred to a foundational program. BCACDI is attempting to address this issue through our annual data report.

There are many variables that can impact wait times including staffing challenges, excessive caseloads, and limited resources. In addition, agencies have different organizational infrastructures, varied triage processes, and evolving service delivery models to respond to the needs in their respective communities. The intent of the BCACDI data report is to provide a snapshot of the average wait time faced by children and families in the previous fiscal year, and readers should consider and appreciate the multitude of variables that impact a family's ability to access a program.



### **Infant Development Program**

Provincially, the average wait time to access the Infant Development Program was 67 days, with the longest wait time of 186 days. Compared to other programs, IDP has one of the shorter average wait times.

### **Supported Child Development Program**

Supported Child Development is comprised of two components: consultant support and extra staffing support. The average wait time for consultant support is lower than for extra staffing support. The average wait time for SCD consultant is 134 days, while the wait for SCD extra staffing support is 182 days. There are communities in BC where the SCD consultant wait times and SCD extra staffing support wait times are more than one year.

## Early Intervention Therapies Program

The Early Intervention Therapies Program has 3 components: Physiotherapy (PT), Occupational Therapy (OT), and Speech-Language Pathology (SLP). This year's data report was similar to last year's in that the wait times are lengthier for families trying to access SLP.

Broad ranges in wait times are also observed in the Early Intervention Therapies Program, and this year's collection revealed 3 communities with wait times of more than one year for SLP.





# Impacts of Lengthy Wait Times

All children and youth requiring extra support have the right to timely and sufficient levels of service that will help them achieve their true potential.

The body of evidence continues to grow demonstrating the importance of early intervention, and the positive return on investment when services and supports are accessed in the early years. It is clear that the developmental trajectory of a child can be positively impacted by effective early intervention. Unfortunately in BC there continues to be families facing significant waits to access programs and services, and once services are accessed they are often not as intense or frequent as what is clinically recommended due to limited resources. All areas of the Province and all programs are impacted by excessive waits, with two programs in particular the most impacted: **Early Intervention Therapies – SLP** and **Supported Child Development – Extra Staffing Support**.



**Early Intervention Therapies – SLP** connects families with professionals that help their child learn to communicate.

This program currently has an average wait time of 6 months and one week. With the longest reported wait times of over a year. This comes at a critical time for a child to develop their core speech and communications skills. For a 3-year-old toddler, 6 months is a significant portion of their young life spent waiting to access a specialized service that will improve their quality of life. For a 5-year-old about to enter Kindergarten and just recently referred for early intervention, such a wait means they will not likely not receive any levels of service prior to entering school.

**Supported Child Development – Extra Staffing Support** provides the expertise and support necessary for a child to attend a childcare setting. As BC moves towards universal childcare, the province needs to ensure the Supported Child Development program has adequate resources to ensure early learning and childcare spaces are accessible for all children. Without access to this program many parents are unable to join the workforce, and their child misses out on quality learning and socialization opportunities. Families in BC are currently waiting an average of 6 months to access this program, with several communities facing waits of over a year.



We have the infrastructure in place in BC to do better, and all that is needed is more investment in the specialized service available for children and youth with support needs. BCACDI will utilize the data in this report and our relationships with others in the sector to continue advocacy for more investment in these programs.

# Next Steps

BCACDI is committed to this annual data report as one component of a comprehensive monitoring plan to ensure children and youth with support needs have timely access to effective programs and services. We will continue to work with our partners in the sector and with Government to discuss how to address the broad ranges of wait times observed across the Province, and potential establishment of program specific wait time benchmarks for early years specialized services. Wait time benchmarks, in conjunction with valid and reliable wait time data, could help guide new investments in the sector to ensure maximum impact.

Thank you for taking the time to review **BCACDI's 2019/2020 'By the Numbers'**.