



## **Division of Early Learning**

# **Strong Start DC Early Intervention Program**

## **Service Coordination Manual**

Effective 1/1/2019

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## **I. OVERVIEW OF STRONG START DC EARLY INTERVENTION PROGRAM**

### ***A. Welcome to Early Intervention***

Welcome to Strong Start, the early intervention (EI) program in DC that is administered through the Office of the State Superintendent of Education (OSSE), Division of Early Learning. You have been chosen to be part of a team that provides service coordination to Part C eligible infants/toddlers and their families in the District of Columbia.

As part of the Strong Start team you are expected to adhere to a high set of standards, OSSE's core values, and to provide services in accordance with the Natural Learning Environment Practices. Under Part C of the Individuals with Disabilities Education Act (IDEA), a child and their family has the right to a Service Coordinator, who will assist the parent/guardian in understanding the procedural safeguards and who will guide the parent/guardian through the EI process.

This manual has been developed to assist Service Coordinators in the Strong Start DC Early Intervention Program (DCEIP) with the procedural operations in the performance of daily duties and activities. The procedures outlined in this document are based on agency, District of Columbia and federal regulations. Service Coordinators are required to comply with these procedures and all pertinent law, regulations and policies.

### ***B. Strong Start mission***

To identify and serve infants and toddlers, birth through three (3) years, with developmental delays and disabilities and their families. We strive to coordinate services in a caring and compassionate manner that supports the culture and meet the needs of the families in the District of Columbia.

The purpose of Strong Start DCEIP is:

- To enable young children to be active and successful participants during the early childhood years and in the future in a variety of settings – in their homes with their families; in child care, preschool, secondary school programs; and in the community.
- To enable families to provide care for their child and have the resources they need to participate in their own desired family and community activities.

### ***C. Background***

OSSE is the designated state agency for Strong Start, the District of Columbia’s Early Intervention Program for infants and toddlers with developmental delays and/or disabilities, funded under the federal IDEA, Part C, P.L. 101-110, more commonly known as Part C system, as amended. The program is responsible for the development and implementation of a District-wide coordinated, comprehensive service delivery system for eligible infants and toddlers and their families.

DCEIP is responsible for ensuring that identification, evaluation and service delivery occur within federally mandated time lines. In addition, the program is responsible for the following activities: collection of demographic data; comprehensive assessment of services and available resources; coordination of service programs within the public and private sectors; promotion of public awareness regarding the program; development of state-level policies and procedures designed to enhance the capacity of families to meet their infants and toddlers developmental needs; funding direct services for eligible Part C children and their families; responding to federal reporting requirements, such as preparation of the Annual State Application, the Annual Performance Report, the State Systemic Improvement Plan and other federally mandated data collection reports.

Part C requires states to provide services in the child and family’s natural environments. Under Section 303.18 of Part C, natural environments are defined as “settings that are natural or normal for the child’s same age peers who have no disabilities”. This means that children and families participating in Part C services receive these supports and services at home, in childcare programs, and/or where the child and family are during the day. Services are determined based upon functional outcomes that focus on child development, family needs and supports, that address the child’s developmental needs rather than medical needs.

### ***D. Principles of early intervention***

All plans for service delivery are based upon the unique needs of each child/family and focus on the coordination of developmental activities to ensure that all members of the team are involved in a child’s intervention, including the family and/or caregiver, are working together.

The Key Principles for Providing Early Intervention Services in Natural Environments <sup>1</sup> are:

1. Infants and toddlers learn best through every day experiences and interactions with familiar people in familiar contexts.
2. All families, with necessary supports and resources, can enhance their children’s learning and development.
3. The primary role of the service provider in EI is to work with and support the family members and caregivers in a child’s life.
4. The EI process, from initial contacts through transition, must be dynamic and individualized to reflect the child and family members’ preferences, learning styles, and cultural beliefs.
5. IFSP outcomes must be functional and based on children’s and families’ needs and priorities.
6. The parent/guardian’s priorities, needs, and interests are addressed most appropriately by a primary provider who represents and receives team and community support.

7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research, and relevant laws and regulations.

<sup>1</sup> *Workgroup on Principles and Practices in Natural Environments, OSEP TA Community of Practice: Part C Settings. (2008, March). Agreed upon mission and key principles for providing early intervention services in natural environments. Retrieved from [http://ectacenter.org/~pdfs/topics/families/Finalmissionandprinciples3\\_11\\_08.pdf](http://ectacenter.org/~pdfs/topics/families/Finalmissionandprinciples3_11_08.pdf)*

Within the Strong Start DCEIP Program:

- The parent/guardian is viewed as the primary interventionist in a child's life and the expert in relation to the needs of the child and family.
- The parent/guardian and the early interventionists involved in a child's intervention establish a working partnership based on an open exchange of information and expertise.
- The parent/guardian who is supported to be an active partner is able to facilitate their child's continued development and advocate for their family's needs.
- Activities are incorporated into a child's everyday life to naturally emphasize Developmental the acquisition of functional skills.
- The early intervention process is dynamic and individualized to reflect the parent/guardian's preferences, learning styles and cultural beliefs.

#### ***E. Early intervention services available under Part C***

Strong Start DC EIP offers a variety of services designed to meet the unique needs of each child in the following domains:

- Adaptive - self-help, i.e., eating, dressing
- Cognitive - i.e., thinking, learning, problem-solving
- Communication - i.e., talking, listening, understanding
- Physical - i.e., reaching, rolling, crawling, walking
- Social Emotional - i.e., relationship-building, playing, feeling secure and happy

Depending on the child's developmental and family needs, services available may include:

- Assistive Technology
- Audiology - Aural Rehabilitation
- Developmental Therapy
- Family Training and Support - includes Interpretation and Translation
- Health Consultation
- Medical Services (for diagnostic or evaluation purposes, only)
- Nursing
- Nutrition
- Occupational Therapy
- Physical Therapy
- Psychological/Counseling Services
- Service Coordination
- Social Work



- Speech Language Pathology
- Transportation
- Vision

#### ***F. Procedural Safeguards***

The early intervention system is designed with the intent of maximizing the family's involvement and ensuring parental consent in each step of the process, beginning with the determination of eligibility and continuing through service delivery and transition. Parents must be informed of the rights and safeguards so that they can have a leadership role in the services provided to their family. "Families Have Rights" is an official notice of the rights and safeguards of children and families as defined under federal Part C regulations.

It is the responsibility of the service coordinator to:

- Inform the parent/guardian of their rights and ensure that parents/guardians receive a written copy of the Families Have Rights document during their initial meeting with the Service Coordinator.
- To verbally explain the rights to parents/guardians.
- Offer a parent/guardian a copy of their family rights every time a Prior Written Notice document is sent. This includes, but it not limited to, when there is an IFSP modification, eligibility meetings, assessment for service planning, transition plan and conference, and discharge from services.
- If the parent/guardian has already received a copy of their rights another copy must be offered. If the parent/guardian has previously received a copy of their rights and informs the Service Coordinator that they do not want another copy, it is not necessary to leave another copy. In instances where a parent/guardian has declined an additional copy of their rights, a correspondence note must be written in the Strong Start Child and Family Data System (SSCFDS) to document that a copy of the Families Have Rights document was offered but the parent/guardian declined.

Below is a summary of the general family rights which are mandatory for the Part C process in the District of Columbia and which service coordinators must communicate to all parents/guardians as they move through the process to receive EI supports and services. Parent/guardians/legal guardians must be informed of:

- Families have the right to an evaluation;
- Eligible families have the right to a coordinated plan (IFSP);
- Eligible families have the right to a Service Coordinator;
- Families have the right to privacy;
- Families have the right to consent;
- Families have the right to review their records;
- Families have the right to amend records concerning their child and family;
- Families have the right to written prior notice;
- Families have the right to be provided information that is understandable; and
- Families have the right to disagree.

Please refer to the Strong Start DC EIP document "Families Have Rights" online <https://osse.dc.gov/publication/families-have-rights-idea-part-c-procedural-safeguards>

## **G. Service Coordination**

Service coordination and the provision of all EI services to children and their families is coordinated and monitored by an assigned Service Coordinator. The service coordinator's role is to assist an eligible child along with his or her parent/guardian to receive the rights, procedural safeguards, and authorized services to be provided through the EI program. Service coordinators are the primary point of contact for families and providers and are essential to effective communication and case management throughout the EI process.

The responsibilities of the service coordinator include, but are not limited to:

1. Meeting with the family to share information about the Strong Start Program
2. Informing the family that that any and all information shared about their child and family is keep confidential.
3. Scheduling with the Family to complete the initial Routines Based Interview (RBI) and update the information every six months.
4. Communicating with the evaluation teams and service delivery agencies to coordinate eligibility and on-going service delivery.
5. Obtaining parental signature and consent when necessary.
6. Mandatory contact (by phone, mail or in person) with the enrolled child/family at least one time per month;
7. Coordinating the implementation of the Individualized Service Plan (IFSP);
8. Coordinating the completion of initial, six month and annual evaluations/assessments;
9. Facilitating and participating in the development, review and evaluation of the IFSP. This includes IFSP updates, six (6) month reviews and the annual evaluations of the IFSP;
10. Mandatory distribution of the initial and annual IFSPs, including evaluations/assessments, to all ongoing providers prior to the initiation of authorized services;
11. Identifying available service providers to staff the cases;
12. Coordinating and monitoring (through the mandatory monthly contacts) the delivery of services identified in the child's current IFSP (minimum of two face to face visits per year);
13. Resolving any conflicts or difficulties that may arise in the child/family's receipt of services;
14. Informing families of their rights and the availability of advocacy services on an ongoing basis;
15. Helping families to be aware of and access other needed support services such as WIC, housing, etc;
16. Coordinating with medical and health providers, including requests for relevant medical records and other pertinent medical documentation from physicians, hospitals, nurses, clinics, home health agencies, to aid in the establishment and provision of eligible etc.;
17. Coordinating with child development centers staff on the delivery of services identified in the child's current IFSP;
18. Facilitating the development and implementation of a transition plan to preschool or other services, if appropriate; and
19. Active maintenance of the child's comprehensive electronic permanent record in the Strong Start Child and Family Data System (SSCFDS). Maintenance requirements include:
  - The accuracy and completeness of all child/family data entered in SSCFDS;
  - Proper utilization and updating of SSCFDS;
  - Evaluations/Assessments, IFSPs, and Six-Month Report from all providers who are members of the child's service team;

- Notes on the progress of the child’s transition plan implementation - it begins at age two (2) years, seven (7) months;
- Develop and execution of the child’s transition plan;
- All IFSP updates; and
- Any and all other supporting documentation required for completion of the child’s permanent record.

Service coordinators provide family assessments using the Routines Base Interview methodology during the intake process but they do not provide evaluation/assessment services to determine a child’s eligibility for services. Designated EI providers will conduct all of the required evaluation, assessment, and reassessments of the child’s developmental status as needed throughout the EI program.

Service coordinators are required to actively participate and assist the providers and families in the development of IFSP goals. Service coordinators are also required to actively participate in all defined mandatory meetings with families and providers throughout the EI process. Service coordinators are the primary point of contact for families and providers and are essential to effective communication and case management throughout the EI process. Service coordinators have primary responsibility for creating and disseminating all written letters, memos which aid in documenting all steps of the early intervention process. These documents must be distributed to families in a timely manner and documented in the child’s electronic record.

#### ***H. Strong Start DC EIP Eligibility Criteria***

Eligibility is determined based on Strong Start Criteria of 25% delay in at least one area of development, Informed Clinical Opinion, or Auto-Qualifying Diagnosis resulting in the child having a high probability of developmental delay.

##### **i. Eligibility Criteria (25% delay)**

Children may be found eligible for Strong Start services with a 25% delay in one or more areas of development based on age equivalency. Those areas include: Cognitive, Adaptive, Motor (Fine and Gross), Communication and Socio-Emotional development.

##### **ii. Eligibility by Auto qualifying Condition**

A diagnosed physical or mental condition that has a *high probability of resulting in a developmental delay or disability*.

The District of Columbia has adopted the following categories of conditions to meet the definition of “diagnosed physical or mental condition that has a high probability of resulting in a developmental delay”.

1. Genetic Disorders: disorders that are caused by one or more problems or abnormalities of the genome system. Genetic disorders may result in birth defects. Examples of genetic disorders commonly seen in young children include Turner Syndrome, Down syndrome, Sickle Cell, Cystic Fibrosis, and CHARGE syndrome.

2. **Sensory Impairments:** impairments that impact sight, hearing, smell, touch, taste, proprioception/spatial awareness. Examples of sensory impairments include but are not limited to vision impairments such as cortical and neurological vision impairment and low vision, and hearing impairments such as conductive or neural hearing loss.
3. **Motor Impairments:** impairments that result in the partial or total loss of function of a body part or limbs. Examples of common motor impairments in children under the age of 3 are hypotonia, hypertonia, muscular dystrophies, torticollis, and brachial plexus injury.
4. **Neurologic Disorders:** disorders that result from abnormalities in the brain, spinal cord and the nervous system. Examples of common neurological disorders found in the birth to three population include but are not limited to: cerebral palsy, intraventricular hemorrhage (brain bleed), epilepsy (uncontrolled), encephalitis (inflammation), brain malformation, hypoxia (loss of oxygen) and hydrocephalus.
5. **Socio-communicative (emotional) Disorders:** disorders that impact how a child is able to establish relationships socially and through communication. Examples of conditions that would be considered socio-communicative include Autism, childhood depression, Rett Syndrome, and Reactive Attachment Disorder
6. **Medically Related Disorders:** disorders that are related to medical conditions that result in delayed or disordered development.
  - i. pre-natal exposures: pediatric HIV, TORCH, Fetal Alcohol Syndrome, pre-natal drug exposure
  - ii. metabolic disorders: inborn errors of metabolism, Tay-Sachs disease, cerebral lipidosis.
  - iii. prematurity of birth: very low birth weight (<1000 grams at birth, up to 6 months corrected age only); gestation of 28 weeks or less up to 6 months corrected age only
  - iv: other medical conditions
7. **Acquired Trauma Related Disorders:** disorders such as that are the result of a traumatic event such that can be both physical and psychological in their presentation such as Traumatic Brain Injury (TBI) , “Shaken Baby” syndrome, Post-traumatic stress and Acute stress disorders.

