



## **OCDEL Early Intervention Family Survey 2023**

This survey is for families with children receiving Early Intervention services.

It is important that you communicate with us! Your family has a unique perspective that only you can express and share. This short survey is one way that you can provide information and feedback.

- The survey should take 5 - 10 minutes to complete.
- Your responses will help guide efforts at the statewide and local levels to improve services and results for children and families.
- Please read each question carefully and base your responses on your experiences in Early Intervention.
- We understand that families may have experiences with a variety of different people in Early Intervention. We are asking that you consider your experiences with these individuals as a whole.
- Your responses are confidential.
- Programs will not be able to identify your responses in their summary reports.

**When completed, please mail the survey to:**

ATTN: EI Family Survey  
OCDEL/BEISFS  
333 Market Street  
Harrisburg, PA 17126

**Please skip any questions that do not apply to your family and situation.**

## **Demographic Questions**

The first few questions are about your child. This information will help us know what Early Intervention Program your child participates in.

My child's birthday is

	Month	Day	Year

What is the primary language that your family speaks at home?

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My child lives in this county:

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My child lives in this school district:

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My child's race is

- ☐ **American Indian or Alaskan Native** - The category "American Indian or Alaska Native" includes all individuals who identify with any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment. It includes people who identify as "American Indian" or "Alaska Native" and includes groups such as Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, and Nome Eskimo Community.
- ☐ **Asian** - The category "Asian" includes all individuals who identify with one or more nationalities or ethnic groups originating in the Far East, Southeast Asia, or the Indian subcontinent. Examples of these groups include, but are not limited to, Chinese, Filipino, Asian Indian, Vietnamese, Korean, and Japanese. The category also includes groups such as Pakistani, Cambodian, Hmong, Thai, Bengali, Mien, etc.
- ☐ **Black or African American** - The category "Black or African American" includes all individuals who identify with one or more nationalities or ethnic groups originating in any of the black racial groups of Africa. Examples of these groups include, but are not limited to, African American, Jamaican, Haitian, Nigerian, Ethiopian, and Somali. The category also includes groups such as Ghanaian, South African, Barbadian, Kenyan, Liberian, and Bahamian.
- ☐ **Native Hawaiian or Pacific Islander** - The category "Native Hawaiian or Other Pacific Islander" includes all individuals who identify with one or more nationalities or ethnic groups originating in Hawaii, Guam, Samoa, or other Pacific Islands. Examples of these groups include, but are not limited to, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, and Marshallese. The category also includes groups such as Palauan, Tahitian, Chuukese, Pohnpeian, Saipanese, Yapese, etc.
- ☐ **White** - The category "White" includes all individuals who identify with one or more nationalities or ethnic groups originating in Europe, the Middle East, or North Africa. Examples of these groups include, but are not limited to, German, Irish, English, Italian, Lebanese, Egyptian, Polish, French, Iranian, Slavic, Cajun, and Chaldean.
- ☐ **Multiracial** - The category "Multiracial" includes all individuals who identify with two or more of the race categories above.
- ☐ **I prefer not to answer.**

My child is of Hispanic, Latino or Spanish origin, including Mexican, Mexican-American, Chicano, Puerto Rican, or Cuban origin.

- ☐ Yes
- ☐ No

**If your child is 3 years of age or older, please ANSWER this question.**

**If your child is under 3 years old, please SKIP to the next page.**

My child has this type of delay or disability

- ☐ Developmental Delay
- ☐ Speech or Language Impairment
- ☐ Autism
- ☐ Other Health Impairment
- ☐ Multiple Disabilities
- ☐ Hearing Impairment including Deafness
- ☐ Visual Impairment including Blindness
- ☐ Orthopedic Impairment
- ☐ Traumatic Brain Injury
- ☐ Deaf-Blindness
- ☐ Emotional Disturbance
- ☐ I'm not sure.

Almost done! In the next section, there are 20 quick questions about your experiences in the Early Intervention Program.

**Please skip any questions that do not apply to your family and situation.**

In the past year, Early Intervention staff have

Worked with my family to develop ideas and strategies to help my child learn.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Supported my family as the first teacher for my child.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Helped my child to build relationships with other children and adults.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Helped me to communicate more effectively with the people who work with my child and family.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Helped me to know about my child's and family's rights concerning EI services (such as filing a complaint, requesting mediation, or due process).

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Explained what options parents have if they disagree with a decision made by EI staff.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Used my home language and preferred communication methods.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Helped me to incorporate my cultural values and practices to help my child learn.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Made me feel part of the IFSP/IEP decision-making process.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Built on my child's strengths and interests.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Had ongoing and open communication with my family.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Were honest with me, even if they had difficult things to discuss.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree



In the past year, Early Intervention staff have

Helped me to support my child in typical places with children of the same age (for example, at home, in childcare, the playground, or preschool).

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Provided me with resources to further my knowledge of my child's unique needs.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Helped me to connect with other programs and/or non-EI services that met our family's needs, interests, and goals.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Encouraged me to connect with other families (for example, by connecting me to: Parent to Parent of PA, Parent Training and Information Centers, Family Centers).

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Shared information with me about family leadership opportunities.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Told me about opportunities to be involved in improving the local Early Intervention program.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

**Please skip any questions that do not apply to your family and situation.**

In the past year, Early Intervention staff have

Developed a transition plan based on my child and our family's strengths, needs, and concerns.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

In the past year, Early Intervention staff have

Helped me to address concerns and problem solve during the transition process.

- ☐ Very Strongly Agree
- ☐ Strongly Agree
- ☐ Agree
- ☐ Disagree
- ☐ Strongly Disagree
- ☐ Very Strongly Disagree

Do you have a concern and would like a representative from the Early Intervention program to contact you?

- ☐ Yes
- ☐ No

If yes, please include your contact information so we can discuss your concern.

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_