The Early Childhood Service Intensity Instrument (ECSII) ©
American Academy of Child and Adolescent Psychiatry
Work Group on Community-Based Systems of Care

PURPOSE OF THE ECSII

The Early Childhood Service Intensity Instrument (ECSII) determines intensity of service need for infants, toddlers, and children from ages 0-5 years. The ECSII is a tool for providers and others involved in the care of young children with emotional, behavioral, and/or developmental needs, and their families, including those children who are experiencing environmental stressors that may put them at risk for such problems. Such children and their families may need services from a variety of agencies and providers including child welfare, mental health, primary and specialty health care, child care, early education, adult mental health and substance abuse services, and an array of community supports. The ECSII provides a common language for these diverse individuals and offers guidance in selecting appropriate services at the appropriate intensity for the youngest and most vulnerable children.

CONCEPTUALIZATION OF SERVICE INTENSITY

The ECSII is based on the concept of Service Intensity (SI) as opposed to traditionally defined “level of care”. Traditionally, level of care has implied facility-based programs with ascending levels of restrictiveness. Since young children and their families often require services in multiple contexts, the breadth of the service plan may be more important than restrictiveness. We believe that Service Intensity best captures this concept. Service intensity involves multiple factors, not only the frequency and quantity of services, but also the extent to which multiple providers or agencies are involved, as well as the level of care coordination required.

DEVELOPMENTAL PERSPECTIVE

The ECSII is based on a developmental perspective that recognizes the changing capacities and needs of the child over this rapid period of development, as well as the considerable individual variations in normal development. The ECSII emphasizes the dynamic interplay of risk and protective factors with the child’s temperament and developmental capacities. It also emphasizes the central importance of significant relationships in the development of young children. The ECSII can help identify compromise or insecurity in the child’s significant relationships, and guide selection of services and supports to address these concerns in order to mitigate current and future developmental, psychological, or behavioral problems. The ECSII also approaches each child’s “caregiving system” as an ecosystem in which extended family and other supports in the community and system of care have the potential to play an important role. This caregiving ecosystem includes relationships not only between the child and significant caregivers (i.e. dyadic relationships), other adults and peers, but also between the caregivers.
and other family members and individuals in their community and social network. Additionally, each family has a unique cultural identity consisting of beliefs and values, strengths, practices, and ways of relating to their community.

VALUES AND PRINCIPLES

The ECSII is based on the system-of-care philosophy, which embraces a family-driven, child-centered model of care that integrates and coordinates the efforts of different agencies and providers to individualize care in the least restrictive setting that is clinically appropriate. This approach is very well suited for young children who receive services from multiple agencies. Using the ECSII, different providers and agencies can collaborate to provide services at specific levels of Service Intensity using a variety of approaches, each individualized to the unique needs, beliefs, and strengths of each child and family. The ECSII is non-prescriptive regarding which specific services are needed to achieve each level of Service Intensity, but it does provide information and guidance to assist with service planning.

Because it truly is a community effort to raise healthy children, the ECSII focuses on ways in which community supports can be mobilized to help stabilize families and collaborate with them in building on child and family strengths. The American Academy of Child and Adolescent Psychiatry (AACAP) Work Group on Community-Based Systems of Care identified “Best Principles for Early Childhood Systems of Care” that guided development of this tool:

- The system of care prioritizes the biological, cognitive, and socio-emotional development of the young child.
- The system of care strives to strengthen and preserve the young child’s primary attachment and family relationships.
- The system of care emphasizes prevention and early intervention through timely delivery of services, to maximize the young child’s opportunities for normative development.
- The system of care supports the stability of the young child’s family, whether biological, adoptive, or foster.
- The system of care empowers families by making them full partners in the planning and delivery of services.
- The system of care provides culturally competent services that respect the family’s unique social and cultural values and beliefs.
- The system of care provides individualized service plans based on comprehensive bio-psycho-social assessment.
The system of care provides individualized services that are of appropriate intensity, flexibility, and comprehensiveness to meet the child and family’s needs. These services are integrated and coordinated between different child-serving agencies.

The system of care strives to have an ethical balance between protecting the rights of children and supporting the rights of parents.

OVERVIEW OF THE ECSII

To assess the child’s Service Intensity need, The ECSII rates the following major Domains of child and family functioning:

1) Degree of safety
2) Child-Caregiver Relationships
3) Caregiving Environment (separate subscales for Strengths and Stressors)
4) Functional/Developmental Status
5) Impact of the Child’s Medical, Developmental, or Emotional/Behavioral Problems

For each Domain, the child is rated at one of five levels of functioning or impairment, generally characterized as: Optimal, Adequate, Mild, Moderate, and Severe. Ratings presume that all young children require certain conditions for optimal development and functioning. These include emotional engagement from caregivers, support of their daily functions, supervision, safety and stimulation in their environment, and provision of material needs such as food, housing, clothing, and medical care. Children’s caregivers also need support from other adults and other community supports to comprise an adequate caregiving system.

An innovative aspect of the ECSII is the sixth Domain—the Services Profile. This Domain provides information as to whether current services match up to the child and family needs, and helps identify strategies for reshaping services to improve outcomes. The Services Profile includes three subscales: A) Involvement in Services (rated for Caregiver(s) and the Child); B) Services Fit; and C) Services Effectiveness. The Services Profile Domain is rated if the child and family are presently receiving or have in the past received services beyond basic health care; this includes evaluations. The Services Profile provides information that can inform service planning. For example, if there is a poor service fit or low involvement in services, the solution may be a different service array or approach rather than a higher intensity of services.

The ECSII yields a single level of Service Intensity (SI) score from Level 0 (basic health care) to Level V (full support). In the field testing trials, the ECSII has been shown to have very strong psychometric properties, with excellent inter-rater reliability and validity.

For further information, please contact AACAP’s Clinical Practice Department at clinical@aacap.org.