### **iii. Eligibility by Informed Clinical Opinion**

Children may qualify for early intervention services through Strong Start based on Informed Clinical Opinion, which will state that although the child may not present with delays on the eligibility tool that qualify them for services, they present with an atypical pattern of development that is agreed upon by two qualifying evaluators. Children who are found eligible through Informed Clinical Opinion are eligible for Strong Start services for six months before they must be re-assessed.

Children with a diagnosed physical or mental condition are designated as automatically eligible and do not require assessment for eligibility but will receive an assessment for service planning using the Assessment, Evaluation and Programming System for Infants and Children (AEPSi). Please refer to the “Policies for Implementing Part C of the Individuals with Disabilities Education Act” document at <https://osse.dc.gov/publication/strong-start-dc-eip-policies> for a list of established conditions.

## ***I. System of Payment for Services***

DCEIP pays for services for Part C eligible clients with private insurance, fee for services Medicaid, Katie Beckett waiver and no insurance. Services for Part C eligible clients who are enrolled in a Medicaid Managed Care Organization (MCO), such as AmeriHealth, Trusted, Amerigroup or HSCSN, are paid for by the child's MCO. Service Coordinators should explain the system of payment for services to program participants. Service Coordinators are responsible for verifying online at <https://www.dc-medicaid.com/dcwebportal/home> if a child is enrolled with Medicaid or an MCO so funding from the appropriate source is secured at the time of eligibility determination and if eligible for service delivery. DCEIP is the payer of last resort.

## ***J. PART C – State Performance Plan indicators***

The following are mandatory federal compliance requirements and are monitored on an annual basis. The State Performance Plan (SPP) monitoring priorities and indicators include comprehensive, ambitious, achievable, multi-year benchmarks for annual monitoring and improvement of results for infants and toddlers with disabilities and their families, with stakeholder engagement in all facets of the process. It is the responsibility of the Service Coordinator that all of the following indicators are tracked, supported and achieved across their assigned caseload as applicable.

- Timely service delivery - % of infants/toddlers with IFSPs receiving on their IFSPs in a timely manner.
- Settings - % of infants/toddlers with IFSPs primarily receiving EI services in the home or community based setting.
- Child Outcomes - % of infants/toddlers with IFSPs demonstrating improved (A) positive social-emotional skills, (B) Acquisition and use of knowledge and skills; (C) use of appropriate behavior to meet their needs.
- Family Outcomes - % of families reporting that EI services helped their families (A) Know their Rights, (B) Effectively communicate child's needs, (C) Help their children develop and learn.
- Timeline of IFSP - % of eligible infant/toddlers with IFSPS with evaluation, assessment, and initial IFSP meeting, within the 45-day timeline.
- Early Childhood Transition - % of infants/toddlers with IFSPs exiting Part C with timely transition planning for whom, LEA was notified, within the required timeline, (A) developed IFSP with transition steps, (B) Notified SEA and LEA of toddler's potential eligibility, (C) conducted transition conference.

## **II. REFERRAL PROCESS AND INITIAL HOME VISIT**

### ***A. Referral***

The Child Find/Intake department (CF/I) receives referral information, collects initial family information including the reason for the referral and the results from screening and/or assessment from outside sources. Once the referral is entered and uploaded in the SSCFDS the case is transferred to the SC Supervisor of the region where the child resides who then assigns it to a Service Coordinator in their region. **The service coordinator is expected to manage the child through the entire early intervention process from eligibility determination through transition.**

### ***B. Notification of New Referral***

Service Coordinators are notified via an email generated by the SSCFDS. Service Coordinators are also expected to check the SSCFDS daily for new case assignments.

### ***C. The 45-Day Timeline***

The 45 day timeline begins with the referral and ends with the eligibility meeting or the initial IFSP meeting. The 45 day timeline applies to all new referrals and begins on the date of entry (date referral received). The date of entry is day 1 and a service coordinator must be appointed within one business day of the referral. The table below gives an overview of the 45 day timeline.

<b>Event</b>	<b>Time frame</b>
Date of entry	Day 1
SC assignment	Day 1-2
Initial family contact target	3 business day from date of entry
Initial home visit target	10 calendar days after date of entry. If it falls on a weekend or holiday then the business day before.
Evaluation referral made to agency doing the assessments target	10 calendar days after the date of entry and after the RBI is completed. This should be completed by day 13
Evaluation target	25 calendar days after date of entry. If it falls on a weekend or holiday then the business day before
Eligibility meeting or initial IFSP meeting target	40 calendar days after date of entry. If it falls on a weekend or holiday then the business day before. Cannot be later than 45 calendar days after date of entry

### ***D. Initial Family Contact***

The initial contact with a parent/guardian is a critical step in the process. The Service Coordinator must be prepared prior to ensure that all of the required information is assembled and they are ready to respond to any initial questions the parent/guardian may have. This includes ensuring that SSCFDS has current, complete

information uploaded for the parent/guardian. The Service Coordinator should also acquaint themselves with all mandatory DC EIP approved letters and memoranda for use for written communication with the parent/guardian throughout the eligibility process.

### ***E. Preparing for the initial call***

- Check the SSCFDS to determine if the child has been referred to the program prior to the current referral. If the child has been referred to the program prior to the current referral, review any notes and documents from previous referrals.
- Review the referral information and any supporting documentation available on the current referral.
- Verify insurance information (see appendix for Insurance Verification phone number and prompts)
- Contact the referral source (if the page 2 of the referral is signed) and ask any clarifying questions as needed
- If the child is automatically eligible based on a medical diagnosis, review supporting document for proof of medical condition. If not, request the parent/guardian to provide copies of diagnosis documents at the Initial Home Visit

### ***F. Interpretation for phone calls and meetings with families***

The Government of the District of Columbia provides interpretation for customers who speak a language other than English. The Strong Start DCEIP Procedural Safeguards require that parents/guardians be spoken to and receive documentation in the language most comfortable for them.

- If assigned a parent/guardian for whom English is not the primary language, use the language line when contacting the Parent/guardian for the first time. (See appendix for District of Columbia Government Language Line phone number and prompts)
- If during the initial call the parent/guardian requests an interpreter **be present**, request an interpreter through SSCFDS. In person interpretation is facilitated through the SSCFDS and is separate from the District of Columbia Government Language Line.

Families have the right to receive early intervention information and documentation in their native language. Meeting notices and program public awareness must be written in a way that is understandable to the general public.

#### **i. Translation of Documents**

The Service Coordinator/Evaluator/Therapist makes request through SSCFDS

- If child has MCO Medicaid, the requestor is expected to make the request directly to the MCO by selecting the MCO in the Provider drop down
- For all other children the requestor is expected to make the request through SSCFDS directly to DCEIP vendors (Transperfect or ACSI) by selecting the company in the Provider drop down

- Make sure to add the template and add the number of pages that need to be translate
- Please note that the vendor has 5 days to return the final document to the requestor
- A family must have the final translated document five days prior to any meeting
- The Evaluation team is expected to mail the original and translated copy to the family
- Cancellations of documents should be made immediately to avoid charges
- Urgent request must be reviewed and approved by Supervisor and Program Manager
- Strong Start is the primary payer for the IFSP document

## ii. Interpretation (Voice Talent) Services

If the family requests interpretation the requestor is responsible for ensure the correct dialect for the native language is requested.

- If child has MCO Medicaid, the requestor is expected to make the request directly to the MCO by selecting the MCO in the Provider drop down
- For all other children the requestor is expected to make the request through SSCFDS directly to DCEIP vendors (Transperfect or ACSI) by selecting the company in the Provider drop down
- Make sure that the location, time and reason for the meeting is documented in the request. Any special instructions such as parking and a contact person that will be onsite at the appointment.
- MCO Medicaid rep are asked to add the interpreter contact information in the same area of the request.
- Please note that there is an additional fee for request made less than 72 hours for staffing an interpreter. (See appendix Translation and interpretation services)

## G. Making the initial call

The purpose of this call is for the parent/guardian to become acquainted with the Strong Start DC EIP and their Service Coordinator. The Service Coordinator is responsible for initiating this call no later than 3 business days from the date of entry.

- Make initial introductions to the parent/guardian sharing the reason for the call and the referral source
- Briefly discuss the Strong Start DCEIP program and eligibility process
- Ask the parent/guardian to share their concerns about their child's development (see appendix for instructions on how to supporting parents/guardians who report having no concerns.)
- Discuss parent/guardian's concerns about their child's development and areas of developmental delay
- Review and update any information missing information from the referral and ask the parent/guardian for updated information.
- Request copies of medical diagnosis documentation for children that are automatically eligible
- Request parent/guardian's consent to submit a referral for evaluation. If the parent/guardian agrees for their child to be referred for evaluation, share with them that an evaluation team consisting of two early intervention providers will contact them to schedule an evaluation to determine eligibility.
- If verbal consent is provided, refer the child for an evaluation through the SSCFDS



- Inform the parent/guardian of the purpose of the initial home visit and schedule the visit with the family
- Clarify that the initial home visit is a separate appointment from the eligibility evaluation and that it must take place before the eligibility evaluation
- Update the SSCFDS Family Interview Table & Correspondence notes to reflect this contact with the parent/guardian and the date/time of the scheduled initial home visit.
- If verbal consent is not provided, notify the parent/guardian that the referral will be sent with their permission after the initial home visit.

## ***H. Initial Home Visit***

It is the responsibility of the Service Coordinator to gather as much information as possible about the child and the parent/guardian to assist the evaluation/assessment team and the IFSP team in overall decision making. This includes gathering information about the child's medical history, family's routines and daily activities, family and child's natural environment, and the parent/guardian's priorities, resources, and concerns.

### **i. During the Initial home visit, the Service Coordinator will:**

- Review the purpose of the meeting
- Overview of the Strong Start, to include an explanation of:
  - Strong Start Roadmap (caterpillar)
  - Natural Learning Environment Practices (NLEP) including the use of a coaching interaction style
  - Eligibility criteria, including non-eligibility options
  - Inform the parent/guardian that if the Strong Start program determines that the child is ineligible for services, they have the right to meet with the evaluation team to discuss the results and discuss all possible options regarding developmental concerns for their child. If a delay is identified, provide resources and options for securing available therapeutic services outside of Strong Start.
  - Evaluation process and the assessment for service planning
  - Face to face eligibility meeting
  - Discuss and define the Individualized Family Service Plan (IFSP) with the parent/guardian, describing how it will be developed and utilized throughout the program for children that are eligible.
- If the Parent/guardian is interested in moving forward with the eligibility process, share and review the following forms:
  - The Strong Start DC EIP Procedural Safeguards document, Families Have Rights
  - Prior Written Notice and Consent for Initial Evaluation/Assessment Form (PWN/Initial Consent)

- If page 2 of the referral was not signed when initially submitted, review and complete to include initial, signature, and date
- ❑ Review the child's insurance status
  - Verify insurance information with parent. If necessary, update SSCFDS with the insurance information.
  - If the parent/guardian is Medicaid eligible, discuss EPSDT
  - If the child is not covered under a health insurance provider, ensure that the parent/guardian is connected to Economic Security Administration (ESA) and applies for Medicaid; however this should not inhibit moving forward with the eligibility process
- ❑ Conduct the family interview using the "Family Interview Template" as a guide through a discussion of the family's concerns, routines, medical history, and other key information that will inform the evaluation and their potential participation in the program. **Family interviews are completed annually with eligibility determination and can be updated at any time.**
- ❑ If the parent/guardian has additional supporting documents (physician notes, discharge summaries, prior developmental evaluation reports, screening results, etc.) which were not provided at the time of referral, ensure these documents are collected / shared at the home visit and uploaded into SSCFDS
- ❑ The parent/guardian must be made aware that if they have questions/concerns at any point during the evaluation process, the Service Coordinator is their primary point of contact, and is available to them (by email/cell phone/child find hotline or in person at the office visit).
- ❑ If the parent/guardian is not interested in moving forward with the eligibility process at any point during the family interview:
  - Review both the Families Have Rights and the Parent/guardian Withdrawal Form
  - Provide the Parent/guardian with the Strong Start Roadmap and point out the Child Find Hotline Number for returning to Strong Start DCEIP
  - Indicate to the family that the case will be closed
- ❑ After the family interview complete the Family interview/Evaluation Report document and upload in the SSCFDS

### **III. EVALUATION AND ASSESSMENT FOR SERVICE PLANNING**

#### ***A. Referring for Evaluation and Assessment for Service Planning***

This section applies to Initial, Annual and Transition multidisciplinary evaluations (MDE), assessments for service planning, and all other assessments and/or observations. The service coordinator should make the referral within XX days of the date of entry to an evaluation provider who will then contact the parent and schedule an eligibility evaluation and/or an AEPS. Once eligibility is determined the service coordinator will convene an eligibility meeting and the initial IFSP meeting for eligible children.

**Note:** Children who have automatically eligible conditions do not require a multidisciplinary evaluation (MDE). They should be referred for an AEPSi only for the initial and all subsequent eligibility periods. They remain automatically eligible for the duration of their time in the program.

The exception to this is micro-preemie's and children with extremely low birth weight.

- If the child is referred **before** 6 months of age **and** was born before 28 weeks gestation or with a birth weight under 1000 grams, that child is auto-eligibility and should receive an AEPSi assessment for service planning. An MDE should be used to determine eligibility in the next eligibility period (annual IFSP.)

- If the child is referred after 6 months of age, even with micro-preemie or low birth weight history, they are not auto-eligible and should and eligibility should be determined via MDE.

The following steps should be taken when referring children for evaluation for eligibility and/or assessment for service planning.

#### **i. If the child is a Managed Care Organization (MCO) Enrollee**

- Refer the child for evaluation using the SSCFDS
- Confirm that the MCO has access to the child in the SSCFDS
  - If no authorization has been uploaded within 3 business days, email the MCO care manager or specified contact and copy the Strong Start Medicaid Liaison to inquire about the status of the authorization.
  - If no authorization has been uploaded after 7 calendar days, change the referral payer to DCEIP in the SSCDS and notify the Strong Start Medicaid Liaison. Continue with step 2 of the next section.

#### **ii. If the child is a fee for service Medicaid enrollee or is enrolled with a commercial insurer**

- Request the child to be evaluated evaluation using the SSCFDS
  - Children that are automatically eligible are assessed using the AEPSi only
  - Children for whom eligibility must be determined are evaluated using the normative assessment tool Battelle Developmental Inventory 2nd Edition (BDI-2) and if eligible, are assessed using the AEPSi

- Add the child to the Strong Start evaluation referral spreadsheet
- Email the spreadsheet to the Strong Start Child Find Specialist by 2 p.m. daily
- The assigned Strong Start DCEIP Child Find Specialist will email the Service Coordinator back with an evaluation provider identified by 11 a.m. the following day
- Once the evaluation provider has been identified, upload the RBI, PWN/Consent, the referral and updates to the SSCFDS to reflect the identified provider and payer.

If requesting an evaluation for Annual eligibility determination, request the multi-disciplinary evaluation 4-6 weeks before the IFSP expires to allow time for scheduling and completion of the report.

### ***B. Coordinating Initial and Annual Eligibility Evaluation and Assessment for Service Planning***

Assisting in the coordination of the evaluation and assessment process for families is a key responsibility of the Service Coordinator. The Service Coordinator will assist in coordinating with the following individuals:

- Parent/guardian
- Medicaid MCO Case Managers (if applicable)
- Assigned Strong Start Evaluation/Assessment Team
- CFSA Social Worker or other case manager or family support worker, as applicable

Children identified as automatically eligible based on a medical diagnosis are referred for a curriculum-based assessment using the AEPSi. Children not identified as automatically eligible are referred for a multidisciplinary evaluation and if eligible, an AEPSi for services planning.

#### **i. The Service Coordinator is responsible for the following:**

- Keeping the lines of communication open with the providers, case managers, family, and other involved parties to ensure a smooth and coordinated process.
- Uploading the DCEIP Prior Written Notice & Consent for Initial Evaluation/Assessment within 48 hours of the family interview
- Assisting the evaluation team and case managers as needed when there are scheduling concerns, missing or inaccurate family information (ex: wrong contact information, discontinued numbers/phone services, no shows, etc.)
- Ensuring that SSCFDS has been updated by both the assigned evaluation team and the case managers
- Monitoring the evaluation process
- Documenting the correspondence notes in the SSCFDS within 72 hours of occurrence with all communication with the parents, MCOs, evaluation team and any other parties. Any delays should be properly documented.

#### **ii. The Strong Start DCEIP Evaluation Provider is responsible for the following:**

- Contacting the parent/guardian to schedule the initial evaluation

- Notify the Service Coordinator of the scheduled initial evaluation date within 2 business days through the SSCFDS
- Upload the DC EIP Evaluation/Assessment Prior Written Notice form within 48 hours of scheduling the initial evaluation
  - If the Provider Agency has difficulty making direct contact with the Parent/guardian, after two attempts, it should immediately notify the Service Coordinator for assistance. Any and all communications with Parents/guardians by the Provider Agency must be entered into the SSCFD Correspondence Notes.
- The evaluation team must provide feedback to the service coordinator on the eligibility recommendation within 48 hours of completing the evaluation
- Complete the developmental evaluation and eligibility determination within the 45-day timeline

**iii. Once eligibility is determined:**

- The evaluation company must mail a hard copy or email a password protected copy of the evaluation report to the parent/guardian. The parent/guardian must receive the evaluation report no later than 5 days before the eligibility meeting and if eligible, the IFSP meeting.
- The evaluation team must upload the following documents for an evaluation to be determined complete:
  - Prior Written Notice (PWN) for Evaluation
  - Consent to Evaluate
  - Multidisciplinary evaluation and AEPS report must be uploaded within 5 business days of the evaluation or 5 days prior to eligibility / IFSP meeting, whichever is sooner
  - Child Observation Data Recording Form (CODRF) summary in AEPSi

**C. Monitoring the Initial and Annual Evaluation Process**

Once a provider has been identified, (an authorization uploaded, if required) follow the steps below to monitor progress:

- Review the evaluation section of SSCFDS 2 business days after the evaluation provider has been chosen to verify that an evaluation team has been added and evaluation date scheduled. If no team has been added after 3 business days and no correspondence notes have been entered by the evaluation company to indicate they have had difficulty reaching the parent/guardian, email the evaluation company and copy the SC supervisor requesting an update on the assignment of an evaluation team
  - If the evaluation company does not respond after 2 business days or indicates that they cannot staff the referral, notify the MCO if the child is an MCO enrollee
  - If the child is enrolled in Fee for Service Medicaid or a commercial insurer, add the child to back to the evaluation referral spreadsheet and follow the steps mentioned in the Referring for Evaluation and Assessment for Service Planning

## **IV. IFSP DEVELOPMENT**

The Individualized Family Service Plan (IFSP) is developed through a family-centered team planning process in which the family is supported to participate as an equal team member. The child's family helps the IFSP team and service providers understand the child and family's daily routines and activities. The providers then assist the family in recognizing and utilizing existing learning opportunities and creating new ones that will help the child reach the desired IFSP outcomes. The resulting IFSP reflects the family's priorities, resources, and concerns; the child's functional strengths and needs; the IFSP outcomes the family would like to see for their child and family; and the supports and services necessary to achieve those IFSP outcomes.

With the agreement of the family, an IFSP meeting must be held for each child who has been determined eligible for the District of Columbia Early Intervention Program (DCEIP). Federal regulations and DCEIP policies require that the IFSP meeting occur within 45 days of the child's referral to the early intervention system.

### ***A. Exceptions to the 45 day timeline***

An IFSP or eligibility meeting may be held beyond 45-day without the Strong Start program being out of compliance if the following criteria are met:

- The child or parent is unavailable to complete the initial evaluation, the initial assessments of the child and family, or the initial IFSP meeting due to exceptional family circumstances that are documented in the child's early intervention records; or
- The parent has not provided consent for the initial evaluation, or the initial assessment of the child, despite documented, repeated attempts by the lead agency or early intervention service provider to obtain parental consent.

The correspondence notes are entered by service coordinators and evaluators into the SSCFDS with any and all attempts to schedule and deliver services; all circumstances resulting in a delay in holding the first visit with the parent/guardian are specified.

Reason for delay	Definition
Child issues such as illness	The Child’s illness prevented scheduling to allow for the development of the IFSP.
Family or Parent Guardian issues such as illness, child care, convenience, family appointment conflicts, transportation, vacation, work, emergencies, etc.	The illness of a child’s family caused a delay in the development of an IFSP. The parent/guardian chose to postpone the evaluation or IFSP meeting to other issues. Parent/guardian does not show for scheduled evaluation and/or initial IFSP.
Unable to Contact	Unsuccessful attempts to schedule face to face evaluation/assessment and/or IFSP meetings (e.g. unreturned phone calls, disconnected phone, or unable to locate Parent/guardian).
Foster/Surrogate Parent/guardian related issues	Difficulty in determining/contacting the person who has the legal right to sign the IFSP.
Office Closure due to hurricane or other official state of emergency	This includes natural or man-made disasters and severe weather situations. Severe weather situations may include are not limited to the following: hurricanes, blizzards, severe ice storms, tornadoes, and flooding. Mark Disaster/Severe Weather as the reason for exceeding the 45-day timeline only if the weather prevented the provider’s ability to keep the appointment with this specific Parent/guardian at the specific time it was scheduled. (e.g., the snow was heavy enough that, although the main roads were clear, it was unsafe to travel to heavily snow-covered, hilly, tertiary road leading to Smith house for their 4p.m. IFSP meeting on Wednesday.)

**B. Coordinating the Initial and Annual Eligibility Meeting and IFSP Meeting**

**I. Scheduling the meeting**

- Once the evaluation is complete, the Service Coordinator is responsible for scheduling the eligibility meeting within the 45 calendar day timeline.
- The following are steps for how to schedule the IFSP and/or eligibility meetings:
  1. Evaluation agency schedules evaluation with the family. While scheduling the evaluation, the agency will also choose 2-3 possible dates with the family to hold the meeting.
  2. Evaluation agency contacts SC by phone or email with evaluation date and 2-3 possible dates for eligibility meeting agreed upon by the family.

3. SC contacts evaluation agency by phone or email with date they can attend eligibility meeting from dates chosen. If SC is not available on one of those dates, the SC will offer alternatives. Process continues until eligibility meeting date is chosen. If SC, family, and vendor agency cannot find a time that works for everyone, the guidelines in the Eligibility and IFSP attendance section below should be followed.
4. SC informs and confirms the meeting with the family.

### ***C. Receiving Eligibility Recommendation from the Evaluation Team***

When the assigned evaluation team has completed the evaluation and/or assessment, the team is responsible for ensuring that the Service Coordinator is made aware of their recommendations with regards to eligibility and the overall percentage of developmental delay. This recommendation may be provided via e-mail or phone. This eligibility determination is tentative as final evaluation report is required to make a final eligibility determination. Use the SSCFDS Correspondence Notes Log to document tentative eligibility.

The Service Coordinator must stay in communication with the evaluation team and when applicable, MCO case manager to ensure the evaluation report is provided in a timely manner and uploaded into the SSCFDS.

### ***D. Eligibility and IFSP Meeting Attendance***

Each Initial and subsequent Annual IFSP meeting must include the following participants:

- The guardian or parent/guardians of the child,
- Other family members, as requested by the Parent/guardian,
- An advocate or person outside of the family, as requested by the Parent/guardian
- A person or persons directly involved in conducting the evaluations and assessment
- As appropriate, persons who will be providing EI services under this part to the child or family.

A member of the evaluation team that participated in the evaluation is required to attend the eligibility meeting and/or Individualized Family Service Plan (IFSP) meeting.

If the case is at day 35 or later of the 45-day timeline and an evaluation team member is not available to attend the eligibility and/or IFSP meeting, the following steps should be followed as prioritized steps, not a list of options:

1. Another member from the evaluation team's company is present. This person must be an evaluator, but does not need to be a member of the team that evaluated the child.
2. A member of the evaluation team is present by phone.
3. Service coordinator contacts family and asks if they have questions about the evaluation report. If they do, a member of the evaluation team schedules a time to answer these questions via phone before the eligibility meeting is held. This phone call is not billable.
4. Service coordinator will attend eligibility meeting with family without another evaluation/clinical member present. The service coordinator will use the evaluation report as a representative of the evaluation team and will discuss with the evaluation team before the eligibility meeting.



### ***E. Preparation for the meetings***

The Service Coordinator is the facilitator and coordinator of the eligibility and IFSP meetings. The service coordinator should explain to the family that they are an equal member of the IFSP team and discuss how the family will participate in the IFSP meeting. All children evaluated by the Strong Start program must have an eligibility meeting to discuss the results of the evaluation with the parents. If a child is eligible, eligibility and IFSP meetings usually happened at the same time.

#### **i. Prior to the meetings the service coordinator should:**

- Contact the parent/guardian to confirm the date of the IFSP and/or eligibility meeting (see appendix for addressing changes in parent/guardian and/or provider availability for the IFSP)
- Complete the prior written notice and mail a hard copy or email a password protected copy to the parent/guardian or educational decision-maker at least 5 days prior to the meeting.
- Confirm that the parent/guardian has received a copy of the evaluation
- Review the evaluation report and supporting documents
- Review the SSCFDS for any missing information that need to be gathered during the IFSP meeting
- Review the family interview and medical history
- Complete the IFSP Add-on form pages:
  - IFSP Sign in Sheet
  - Authorization Page
  - Eligibility Form
  - Prior Written Notice must be received by family 5 days prior to the meeting
  - Transition Plan and/or Conference forms, if applicable
- Bring a draft copy of the IFSP document with all fields completed except the outcomes, service linkages, and payer pages

#### **ii. Preparation for children that are eligible:**

- Upload the prior written notice in SSCFDS **before** the meeting
- If the child is an MCO enrollee, confirm that the MCO Care Managers are linked to the case
- If the child is age 2 years 6 months or older and the Parent/guardian has given consent, confirm that the Early Stages Transition Liaisons and Transition Liaison Manager are added to the SSCFDS and invited to the meeting.

#### **iii. Preparation For children that are non-eligible:**

If the Parent/guardian confirms their participation in the eligibility meeting

- Upload the prior written notice to the SSCFDS Correspondence Notes Log
- If the child is an MCO enrollee, email the Prior Written Notice to the MCO Care Managers to invite them to the meeting

**iv. If the Parent/guardian declines to participate in the eligibility meeting**

- Send the *Refusal of Eligibility Meeting* letter
- Update the child's eligibility status in the SSCFDS
- Audit Case using audit checklist (see appendix for audit checklist)
- Close the case

**v. For Annual Non-Eligibility Meetings**

- Notify the provider(s) of the change in eligibility and the last date of service

**F. Initial and Annual Eligibility Meeting Agenda for Non-Eligible Children**

The purpose of the eligibility meeting is to discuss the child's eligibility status.

**i. Review the following during the eligibility meeting:**

- Procedural Safeguards/*Families Have Rights*
- Eligibility Status
- Parent/guardian response to eligibility status and evaluation report questions
- Strategies and recommendations
  - If the child is an MCO enrollee, the MCO Care Manager may present information and resources based on the benefits available to their members.
  - If the child is not eligible, confirm that the Parent/guardian understands that they may refer their child to the Strong Start DCEIP program again 6-months from the date of the evaluation. If at that time the child will be 2 years, 10 month, and 2 weeks or older, provide the Parent/guardian with the Early Stages referral or Early Stages referral website.
- For children who were receiving services
  - Hold the transition plan and transition conference sections of the IFSP even if the child is not transition age. Every child who exits the Strong start program must have a transition plan and conference.
  - Discuss the last day of services which should take place no more than 7 days after the annual non-eligibility meeting

**ii. After the Initial Eligibility Meeting, complete the following steps:**

- Upload required forms
  - IFSP PWN (in the correspondence notes only. Do not open an IFSP table)
  - Eligibility Form
  - Not eligible letter
- Complete the audit checklist

### iii. For Annual Eligibility only

The Annual Eligibility document for non-eligible children should include the following:

- Add/Change Page
- Outcomes
- Service Pages
- Transition Plan, Conference, and Transition sign in sheet

### iv. After the Annual eligibility meeting, complete the following steps:

- Upload required forms
- IFSP PWN (in the correspondence notes only. Do not open an IFSP table)
- Eligibility Form
- Not eligible letter
- Complete the audit checklist
- Hold the case open for 30 days to allow service providers to enter any notes or documents to be to the SSCFDS. Case status in the database should be changed to *Pending Closure* and the effective date should be listed as the last date of service.
- When closing the case, the effective date should be listed as the last date of service.

### G. Initial and Annual IFSP Meeting Agenda for Eligible Children

The purpose of the IFSP meeting is to develop outcomes that will increase the child's participation, communication, and independence in their daily routines based on the parents/guardians concerns and priorities.

#### i. During this meeting Service Coordinators must discuss the following:

- Explain the purpose of the meeting
- Introduce all parties in attendance and explain their role in the process
- Review the Procedural Safeguards/*Families Have Rights*
- Discuss the child's eligibility status
- Discussion of key principles of EI and NLEP
- Discuss the Parent/guardian's response to the child's eligibility status and answer any evaluation report questions
- Develop of IFSP Outcomes
- Discuss Recommendations and family's availability for EI services
  - If the any member of the IFSP Team has questions or concerns regarding the type or frequency of recommended services, particularly in the natural setting, parent/guardian ability to comply are in question, and the service coordinator must bring them to the attention of the Supervisor and/or the Clinical Manager to review prior to signing the IFSP.
- Discussion of the 30-day timeline and subsequent IFSP meetings, observations, and evaluations

- Ask the parent/guardian about any service linkages they may need
- Invite parent/guardian to sign required forms
- Conduct Transition Plan and/or Conference, if applicable (see Transition Section)

**ii. After the IFSP Meeting**

*Complete the following steps within 72 business hours of the IFSP meeting:*

- Upload the Initial/Annual IFSP
- Upload required forms
- Signed IFSP PWN
- Signed eligibility form
- Early Stages Notification Opt Out form (if applicable)
- Transition Consents to Release information (if applicable)
- Transition Plan and/or Conference (if applicable)
- Other forms required based on the status of the case
- Mail or email the Parent/guardian a password protected copy of the child's IFSP
- Complete the audit checklist

## **V. IFSP IMPLEMENTATION**

### ***A. 30-Day Timeline***

The supports and services listed on the IFSP must be implemented within 30 calendar days after the IFSP is signed by the parent/guardian (day 1 is the day that the IFSP is signed). The 30 day timeline applies to new services added to any IFSP whether it is an initial, a 6 month review or an annual. The 30 day timeline also applies to assessments that are needed after the initial assessment for service planning. Those assessments must be completed within 30 days of the referral to the evaluation site. Services may start after the 30 day timeline provided that the parent/guardian has been offered a service date within the 30 day timeline and declined it, or if the parent/guardian requests to start services after the 30 day timeline. The correspondence notes are entered by service providers into the SSCFDS with any and all attempts to schedule and deliver services; all circumstances resulting in a delay in holding the first visit with the child and family are specified and documented by the Service Coordinator.

### ***B. Implementing the IFSP: Referring for Direct Services***

To implement the IFSP, the Service Coordinator should follow the steps below for each service or additional assessment added to the IFSP:

- Refer for services using the SSCFDS and add the child's name and information to the service list housed on the Strong Start DCEIP shared drive by 10 a.m. the Friday immediately following the IFSP meeting
- The Service List will be distributed by the Service List Administrator (SLA) to all Strong Start DCEIP direct service providers via secure protocol
- Once Strong Start DCEIP direct service providers respond, the SSCFDS will be updated to reflect the selected provider
- For MCO enrollees, the MCO will begin looking for a Strong Start DCEIP direct service provider once the referral is uploaded. If the MCO finds a provider before the service list is distributed or before a provider responds to the service list, the MCO's choice of provider will be selected and authorized in the data system.
- If the SLA finds a direct service provider before the MCO has found one, the SLA will make the recommendation to the MCO. The MCO makes the final determination of which direct service provider will be assigned to the case. The MCO authorization is required before any services are delivered.
- Once assigned, the direct service provider will contact the parent/guardian to schedule the first session and notify the Service Coordinator by updating the SSCFDS correspondence notes and date of the first session no later than three business days after being assigned.
  - If the agency is unable to contact the parent/guardian, it should notify the Service Coordinator after two failed attempts. All communications (including attempted communications) must be entered as a correspondence note in the SSCFDS by the direct service provider.
  - If the parent/guardian does not accept the date offered, cancels or is a no-show for the scheduled session, the direct service provider will write an intervention log note indicating that the missed session is a cancellation or no-show, as applicable.

### **C. Monitoring the 30-day Timeline**

- Once the direct service provider has been identified and assigned to the case, the Service Coordinator is responsible for monitoring the service log in the SSCFDS to ensure that a therapist is added and the first session is document.
  - If no therapist has been added to the case after 2 business days, contact the direct service provider and request an update on the status of assignment
  - If the direct service provider does not respond, forward your email to the [directservice.dceip@dc.gov](mailto:directservice.dceip@dc.gov) email address for program follow up
- Once the therapist has been added, review the SSCFDS to confirm that all pertinent therapist and direct services provider information is up to date and correct
- The early interventionist is responsible for calling the parent/guardian to schedule the first visit and documenting all contact attempts and parent/guardian contact
- The early interventionist is responsible for entering intervention notes in the SSCFDS within 72 business hours of each session
- Once the first session has taken place, update the SSCFDS as required to stop the 30 day timeline.

### **D. Service Delivery**

Early interventionists are responsible for providing services according to the IFSP. They must see the child at the time agreed upon with the parent/guardian and notify the parent/guardian of any scheduling changes. If the therapist(s) schedule prevents from going to the session at the agreed upon time, that therapist may make up the session. The therapist is responsible for entering all correspondence notes and intervention logs pertinent to the child's case. This includes progress, missed sessions, contact attempt, and email and phone contacts.

#### **i. Change in parent/guardian and child availability (cancellations/missed sessions)**

If a parent/guardian is inconsistent with session assistance, the therapist should notify the Service Coordinator after the 2<sup>nd</sup> missed session. The Service Coordinator should contact the family and if necessary convene a meeting to update the IFSP to reflect the family's new availability.

Contact the family to address the following:

- Inquire about whether there is a change in the parent/guardian availability or their interest in the program
- If the parent/guardian reports continued interest, discuss scheduling an IFSP meeting to update service frequency or the number of services to meet their new needs
- If the parent/guardian reports a desire to close the case, follow the discharge instructions under the Section 8. Discharge

#### **ii. Returned Cases and preventing prolonged service lapses**

If the direct service provider returns the case to the Service Coordinator, the case should be added back to the service list within 1 day of notification. The Scheduling List Administrator (SLA) will contact the provider agency

to determine if they will re-staff the case or if the case needs to be assigned to a new direct service provider. (See appendix for managing cases returned due to frequent cancellations or a staffing change at the direct service provider)

*If the case was returned due to a staffing change at the direct service provider:*

- Notify the parent/guardian of the change and contact them regularly with updates until a new direct service provider has been identified and the first session takes place. Changes in providers do not activate a new 30-day timeline, but it is imperative that the case is re-staffed no later than 10 days after the case is returned.

### **E. IFSP Monitoring**

Service Coordinators are responsible for monitoring IFSP service delivery by communicating at least monthly with the parent/guardian and by conducting at least two EI Visits at set intervals during the IFSP year. Monthly calls and EI Visits should be documented in the correspondence notes.

#### **i. Monthly Call**

*The following should be discussed during the monthly call:*

- New strengths, progress, new concerns and medical information
- Experience with coaching interaction style
- Verify insurance information. For Medicaid children information must be verified both via the parent and online at Medicaid's website.
- Consistency of service delivery and any desired changes to service frequency
- Verify address, phone number, and email
  - Change to or enrollment in child care
  - Notify the parent/guardian of the following:
    - Any upcoming evaluations/assessments
    - Any upcoming IFSP or other meeting
    - Share the details of the most recent EI Visit (See section on EI Visits)

#### **ii. EI Visits (90-Day and 270-Day Meeting)**

EI Visits should take place approximately 90 days and 270 day from the Initial IFSP. This timing allows for a visit to be completed between the Initial IFSP and 6-month review and between the 6-month review and the Annual IFSP.

*To coordinate and complete an EI visit, Service Coordinators should complete the following steps:*

- Contact the parent/guardian and provider to notify them of your attendance
- Observe the child's level of participation, independence, and communication

- Discuss the child's progress and needs with the provider, teacher, family member, or other caregiver before, during, or after the EI visit
- If the parent/guardian is not present at the visit, contact the parent/guardian to update on the visit
- Document the visit in the correspondence notes



## VI. IFSP REVIEW

As children grow and develop and the family priorities and concerns change over time, the IFSP also changes and evolves to reflect new outcomes, supports and services. The Service Coordinator coordinates and monitors the delivery of the IFSP services and supports. The IFSP is reviewed every six months or whenever a team member including the parent/guardian, identify the possible need for change. The purpose of the IFSP review is to decide whether modification or revision of the outcomes, supports, and/or services to reflect changes in parent/guardian concerns or priorities and the child's development, is necessary. All eligible EI clients are reassessed annually and a new IFSP is written. Transition is discussed at every IFSP meeting.

### **A. Preparing for the 6 Month IFSP Review**

Every 6 months, the Service Coordinator, early interventionist(s), MCO (if applicable) and parent/guardian must review the IFSP. The Service Coordinator is responsible for coordinating and inviting all team members to the IFSP Review Meeting. The primary provider completes an assessment and shares with parent/guardian and team. The team reviews progress and checks if outcomes have been accomplished or need to be revised or modified.

*To coordinate and complete a 6 month review, Service Coordinators should complete the following steps:*

- Order AEPSi assessment 4-6 weeks before meeting - select correct level and add therapists in AEPSi online system
- Review the AEPSi report and supporting documents
- Review the SSCFDS for missing information that may be filled in during the IFSP meeting
- Review the family interview and medical history
- Prepare all forms
  - Add/Change Page
  - Authorization page (use if services are changes or added)
  - Outcomes and payer pages from most recent IFSP
- Send Prior Written Notice and assessment or evaluation (if applicable) to the family 5 days before the meeting.

*If the child is between age 2 and age 2.5, this meeting should service as a 6-month review and transition planning session (see transition section). Prepare the following:*

- Opt-out Form
- DCPS Consent
- Transition Plan Document

*If the child is between age 2.6 and 2.7, this meeting should service as a 6-month review & transition meeting. Invite the LEA (see transition section) and prepare the following:*

- Intent to elect extended option
- Transition Sign in Sheet
- DCPS Transition Consent

- Transition Conference document

## **B. 6 Month IFSP Review Agenda**

The purpose of the 6 Month IFSP Review is to review the child's progress toward the outcomes on the Initial/annual IFSP. The discussion should focus on the parent/guardian and child's experience in the program, any modifications or revisions that need to be made to outcomes, reviewing and evaluation the use of the coaching interaction style, and discussing adding/removing outcomes or discharge as applicable.

### **i. During this meeting Service Coordinators must discuss the following:**

- Explain the purpose of the meeting
- Introduce all parties in attendance and explain their role in the process
- Review the Procedural Safeguards/*Families Have Rights*
- Review IFSP outcomes and AEPSi Summary
  - What progress has child made? Continued areas of support?
  - If the child has not met or made progress toward outcomes, lead a discussion about modifying, ending, or adding new outcomes
  - If the child has met all their outcomes and is determined age-appropriate, the team should discuss discharge from Strong Start DCEIP. If it is determined that the child will be discharged, see discharge section for age-appropriate discharge instructions
- If services or assessments are added to the IFSP, discussion of the 30-day timeline
- Discuss upcoming IFSP meetings, observations, and evaluations, if applicable
- Explain to the parent/guardian that services will continue as stated on the IFSP and that the child will be assessed for eligibility before the next IFSP review. If they continue to qualify for the program, a new IFSP will be written. If the child no longer meets the Strong Start DC EIP eligibility criteria then he/she will be discharged.
- Conduct the Transition Plan and/or Conference, if applicable (see transition section)
- Ask the parent/guardian about any service linkages they may need
- Invite parent/guardian to sign required forms

### **ii. After the IFSP Meeting complete the following steps within 72 business hours of the IFSP meeting:**

- Upload 6-Month Review with the following forms included in the document
  - Add/Change Page
  - All current outcomes
  - All current payer pages
  - Authorization Page
  - Transition Plan and/or Conference documents, if applicable
- Upload required forms
  - Signed IFSP PWN
  - Opt Out Form (if applicable)

- DCPS Transition Consents to Release (if applicable)
- Other required forms based on the status of the case
- Mail or email the parent/guardian a password protected copy of the child's IFSP
- Complete the audit checklist to ensure that SSCFDS is up to date with all required fields completed.

***C. IFSP Reviews (outside of 6 month and annual meetings)***

An IFSP review must occur whenever a change to the outcome and or service provision (frequency, duration, intensity, method, natural environment/location) specified in the IFSP is being considered.

The Service Coordinator is responsible for inviting the parent/guardian, MCO (if applicable), and early interventionist(s). Review meetings should follow the same agenda as the 6-month review (see 6-month review preparation and agenda sections) with emphasis on the new or existing concerns that warrant changes to outcomes and/or services.

## VII. TRANSITION

Transition is one of the most important facets of the Early Intervention program. Once a child has successfully navigated their service provision and has met their developmental milestones, transition is a key responsibility of the service coordinator. It must be completed in a timely manner with the full engagement and participation of the family. Transitions require sufficient preparatory time, collaboration, cooperation, and coordination, with family involvement at every phase. Good transitions are timely and well-planned processes that occur over time and are not isolated events. They are enhanced by effective communication, collaboration, and coordination of activities among individuals, families, and agencies.

DCEIP has developed and implemented policies and procedures to ensure a smooth transition for infants and toddlers with disabilities under the age of three and their families from receiving early intervention services under Part C of IDEA to:

- Preschool or other appropriate services, for toddlers with disabilities; or
- Exiting the DCEIP for infants and toddlers with disabilities.

Service coordinators should refer to the document “Early Childhood Transition Guidelines” issued on August 4, 2014 as a resource. (Document housed in the shared drive)

Families have the right and responsibility to make informed decisions about their choices and options concerning transitions. This may include having the opportunity to visit programs and agencies before decisions are made, having discussions with providers or other family members, reviewing materials, and being fully informed about services delivery options, including inclusion of their child in community settings. Families must be prepared for, and provided information about, possible differences in service delivery models. Service coordinators must be careful to present facts only, and not introduce personal opinion or bias into the discussion about service delivery in the future settings.

Positively supporting families in becoming more informed about community transition options will strengthen their ability to make decisions that fit their needs and beliefs, and support their comfort with the change. In Part C of the IDEA, Service Coordinator serves as the facilitator in the planning and implementation of transitions for children and families. The service coordinator ensures the family is involved in planning transitions and provides assistance and ensures the process goes smoothly.

## **VIII. TRANSITIONING FROM PART C TO PART B**

Transition should be discussed with the family during the initial IFSP meeting. The family has the option of opting out of sending their information to the Local Education Agency and State Education Agency. The service coordinator will inform families of this option. Strong Start shall provide a list to the LEA and the SEA of all children 2 years 6 months 15 days or older who are potentially eligible for Part B services, with the exception of families who have opted out of notifying the LEA of their child's potential eligibility. A family must opt out if they do not want information shared by the time their child is 2 year 3 months old.

The service coordinator will schedule a meeting to begin transition planning with the family when the child turns 2 years old to; complete the transition planning page with the family; discuss program and service delivery options for child after 3 years of age; identify potential Transition Conference participants; discuss developmental evaluation that will be conducted within the next months; and obtain consent to share the Early Intervention Record with the LEA.

Strong Start is required under IDEA to invite Early Stages to every Transition Conference. The **Prior Written Notice (PWN)** for the transition conference meeting is the **official notification** to Early Stages of a potentially eligible child for Part B services. Early Stages is considered to be invited when the service coordinator uploads the PWN. In addition, Early Stages has 60 days to evaluate the child for Part B eligibility from the date that it obtains the consent.

Service coordinators should follow the OSSE transition policy of sending the PWN to Early Stages when the child is 2 years, 6 months, 15 days old (2.6.5) and scheduling the transition conference when the child is no more than 2 years, 7 months old (2.7). The day that Early Stages receives the PWN via the SSCFDS is the beginning of their 30 day timeline to get consent from the family to evaluate for Part B eligibility.

If a service coordinator schedules the meeting more than one month in advance of the meeting date, the service coordinator will wait until two weeks before the meeting to upload the PWN in the SSCFDS and select Early Stages or LEA personnel to receive the notification. When children are referred to the Strong Start program at 2.6 years old or older, the service coordinator will communicate with Early Stages by phone or e-mail to inform them that a transition age child is awaiting eligibility for Part C and that a PWN will be uploaded if the child is found eligible. Once eligibility is determined, the IFSP meeting will be scheduled and the PWN uploaded to notify Early Stages of the meeting. The service coordinator will facilitate the meeting and the transition as required under IDEA Part C regulations.

The services coordinator will follow up with the family and attend the IEP meeting if invited.

### ***A. The Extended IFSP Option***

On July 1, 2014 the ***State Option to Make Services Available to Children ages three and Older*** (Extended IFSP Option) took effect in the District of Columbia. Under the Extended IFSP Option, if a child is found to be eligible for preschool special education services under Part B of IDEA, the family has the option to choose to continue to receive services under an IFSP after the child turns three years of age instead of receiving the services under an Individualized Education Program (IEP) from a local public preschool. The child can remain in the Strong Start program up until the first day of school after the child's 4th birthday. The child can exit the Strong Start program

at any time up if the family opts to enroll their child in a preschool program under an IEP. The family has the option to elect to participate in the DC EIP Extended IFSP Option or to exit the program. It is the responsibility of the service coordinator to clearly articulate the various program options and requirements to the family as part of the transition process.

Service coordinators should refer to the document “Extended IFSP Option for Children Age 3 to 4 – Policies and Procedures” issued on April 15, 2014 as a resource. (Document housed in the shared drive)

### ***B. Early Stages Notification Opt – Out Policy***

When children are eligible for the Strong Start program the service coordinator must inform families of Strong Start’s requirement to notify the LEA that their child/children are potentially eligible for Part B services. Families have the right to opt out of this notification.

If a parent chooses to opt out, the written request must be signed and submitted to the Lead Agency:

- No later than ten (10) days prior to the child reaching the age of two (2) years and three (3) months.
- If the child enters the program after the age of two (2) years and three (3) months, the parent may opt out within ten (10) days after the date that the parent provides written consent for services.
- The opt-out form shall become part of the child's early intervention record. A parent may revoke his or her choice to opt out at any time by providing written notification to the Lead Agency. The Lead Agency or Lead Agency representative will work with the family to make a referral to the appropriate local educational agency within ten (10) days of receiving notification of revocation.

### ***C. Transition Planning Meeting***

#### **i. Preparing for the Transition Planning Meeting**

- Review the SSCFDS for missing information that may be filled in during the IFSP meeting
- Review the family interview and medical history
- Prepare documents for meeting
  - Prior Written Notice
  - Add/changed page
  - Transition Planning document

#### **ii. Transition Planning Meeting Agenda**

While transition should be discussed at the initial home visit for each child and all subsequent meetings, when children turn age 2 in the Strong Start, the Service Coordinator assists the parent/guardian in formally planning transition for transition. The Transition Planning document is found in the IFSP and helps the parent/guardian begin to consider what educational environment will be most appropriate when their child turns 3. It is the responsibility of the Service Coordinator to clearly articulate the various program options and requirements to the parent/guardian as part of the transition process.

*During this meeting Service Coordinators must discuss the following:*

- Discuss preschool options (including transition to Part B)
  - Engage the parent/guardian in a discussion about what educational setting they prefer once their child turns 3. Consider the child’s development needs, sibling placements, and other family needs as you help the parent/guardian talk through this important decision.
  - Discuss the difference between Part C and Part B using the comparison of Extended IFSP Option and Preschool Services through Individualize Education Plan at Age Three to Age four; and the differences between Part C and Part B preschool special education (see shared drive for forms)
  - Share DCPS Lottery details with the parent/guardian and the My School DC Website
- Discuss referral for reassessment
  - Notify the parent/guardian of a possible Transition Evaluation if their case meets the criteria below:
- Obtain parent/guardian consent to release information to LEA or parent/guardian Opt Out Form
  - Before the notification to the LEA is sent, parent/guardian must consent to or opt-out of their children’s information to being added to the official LEA Notification
- Take both forms to the Transition Planning Meeting if completed at or before age 2.5 so the parent/guardian may make an informed decision. If the child turns age 2 years 6 months, the information is sent with or without parent/guardian consent.(see shared drive for sample forms)
- If parent/guardians opt-out of LEA notification, upload the opt-out form and update the SSCFDS within 24 hours of receipt to prevent the child’s information from being sent to Early Stages against the parent/guardian’s wishes.
- Identify potential Transition Conference participants
- Discuss other topics as needed
  - Other topics may include, but not be limited to: transportation needs, sibling placement, defining the IEP, types of Special Education Accommodations, Early Stages eligibility process, and transition services needed by the child and his/her parent/guardian
- Ask the parent/guardian about any service linkages they may need
- Invite parent/guardian to sign required forms

*After the Transition Planning Meeting complete the following steps within 72 business hours of the IFSP meeting:*

- Upload the Transition IFSP with the following forms included in the document
  - Most recent outcomes
  - Most recent service and payer pages
  - Transition Plan document
  - Transition Conference
  - Transition sign in sheet
- Upload required forms
- Signed IFSP PWN

- Opt Out Form or DCPS Consent, if applicable
- Note if the child will need to be referred for a transition evaluation. Children should be referred for a Transition Evaluation if the most recent evaluation completed will be more than 6 months old when the child turns 2 years 9 months.

#### ***D. Transition Conference***

##### **i. Preparing for the Transition Conference**

The Service Coordinator will facilitate the transition conference when the child is between 2 years 7 months and 2 years 8.5 months old. All Transition Conferences must be completed before the child turns 2.9 years of age. Service coordinator must notify the parent/guardian that their child has reached the age where a Transition Conference is required.

- If the parent/guardian previously signed the opt-out form, revisit their decision to ensure that they do not wish to rescind it. Even if a child opts out of Early Stages notification, the Transition Conference should still be held.
- If the parent/guardian wishes to rescind it, provide them with the DCPS Consent to Release prior to the start of the Transition conference and invite Early Stages to the transition conference

*To coordinate and complete a Transition Conference, Service Coordinators should complete the following steps:*

- Schedule the transition conference with the parent/guardian inviting the direct service provider (at the parent/guardian's request), Early Stages or LEA and any other parties the parent/guardian wishes to attend.
  - Early Stages or LEA must receive an official invitation to a Transition Conference with no less than 5 days notice and no more than 30 days notice.
  - An official notification includes the following elements:
  - Prior Written Notice and details of the meeting added to the SSCFDS
  - Transition Zip File including: Consent to share info with the LEA, most recent evaluation, most recent AEPSi, most recent IFSP, and any other support documents.
- Review the evaluation report and supporting documents
- Review the SSCFDS for missing information that may be filled in during the IFSP meeting
- Review the family interview and medical history
- Pre-fill all forms requiring parent/guardian signature
- Add/Change Page
  - Transition Conference document
  - Transition Sign in Sheet
- Intent to elect IFSP, if not previously signed
- Prior Written Notice
- DCPS Transition Consents to Release (if not previously signed)
- Other required forms based on the status of the case



## ii. Transition Conference Agenda

The purpose of the transition conference is to create a plan that will guide the parent/guardian through the last months of their time in early intervention and instructions for identifying and enrolling in/connecting to the educational environment most appropriate when their child turns 3. It is the responsibility of the Service Coordinator to clearly articulate the various program options and requirements to the parent/guardian as part of the transition process.

*During this meeting Service Coordinators must discuss the following:*

- Explain the purpose of the meeting
- Introduce all parties in attendance and explain their role in the process
- Review the Procedural Safeguards/*Families Have Rights*
- Discuss future placements for the child including preschool services under Part B; Head Start; child care and other community services
- Discuss the difference between Part C and Part B using the comparison of Extended IFSP Option and Preschool Services through Individualize Education Plan at Age Three to Age four; and the differences between Part C and Part B preschool special education (see shared drive for forms)
- Remind parent/guardian if child is found not eligible for Part B services, Strong Start will close the case no later than the day before the child's third birthday
- Inform parents/guardians about Extended IFSP Option, if their child if find eligible for IEP
- Inform parent/guardian about DCPS and Charter school lottery
- Transfer additional assessments/evaluations and current IFSP to the LEA (with parent/guardian consent)
  - This step may have been accomplished with the uploading of the Transition Zip File into the SSCFDS. If additional documents have become available, provide those documents to Early Stages or LEA with parent/guardian consent.
- Discuss training opportunities for parent/guardians on future placements and other transition matters
  - Provide parent/guardian with Early Stages information and information for their neighborhood school or preferred educational environment and encourage them to contact each to inquire about transition matters
- Identify activities to help the child adjust to the new program setting
  - Discuss ways to help the child prepare for and adjust to a new educational environment. This may include trying a new daily schedule closer to the start of school, visiting/touring potential schools, and other activities that will help the child and parent/guardian prepare for the transition from Part B to Part C, if eligible for Part B
  - LEA will obtain parent/guardian consent to conduct an initial evaluation (Eligibility for Part B services).
  - Early Stages Transition Liaison will facilitate the signing of Part B eligibility documents with the parent/guardian's consent

- If LEA is not able to attend the transition meeting, SC must inform the LEA that the meeting took place, so the LEA can contact the parent/guardian to articulate the LEA eligibility process and sign the necessary documents with the parent/guardian.
- ❑ Discuss potential date for the Individualized Education Program (IEP) meeting (IEP must be developed and implemented by age 3)
  - There will be two appointments with the LEA, they will coordinate both appointment with the family. Stay in contact with family discuss the outcome of both appointments.
- ❑ Ask the parent/guardian about any service linkages they may need
- ❑ Invite parent/guardian to sign required forms

*After the Transition Conference, complete the following steps within 72 business hours of the IFSP meeting:*

- ❑ Upload the Transition IFSP with the following forms included in the document
  - Most recent outcomes
  - Most recent service and payer pages
  - Add/Change Page
  - Transition Conference document
  - Transition Sign in Sheet
- ❑ Upload required forms
- ❑ Prior Written Notice
- ❑ DCPS Transition Consents to Release (if not previously signed)
- ❑ Other required forms based on the status of the case
- ❑ Mail or email the parent/guardian a password protected copy of the child's IFSP
- ❑ Complete the audit checklist to ensure that SSCFDS is up to date with all required fields completed.

### ***E. Monitoring Part B eligibility***

If the child is eligible for Part B, the parent/guardian may decide between moving forward with IEP or remaining in Part C under participating in the Extended IFSP Option.

If child is found not eligible for Part B; Strong Start will close the case effective the day before the child's third birthday and Service Coordinator must follow-up with the parent/guardian to see if the parent/guardian needs additional resources.

- ❑ Follow up with parent/guardian at 2 years and 9 months to ensure LEA provided the appointments for the observation and the eligibility meeting
- ❑ If Service Coordinator's schedules permit, the Services Coordinator will follow up with the parent/guardian and attend the IEP meeting, if invited. If not possible to attend, SCs must follow up with the parent/guardian after the eligibility meeting to learn parent/guardian plans when child turns 3 years old.

- When the child is age 2 years 10 months, if not sent by the Early Stages or LEA Family Care Coordinator, the Service Coordinator must request Part B eligibility determination form, upload it to the SSCFDS, and update all transition related fields.

#### ***F. Exiting Part C with an IEP***

If the parent/guardian chooses receive services under Part B the service coordinator will take the following steps to support the parent/guardian as they exit DC EIP.

- Input a correspondence note documenting the parent/guardian's choice
- Refer for an exit AEPSi if the most recent AEPSi was completed 6 or more months ago
- Contact the parent/guardian to confirm the school they will attend, make them aware of the exit AEPSi, and discuss the end date for DC EIP services.
- Notify the early intervention service providers of the child's exit at age 3
- Update the SSCFDS to reflect the parent/guardian's decision
- Update AEPSi with the correct entry and exit date

Two weeks prior to the child's 3<sup>rd</sup> birthday, complete the following steps:

- Contact the parent/guardian to confirm enrollment, the final date of service and answer any questions about transition
- Notify the provider of the last date of services
- Audit the case using the audit checklist
  - o Get any outstanding documents or information from the parent/guardian or other parties before closing the case
- Hold the case active but change the status to "Pending closure" for 30-days following the last date of services to allow for any outstanding notes and documents to be added to the SSCFDS. No services should take place during this period
- After 30 days close the case using "Part B Eligible- Exiting Part C" as the reason and changing the status to "Closed"
- The closing date should be the date of the day before the child's 3<sup>rd</sup> birthday. Children should not turn 3 in the Strong Start program if they are exiting without extending the IFSP.

#### ***G. Exiting Part C when Part B Eligibility has not been determined***

If children turn 3 while in the Part B eligibility determination process, their case must remain open until Part B eligibility has been determined. If children turn 3 without entering the Part B process, their case should be closed the day before their 3<sup>rd</sup> birthday.

To close such cases, the following steps should be taken:

- Document their Part C and Part B Status in a correspondence note in the SSCFDS
- Meet with the parent/guardian to review and sign the following forms:

- decline of services form (see shared drive)
  - Add/Change form
- Provide parents with referrals as needed
- Notify providers of the parent/guardian's decision
- Audit using the audit checklist (see appendix)
- Hold the case active but change the status to "Pending closure" for 30-days following the last date of services to allow for any outstanding notes and documents to be added to the SSCFDS.
- After 30 days close the case using "Part B Eligibility Not Determined" as the reason and changing the status to "Closed"

### ***H. Extending the IFSP***

The child and family would continue to receive early intervention services with an educational component that promotes school readiness and incorporates pre-literacy, language, and numeracy skills through an IFSP until the beginning of the school year following the child's 4th birthday.

#### **How long can families participate in the Extended IFSP Option?**

- a. Children can participate in the Extended IFSP Option until the date on which services through an IEP begin or the first day of school following the child's 4<sup>th</sup> Birthday, whichever comes first.
- b. At any time a family may choose to terminate (**in writing**) early intervention services through the Extended IFSP option and pursue FAPE through an IEP.
- c. A family may **NOT** return to an Early Intervention IFSP once they have terminated (**in writing**) early intervention services through the Extended IFSP option to pursue FAPE through an IEP.

#### **What is FAPE?**

FAPE (Free and Appropriate Public Education) means all special education and related services that:

- a. Are provided at public expense, under public supervision and direction, and at no cost to the parent;
- b. Meet the standards of OSSE;
- c. Include an appropriate preschool program, elementary school, or secondary school education; and
- d. Are provided in conformity with an IEP.

### **iii. Preparing for the Extended Option IFSP Meeting**

If a child is eligible for Part B and their family chooses to continue under Part C, the service coordinator must conduct an Extended IFSP meeting before age 3. An Extended IFSP is required for all children who will turn 3 years old in the program. If a family decides to remain in Strong Start for 2 days after the third birthday they must have an extended IFSP for those 2 days. If a family does not want to meet to develop an extended option IFSP before the child's 3<sup>rd</sup> birthday, services need to end the day before the third birthday.

- Obtain a copy of the Part B Eligibility document

- Schedule the Extended Option IFSP Meeting with the parent/guardian inviting the MCO Case Manager, and any other parties the parent/guardian wishes to attend.
- If the most recent AEPSi is more than 3 months old, refer for an exit AEPSi which must be conducted before the child's 3<sup>rd</sup> birthday.
- Prepare/Pre-fill documents for meeting
  - Add Change Page
  - Most recent outcomes
  - Most recent service and payer pages
  - School-readiness outcomes
  - Intent to Elect Extended Option form, if not previously signed
  - parent/guardian consent at or before age 3
  - Prior Written Notice

#### iv. Extended Option IFSP Meeting Agenda

The purpose of the Extended Option IFSP Meeting is to extend the current IFSP past the child's 3<sup>rd</sup> birthday and to add school-readiness outcomes to the IFSP so that the child may develop the necessary skills to transition to Pre-K 3 or Pre-K 4 when the parent/guardian chooses to do so. An effective Extended Option IFSP Meeting includes the elements below:

- Explain the purpose of the meeting
- Introduce all parties in attendance and explain their role in the process
- Review the Procedural Safeguards/*Families Have Rights*
- Discuss and develop pre-literacy, language, and numeracy educational outcomes during this meeting (see shared drive for Extended Option Outcomes page)
- Notify the parent/guardian that Strong Start DCEIP will continue to complete an AEPSi and IFSP every 6 months to track progress. IFSP review meetings will begin 6 months from the date that the child enrolled in the Extended IFSP Option. **No exit AEPSi is required for children leaving Extended Option.**
- Ask the parent/guardian about any service linkages they may need
- Invite parent/guardian to sign required forms

*After the IFSP Meeting complete the following steps within 72 business hours of the IFSP meeting:*

- Upload the IFSP with the following forms included in the document
- Add/Change Page
  - Most recent outcomes from most recent IFSP
  - School-readiness outcomes
  - parent/guardian consent at or before age 3
- Upload required forms
- Signed IFSP PWN
  - Intent to elect Extended Option
  - Prior Written Notice

- Part B eligibility form if not previously uploaded
- Other required forms based on the status of the case
- Mail or email the parent/guardian a password protected copy of the child's IFSP
- Complete the audit checklist to ensure that SSCFDS is up to date with all required fields completed.

## ***I. Final Transition***

Children can remain in the Strong Start DCEIP up until the first day of school following their 4th birthday. They can exit at any time up if the parent/guardian opts to enroll their child in a preschool program under an IEP. It is the responsibility of the Service Coordinator to clearly articulate the various program options and requirements to the parent/guardian as part of the final transition process.

The service coordinator must provide the LEA with notification of the family's decision to request services through an IEP within 3 days of receiving the signed "LEA Notification" Form. All communication related to a family electing to leave the extended option should be documented in the Strong Start Child and Family Data System. Final Transition IFSP meeting should be conducted between April 1<sup>st</sup> and July 16<sup>th</sup> of each year (subject to change) if the parent intended to have their IFSP finalized by Early Stages. If the parent would like their Finalized by their LEA of choice (not Early Stages) the service coordinator and parent should work together to contact the LEA and finalize the IFSP.

### **i. Preparing for Final Transition**

- Notify the parent/guardian that a meeting is required for their voluntary or compulsory exit from extended option.
- Ask the parent/guardian if they would like the LEA to attend, if the parent/guardian prefers LEA to attend
  - Invite the LEA with no less than 2 weeks' notice
  - Give the LEA access to the following documents: PWN, IFSP, AEPSi, termination form, and any other support documents
  - If the LEA is not Early Stages
  - Identify the school and SPED Coordinator and invite them via email including the prior written notice
  - Communicate with the LEA. If the child is stage 4 enrolled with that LEA and the parent has signed a consent to release, send the following documents via email in a password protected PDF format: PWN, IFSP, AEPSI, termination form, and any other support documents
- Review the SSCFDS for missing information that may be filled in during the IFSP meeting
- Prepare/Pre-Fill all documentation
  - Prior Written Notice
  - Add/Change Page (with appropriate IFSP end date)
  - Transition after Age three document
  - Service pages to extend the service (with appropriate service end date)
  - Transition conference (At Age Four)
  - Transition Conference (At Age Four) signature page

- Notice of Intent to Terminate Extended Option Form

## ii. Final Transition Meeting Agenda

A Final Transition meeting is completed for any child exiting extended IFSP option. Parents/guardians may exit voluntarily at any time. This meeting should guide the parent/guardian through the steps necessary to continue their education in a Pre-K 3 or Pre-K 4 environment.

*During this meeting Service Coordinators must discuss the following:*

- Discuss pre-kindergarten options (including transition to Part B)
  - Discuss the parent/guardian's voluntary or compulsory transition to Part B
  - Notify the parent/guardian of the end date for services in early intervention
  - Confirm enrollment or transition to alternative educational environment outside of Strong Start DCEIP
- Ask the parent/guardian about any service linkages they may need
- Have parent/guardian sign required forms

*After the Final Transition IFSP Meeting complete the following steps within 72 business hours of the IFSP meeting:*

- Immediately provide Early Stages or the LEA with the Notice of Intent to Terminate Extended Option Form (not more than 72 hours after the Final Transition Meeting) The service coordinator must provide the LEA with notification of the family's decision to request services through an IEP within 3 days of receiving the signed "LEA Notification" Form.
- Upload the Final Transition IFSP with the following forms included in the document
- Add/Change Page with appropriate IFSP end date
- Transition Conference After 3 document
- Transition After 3 Sign in Sheet
- Authorization Page
- Service and Payer Pages with appropriate service end date
- Outcomes with appropriate end date
- Upload required forms
- Prior Written Notice
- Notice of Intent to Terminate Extended Option Form
- Other required forms based on the status of the case
- Mail or email the parent/guardian a password protected copy of the child's IFSP
- Complete the audit checklist to ensure that SSCFDS is up to date with all required fields completed.
- Notify the provider of the last date of services
- Audit the case using the audit checklist

- Hold the case active but change the status to “Pending closure” for 30-days following the last date of services to allow for any outstanding notes and documents to be added to the SSCFDS (no services should take place during this period)
- After 30 days close the case using “Part B Eligible - Exiting Extended Option” as the reason and changing the status to “Closed”
- The closing date should be the agreed upon date of the child’s last service



## **IX. DISCHARGE**

The service coordinator is responsible for ensuring that if a parent/guardian ends their participation in the DC EIP program for any reason, they are informed of their Rights and the action is documented in writing in the child’s record in the SSCFDS. For any child exiting the system after receiving services for 6 months or more and AEPSI must be completed by the treating therapist and marked exit in the AEPSi System so that we can capture the progress and exit data. Date is collected in the following areas; social emotional, knowledge and skills and appropriate behaviors. A case may be closed at any time during the Strong Start process for the following reasons.

<b>Term</b>	<b>Definition</b>
Deceased	The infant is deceased. Close case.
Moved out of State	The infant and family have moved to another state or country.
Parent/guardian withdrawal	The child has been evaluated and an IFSP has been developed. The parent/guardian has chosen to withdraw the family from Part C services and provided written or verbal indication of withdrawal from services. <b>OR</b> The parent Guardian has declined evaluation or declined services and withdrawn their child from the Strong Start program.
Attempt to Contact Unsuccessful	Repeated attempts to contact or provide services to family and child were unsuccessful (attempts must be documented in the child's record). <b>OR</b> Parent/guardian has not made themselves or their child available for evaluations, meetings, or sessions.
Not Part C eligible	The child no longer meets the Strong Start eligibility criteria
Part B Eligible (exiting Part C)	The child has been referred to and is eligible for Part B services and supports. They are exercising their right to FAPE.
Part B Eligible (exiting extended option)	The child received service under an Extended IFSP is now exiting extended option.
Not eligible for Part B (exiting Part C with or without referrals)	The child is not eligibility for Part B and is exiting the strong start program with or without a referral to other services.
Part B eligible exit Extended option	The child is in extended option and terminating their extended option.
Child Not available	- Deceased

## **A. Discharge Methods:**

### **i. Unable to contact the family**

If you are unable to contact the parent/guardian after 3 phone calls on three different days/times, please complete the following steps:

- Send the “Unable to Contact Letter”

If the parent/guardian does not respond to the unable to contact letter after 7 calendar days,

- Send the Closure letter
- Audit using the audit checklist (see appendix)
- Close the case using “Contact attempts unsuccessful” as the reason

### **ii. Parent/guardian withdrawal**

#### *Before the IFSP*

If the family requests to withdraw from the program prior to eligibility determination,

- Document their request in a correspondence note in the SSCFDS
- Send the “family withdrawal letter” (see shared drive)
- Audit using the audit checklist (see appendix)
- Close the case using “Contact attempts unsuccessful” as the reason

#### *After the IFSP (IFSP Completion, Child hospitalized indefinitely, or moved out of State)*

If the parent/guardian requests to withdraw from the program prior to eligibility determination,

- Document their request in a correspondence note in the SSCFDS
- Meet with the parent/guardian to review and sign the following forms:
  - o Decline of services form (see shared drive)
  - o Add/Change form
- Notify providers of the parent/guardian’s decision
- Audit using the audit checklist (see appendix)
- Hold the case active but change the status to “Pending closure” for 30-days following the last date of services to allow for any outstanding notes and documents to be added to the SSCFDS (no services should take place during this period)
- After 30 days close the case using the appropriate reason and changing the status to “Closed”

#### *Child is no longer eligible*

- Send PWN to family to inform them of meeting because they are no longer eligible
- Meet with IFSP team to close out the IFSP and discharge the infant/toddler from services.

- ❑ Case should be closed after the IFSP meeting if anything is pending the case can stay open for up to 7 days after the IFSP meeting ensuring that everything is completed and documented and the therapist have the opportunity to close out with the family.

## **X. APPENDIX**

### **A. Pending closure for 30-days – Choosing a closure date**

When children stop receiving services, their case should be put in “pending closure” status for 30 days so that any outstanding notes and documents can be added to the SSCFDS. The closing date should be the date of the last service, not the date after the 30-day pending closure period.

### **B. What if the Parent/Guardian does not make themselves available for a meeting?**

If you have trouble reaching a parent for any meeting or the parent schedules, use the method of 3 contact attempts and one letter before closing the case with the final closure letter.

If you are in contact with the parent, but they still do not make themselves available, notify the family that if the meeting does not take place within 14 days of the current conversation, the referral will close.

### **C. What if a Parent/Guardian does not want to have their child evaluated or declines services at the Initial IFSP or after?**

If a parent declines and evaluation, refer to the discharge section and close the case. Cases do not need to be held open for 30 days if the child does not receive services.

If a child has received services and the family chooses to end services before the expiration of the IFSP, complete the following:

- If the most recent AEPS is more than 6 months old, refer for an exit AEPS
- Convene a meeting inviting the MCO (if enrolled), the therapist(s), and any other person the family requests
- Review Outcomes
- Request the parent sign the decline of services form confirm their desire to terminate services

### **D. Reopening Cases with RBI, but no evaluation**

- I. If the RBI is in system and less than 90 days old
  - a. Update existing RBI
    - i. Update RBI means review the RBI and add new information
- II. If the RBI in system and more than 90 days old OR no RBI in system
  - a. Complete a new RBI
    - i. New RBI means ask the questions as if they’ve never been asked before

### **E. Reopening Cases with evaluation, but No IFSP**

- I. If the evaluation is less than 6 months old
  - a. Get initial consent signed by Parent/Guardian
  - b. Update RBI if RBI is less than 90 days old, complete new RBI if RBI in system is more than 90 days old
  - c. Use existing evaluation & AEPS
  - d. Schedule IFSP with the company that completed the evaluation

- II. If the evaluation more than 6 months old, it is invalid to determine eligibility
  - a. Treat the case as a new referral and complete a new RBI and new referral for evaluation.

***F. Managing cases returned due to frequent cancellations***

- I. Call parent to discuss missed sessions
- II. Offer to convene a meeting to discuss changing frequency to better meeting family's needs
- III. If the family chooses to remain in the program
  - a. Use the service list to find a new provider
- IV. If family choose to leave the program
  - a. Follow the steps for family withdrawal

***G. Managing cases returned due to staffing change with the direct service company***

- I. Call parent to discuss change in provider
- II. If the new provider has been identified
  - a. Provide the parent with their contact information
  - b. Update the SSCFD
  - c. Update the provider information at the next IFSP
- III. If the new provider has not been identified
  - a. Use the service list to find a new provider
  - b. Provide the parent with their contact information
  - c. Update the SSCFD
  - d. Update the provider information at the next IFSP

***H. Reopen Cases after lapse in service***

- I. Service lapsed 0-5 months from an eligibility determination
  - a. Convene a meeting to review IFSP, eligibility form, and services
  - b. Sign initial consent, and initial authorization
  - c. Complete add/change form (check "continue IFSP")
  - d. Upload new service referral
  - e. Continue case monitoring as mentioned in page \_\_\_ of manual
- II. Service lapsed 6-10 months from the initial IFSP
  - a. Refer for mid-year AEPS
  - b. Convene a meeting to review IFSP, eligibility form, and services
  - c. Sign initial consent, and initial authorization
  - d. Convene IFSP review meeting and update/modify outcomes and services as necessary
- III. Service lapse 10-12 months
  - a. Refer for eligibility determination and AEPS as if a new referral

**I. Record Requests**

All subpoenas and official records requests should be forwarded to the Child Find Intake unit for response and processing. These requests shall also be documented as a correspondence notes in the SSCFDS.

**J. Releasing Copies of IFSPs to child care centers, physicians, and other collaborators**

A consent to release is required before releasing any PII about children in the Strong Start program. The parent must sign a consent to release before any documentation or information forward to an inquiring party.

**K. Naming Conventions**

To promote uniformity in the naming of documents in the SSCFDS, please use the following naming convention when naming Microsoft Word and PDF documents:

**FirstNameLastName\_DocumentTypeDateCreated**

<b>Document Owner</b>	<b>Document Type</b>	<b>Sample Naming Convention</b>
Child Find/SC	Strong Start Referral Form	JaneDoe_SSReferral100416
Child Find/SC	Supporting Documents w/ Referral	JaneDoe_ASQSE100416
Child Find/SC	Referral Feedback Form	JaneDoe_ReferralFeedback100416
SC	Family Interview (RBI)	JaneDoe_RBII100416
SC	PWN and Consent for DCEIP	JaneDoe_PWNConsent100416
SC	Referral for Eligibility Determination	JaneDoe_EligRef100416
SC	Eligibility Form	JaneDoe_EligibilityForm100416
SC	PWN for IFSP or Eligibility	JaneDoe_PWN_IFSP100416 JaneDoe_PWN_Eligibility100416
SC	IFSP	JaneDoe_InitialIFSP100416
SC	Referral for Services	JaneDoe_ServicesReferral100416
SC	Referral for Assessments	JaneDoe_AEPSRef100416 JaneDoe_FeedingAssmt100416
SC	Referral for Continued Eligibility Determination	JaneDoe_ReEligRef100416

**L. Insurance Verification Line**

Dial 202.906.831  
 Press #1  
 Press #1  
 Enter provider #034625300  
 Press #1 to confirm provider number  
 Press #1 for Recipient eligibility  
 Then follow the prompts

### ***M. Interpretation through District Government Language Line***

Dial 1 (800) 367-9559

Press 0 or stay on the line for assistance.

6-digit Client ID: 5 11 1 0 2

Press 1 for Spanish

Press 2 for all other languages (Speak the name of the language at the prompt)

An interpreter will be connected to the call

Please #: Access Code: 701011

Brief the interpreter: Summarize what you wish to accomplish and give any special instructions

Add the Limited English speaker to the line

### ***N. Welcome Folder Content List***

- Strong Start Family Roadmap (Caterpillar)
- Procedural Safeguards Document *Families Have Rights*
- Initial Consent & Prior Written Notice
- NLEP Discussion points
- Infant and Toddler Development Milestones
- Strong Start Frequently Asked Questions
- 10 Things Families Should know about Early Intervention
- Consent to release (so records may be released to childcare centers, CFSA Foster parents, and other parties as needed)
- Page 2 of initial referral
- Not Interested Letter/Form (for parents who decline during family interview)

#### **If child is age 2 years or older, add the following:**

- Part C to Part B comparison chart (Butterfly) (if child is age 2 or older)
- DCPS Transition Consent (if child is age 2 or older)
- DCPS Notification Out-out form (if child is age 2 or older)

#### **If Parent/Guardian has sensory or autism concerns, add the following:**

- M-CHAT with follow up questions

### ***O. Families with Special Circumstances***

#### **i. Families linked with CFSA**

##### *Elements of a complete CFSA Referral*

The Strong Start Child Find/Intake Team provides CFSA Referral sources with the Strong Start referral, Initial Consent and Prior Written Notice, Procedural Safeguards/Families Have Rights and the Consent to Evaluate. A complete CFSA referral includes each of these elements. If they are not provided at the time the case is assigned

the Service Coordinator, the Service Coordinator is responsible for providing these forms to the Parent/Guardian/educational decision-maker. The Social Worker may assist with this process.

### *Preparing for Initial Contact for CFSA-linked families*

- Follow the steps in the **Preparing for Initial Contact** section adding the steps below:
- Call the social worker first (before contacting the Parent/Guardian or foster Parent/Guardian) for a briefing on the case including:
  - Share with the Social Worker the details of the Strong Start 45-day timeline and eligibility process emphasizing the importance of Parent/Guardian/educational decision-maker participation.
  - Verify the name and contact information for the Parent/Guardian and foster Parent/Guardian.
  - Verify the length of time child has been with the current Parent/Guardian (if not
  - Verify or inquire about the name and location of child care
  - Inquire about the visitation schedule and location
  - Inquire about any pending court dates or court orders that may impact the 45-day timeline or implementation of services
  - Inquire about any potential moves to new foster Parent/Guardians out of state
  - Ask the social worker if the Parent/Guardian(s) retain educational decision-making rights
    - If the Parent/Guardian retains educational decision-making rights, follow the steps in the **Scheduling the Initial Home Visit** section
    - If educational decision-making rights of the Parent/Guardian have been terminated, ask the Social Worker for the name and contact information of the educational decision-maker and follow the steps for **Scheduling the Initial Home Visit**

### *Understanding the role of the Educational Decision-Maker*

By default, biological Parent/Guardians are their child's educational decision-maker. In some cases, CFSA-linked children may have a non-Parent/Guardian appointed by the court system as educational decision-maker. The Parent/Guardian/educational decision-maker is the only person who may consent to any evaluation or services proposed by the Strong Start program.

### *Primary points of contact for CFSA-linked families*

The educational decision-maker and CFSA social worker are the primary points of contact for families linked with CFSA. Both parties should be kept abreast of all meetings, evaluation, and changes. The foster Parent/Guardian is not a substitute for speaking with the biological Parent/Guardian. A consent to release signed by the Parent/Guardian/educational decision-maker is required before Strong Start may speak with a foster Parent/Guardian.



### *Conducting meetings for a child linked with CFSA*

All the people in the child's life should have input on the family interview if the child is linked with CFSA, this includes, but is not limited to the social worker, foster family/resource family, Parent/Guardians, child care staff, and guardian ad litem.

### *Difficulty contacting primary points of contact for CFSA-linked families*

- If the Social Worker or Parent/Guardian is not responsive, email the CFSA referral source to request assistance contacting the Social Worker.
- If the neither the CFSA referral source, nor the CFSA Social Worker respond, contact the Parent/Guardian to inquire about their educational decision-making rights.
  - If the Parent/Guardian confirms that they have educational decision-making rights, follow the steps for the Initial Home Visit.
  - If the Parent/Guardian reports they do not have educational decision-making right or are unsure of the status of their rights, request that the Parent/Guardian provide the contact information they have for their CFSA Social Worker and attempt to contact the Social Worker.
- If you are unable to reach the CFSA Social Worker, Guardian Ad Litem, or Parent/Guardian, follow the steps for closing case due to inability to contact Parent/Guardian/guardian.
- If the Parent/Guardian is not responsive (neither the social worker nor the Strong Start Service Coordinator can reach the Parent/Guardian) and no educational decision-maker has been appointed, complete the OSSE Educational Surrogate Request Form and submit it to the Educational Surrogate Parent/Guardian Program. See form for OSSE Educational Surrogate Request Form

### *CFSA-linked children residing in Maryland*

- If the foster family lives in Maryland and attends child care in Maryland, the case should be referred to Maryland Infants and Toddlers. Send the Maryland Infants and Toddler referral to the email address or fax number on the Maryland Infants and Toddlers referral listing the social worker as the primary contact.
- If the child lives in Maryland, but attends child care in DC, proceed with the referral notifying the social worker, foster Parent/Guardian, and Parent/Guardian that all evaluations, meetings, and if eligible eservices must take place in Washington, DC.

## **ii. Families with no unstable housing or limited access to a phone**

If the referral form stipulates or the Parent/Guardian shares at the time of initial contact that the family has no fixed address or no/limited access to a phone, follow the steps in the Preparing for Initial Contact section adding the steps below:

- Contact the referral source, CFSA Nurse/Social Worker and MCO Care Manager and inquire about the child's next appointment
  - If no appointment is scheduled, continue trying to reach the Parent/Guardian under our current Parent/Guardian contact procedure
  - If an appointment is scheduled, call the Parent/Guardian stakeholder at the date/time of the appointment.
- During that call, contact a Strong Start Evaluation Provider on 3-way to schedule the Evaluation and Eligibility Meeting. This may be schedule for the same day or multiple days.
  - Complete as much of the family interview as is possible during that call and attend the evaluation to review the Procedural Safeguards/Families Have Rights and Initial Consent & PWN
  - Attend the evaluation to get initial consent/PWN and to share the families have rights

**i. Supporting families who reporting having no concerns**

If the Parent/Guardian reports having no concerns, and no ASQ was completed prior to the referral, ask the Parent/Guardian if they would like to complete the ASQ by phone.

- If the ASQ shows delays, ask again if the Parent/Guardian would like to move forward with the referral.
- If the Parent/Guardian declines the ASQ or does not want to move forward after the ASQ shows delays, (refer to discharge section of manual for step to close with Parent/Guardian withdrawal)
- If Page 2 of the referral is signed, send the referral feedback form to the referral source

## **P. Audit Checklist**

### **Home Page**

- First Contact updated

### **Home Page: Insurance**

- Insurance up to date (verified Medicaid portal)
- Medicaid box checked
- Medicaid Case managers added

### **Home Page: Child Care**

- Child Care information up to date

### **Home Page: Part B**

- Part B box Checked
- LEA Opt-out checked (if applicable)
  - Document uploaded

### **Home Page: Extended Option Section (if applicable)**

- Elected Extended Option Status
- Date Elected Extended Option & Document uploaded
- Date Part B Eligibility Received & Document uploaded
- Date Extended Option Revoked & Document uploaded
- LEA Enrollment updated

### **Family Interview**

#### **For any family interview you completed**

- Scheduled Date
- Time Scheduled
- Family Interview uploaded
- Initial Consent/PWN uploaded

### **Evaluation Table**

- All non-current evaluation tables closed

### **Eligibility Table**

**There should be an eligibility table open for each eligibility period**

#### **Open a new table and complete it if needed**

- Eligible for Part C
- Eligibility Determination Date
- Eligible Criteria Met
- Qualifying Domain 1 & 2
- Eligibility Category, Medical condition and/or genetic diagnosis
- Eligibility form uploaded

### **IFSP Table: Information**

- IFSP Type
- Scheduled Date
- Scheduled Time
- Actual Date
- Primary Setting
- MCO Care manager notification (for any upcoming IFSPs)

### **IFSP Table: New Services**

- All services implemented date

### **IFSP Table: Transition IFSP**

**If the child has multiple IFSP tables, go to the transition IFSP table and review/update the following**

- Transition Scheduled Date
- Transition Scheduled Time
- Transition Consent signed
- Initial LEA Sent
- LEA Notification Date
- LEA Invitation Sent
- LEA Invited (**update for any upcoming IFSPs**)
  - B. Maskell, D. Gonzalez, & E. Rihani, A Yares
- Method of Participation
- Transition Outcome
- Transition Meeting Date
- Transition Meeting Participants
- LEA Participants

### **Services**

- Service Type
- Company
- Payer
- Therapist
- Therapist Contact Number
- Number of Sessions
- Frequency
- Intensity
- Method
- Setting
- Date of First Session
- Date of Last Session (if applicable)

### **Correspondence Notes (update if n**

**Q. Addressing changes in Parent/Guardian and/or provider availability for the IFSP**

If the Parent/Guardian is no longer available for the tentative Eligibility Meeting/IFSP date, conduct a 3-way call with the Parent/Guardian and the evaluation team to schedule a new date.

- If the 3-way call is unsuccessful, request 2 dates/time from the Parent/Guardian for the IFSP meeting.
- Forward those date to the evaluation provider and request a response within 24 hours.
- Follow up with the evaluation provider and Parent/Guardian until the IFSP meeting is scheduled.

If you are unable to schedule the IFSP after 10 calendar days due the Parent/Guardian's availability

- Contact the Parent/Guardian and inquire about their interest in the program
- Inquire about their desire to close the case and return to the program when their schedule permits
- Offer a weekend or late evening IFSP meeting date/time (see your supervisor about managing your time or providing coverage for meetings that take place outside of your tour of duty

If the evaluation team is no longer available, the following options should be exhausted in an attempt to get all required parties to the eligibility and/or IFSP meeting.

- A member from the evaluation team's company is present. This person must be an evaluator, but does not need to be a member of the evaluation team. If they are unavailable;
- A member of the evaluation team is present by phone. If they are unavailable;
- SC contacts Parent/Guardian and asks if they have questions about the evaluation report. If they do, a member of the evaluation team sets up a time to answer these questions via phone before the eligibility meeting is held. This is not a billable meeting. If unavailable;
- SC will attend eligibility meeting with Parent/Guardian without another evaluation/clinical member present. The SC will use the evaluation report as a representative of the evaluation team and will talk to the evaluation team before the meeting.

## **R. Definitions**

**30 Day Timeline/Max Start Date** – The maximum date new or modified services can start. The date of the IFSP is day 1. For example. If an IFSP takes place on March 1, the maximum start date is March 30.

**Actual first Contact** – The date the Service Coordinator first speaks with the parent after receiving the referral.

**AEPS Interactive (AEPSi)** - is the web-based data management system of AEPS—essential for streamlining assessment, running reports, meeting OSEP reporting mandates, reducing paperwork/reporting time, reducing errors, collecting customized data reporting and more.

**Assessment, Evaluation, and Programming System (AEPS)** - is the premier assessment, intervention, and programming system for young children with and without disabilities. AEPS assesses children across six major developmental areas: fine motor, gross motor, cognitive, adaptive, social-communication, and social. The assessment encompasses pre-academic content areas such as pre-literacy, numeracy and pre-writing.

**American Sign Language** - A formal method of communication used by people with hearing impairments. It is a system of articulated hand gestures and their placement relative to the upper body as well as facial expression, movements, postures, and other non-manual signs that enhance and emphasize the meaning of signs.

**Assessment** - the ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility as defined in 34 C.F.R. Part 303.322.

**Authorized Evaluation Provider** – An provider agency identify as qualified to determine eligibility by the Strong Start program. Not all Strong Start DCEIP providers are authorized Evaluation Providers.

**Child Find** - is a continuous process of public awareness activities, screening and evaluation designed to locate, identify, and refer as early as possible all young children with disabilities and their families who are in need of Early Intervention Program (Part C) or Preschool Special Education (Part B/619) services of the Individuals with Disabilities Education Act (IDEA)

**Child Outcomes Summary data (COS)** – Gathered for every child entering and exiting the early intervention program with an IFSP. The COS data is calculated through the AEPS (Assessment, Evaluation, Programming System) tool. COS data is determined using a common metric for describing children's functioning compared to age expectations in each of the three outcome areas. The COS, a process developed by the National Early Childhood Outcomes Center, provides a way for a team to summarize the child's level of functioning using information from many sources including assessment tools, Parent/Guardian and provider reports. The COS enables DC

EIP to report the percent of infants and toddlers with IFSPs who demonstrate improved: (a) positive social-emotional skills (including social relationships); (b) acquisition and use of knowledge and skills (including early language/communication [and early literacy\*]); (c) use of appropriate behavior to meet needs.

**Child Observation Data Recording Form** -This Developmental Assessment data form collects and provides early intervention programs, evaluators, and families with a comprehensive and visualized understanding of their infant/toddlers present levels of functioning in the following developmental domains: fine motor, gross motor, adaptive, cognitive, social-communication, and social-interaction.

**Criterion-Reference Assessment** - Assessments are designed to measure a child's performance against a fixed set of predetermined criteria or learning standards—i.e., concise, written descriptions of what children are expected to know and be able to do at a specific stage of their development

**Curriculum-based Assessment** - A method evaluators use to find out where children start and how they are progressing in the five domains of development

**Date of Entry** - The date the Strong Start referral is submitted to the Child Find Intake Team

**Date of Electing Extended Option** – The date the extended option IFSP takes place

**Date of Eligibility Determination** – The date of the IFSP

**Date Part B Eligibility Received** – The date the Part B eligibility was sent to the Service Coordinator

**Date Extended Option Consent Revoked** – The date the parent/guardian/educational decision-maker signs the Intent to Terminate Extended option form

**Date of First Session** – The first date of service delivery

**End Date of Service** – The last date of service delivery

**Developmental Assessment** -Section § 303.321 of the IDEA Part C regulations defines developmental assessment, and requires that all evaluations and assessments of the child and Parent/Guardian must be conducted in a nondiscriminatory manner, in the native language of the child and Parent/Guardian by a multidisciplinary team. An assessment of each infant/toddler must identify the child's unique developmental strengths and needs and the early intervention services appropriate to meet those needs. The assessment must include: a review of the results of the evaluation, personal observations of the child, identification of the child's needs in each developmental area in § 303.21 (a) (1), and be based on information obtained through an assessment tool and also through an interview with the family members who elect to participate.

**Developmental Domains** - There are 5 developmental domains in early childhood: cognitive, physical (fine/gross), communication, social/emotional, and adaptive development. Knowledge of both typical and atypical development is vital for evaluators/assessors in early intervention. It is also vital that this information is accurately and appropriately relayed to families in the appropriate language and literacy levels. Familiarity with the vocabulary/terminology used by physical therapists, speech and language pathologists, occupational therapists, and special instructors (hearing/vision/developmental/behavior) is imperative for any interpreter/translator providing interpretation/translation services for early intervention families. In addition to therapeutic vernacular, the interpreter/translator must be familiar with medical terminology as relates to early childhood disorders and genetic conditions, which many eligible early intervention families are themselves striving to understand and process.

**Eligibility Criteria** – Children evaluated by an Authorized Evaluation Provider must have a 25% delay in 1 area to be eligible for the Strong Start Early Intervention Program

**Evaluation** - the procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility under 34 C.F.R. Part 303.322, consistent with the definition of "infants and toddlers with disabilities" in 34 C.F.R. Part 303.16; this includes determining the status of the child in each of the following developmental areas: cognitive, physical (including vision and hearing), communication, social or emotional, and adaptive development.

**Family Interview/RBI** – An interview conducted in person or by phone with the child's parent/guardian or primary caregiver to gather family, resources, medical and developmental information about the child being evaluated.

**HSCSN** – Health Services for Children with Special Needs

**Individualized Family Service Plan (IFSP)** – The service plan that identifies the outcomes and services for Part C eligible children

**Individuals with Disabilities in Education Act** - federal law that governs how states and public agencies provide early intervention, special education, and related services to children with disabilities. It addresses the educational needs of children with disabilities from birth to the age of 21. The IDEA is considered to be a civil rights law. The IDEA was most recently amended in 2004. In defining the purpose of special education, IDEA (2004) clarifies Congress' intended outcome for each child with a disability: students must be provided a Free Appropriate Public Education (FAPE) that prepares them for further education, employment and independent living.

**IFSP team** – team as defined in § 303.342, to include but not limited to: Service Coordinator, Family members, evaluation providers, and any current therapists.

**Qualified Personnel** – persons holding official credentials, accreditation registration, certification, or licenses issued by their jurisdiction. The term shall include administrators, dentists, dietitians, physical therapists, occupational therapists, professional nurses, physicians, speech pathologists,

audiologists, patient activity specialists, psychologists, professional counselors, and social workers.

**LEA** – Lead Education Agency

**MCO** – Managed Care Organization

**Medicaid Enrollment Termination** – Annually, individuals or their parent/guardian must certify their eligibility for Medicaid. If the person, parent, or guardian does not complete this process, their Medicaid services are terminated until they certify.

**Medicaid Recertification** – To recertify, families complete the Medicaid Recertification Form and present the following my mail, fax, or any Economic Services Administration site:

- Recertification Form
- Government issued photo ID
- Proof of citizenship (US Citizens only)
- 

**Missed timeline** – First date of service takes place after the maximum date required by law.

**Multidisciplinary** - the involvement of two or more disciplines or qualified personnel in the provision of integrated and coordinated services, including evaluation and assessment activities in § 303.322 and development of the IFSP in § 303.342.

**Natural Environment** – to the maximum extent appropriate to the needs of the child, early intervention services must be provided in natural environments, including the home and community settings in which children without disabilities participate.

**Natural Learning Environment Practices (NLEP)** – A set of principles that include evidenced based practices, interest-based learning, family routines, coaching interaction style, and the primary provider model.

**No Show** – A child does not appear for service delivery or the parent/guardian does not appear for a required meeting

**Part B of IDEA:** The section of IDEA that governs special education services for school-aged children.

**Primary Payer** – The party responsible for paying for the child’s evaluation and/or services

**Prior Written Notice** – Formal written notice of an upcoming meeting. The parent must receive this written notice no fewer than 5 days before the date of the meeting. If parents waive this right, they must initial and date indicating their waiver on the Prior Written Notice form



**Provider/Direct Service Agency** - a consultant, vendor, or contractor, of goods or services, who can be an individual, a partnership, non-profit entity, or a corporation that enters into a contract with the District.

**Parent/Guardian** – (1) natural or adoptive Parent/Guardian of a child; (2) A guardian; (3) A person acting in the place of a Parent/Guardian (such as a grandparent/Guardian or step-parent/Guardian with whom the child lives, or a person who is legally responsible for the child's welfare); or (4) A surrogate Parent/Guardian who has been assigned in accordance with § 303.406. (b) Foster Parent/Guardian. Unless State law prohibits a foster Parent/Guardian from acting as a Parent/Guardian, a State may allow a foster Parent/Guardian to act as a Parent/Guardian under Part C of the Act if— (1) The natural Parent/Guardians' authority to make the decisions required of Parent/Guardians under the Act has been extinguished under State law; and (2) The foster Parent/Guardian— (i) Has an ongoing, long-term Parent/Guardian relationship with the child; (ii) Is willing to make the decisions required of Parent/Guardians under the Act; and (iii) Has no interest that would conflict with the interests of the child

**Prior Written Notice** - Section §303.421 of the IDEA Part C regulations states that, prior written notice must be provided to Parent/Guardians within a reasonable time before the EIS provider proposes or refuses to initiate or change the identification, evaluation, or placement of their infant/toddler, or the provision of early intervention services to the infant/toddler with a disability and that infant's/toddler's family.

**Qualitative evidence-based criteria** - Programs comprised of a set of coordinated services/activities that demonstrate effectiveness based on research. Criteria for rating as such depend upon organization or agency doing the rankings. EBPs may incorporate a number of evidence-based practices in the delivery of services. Evidence-based practice is an approach, framework, collection of ideas or concepts, adopted principles and strategies supported by research.

**Referral/Initial Referral** – The referral sent to the Child Find Intake Team to open a case

**Reauthorization** – DC Medicaid MCOs issue a certain number of units that can be used during a certain period. Before those units expire, direct service provider companies request more units. If the IFSP is active, more units are authorized. If the IFSP is expired, a new IFSP (initial or annual) must be completed before more units are authorized.

**Referral Feedback Form** – The form used to notify the referral source of the status of the referral

**Service Provider** – one who provides services to eligible children and their families as described in the Individualized Family Service Plan (IFSP).

**Service Coordinator** – one who assists and enables eligible children and their families to receive their rights, procedural safeguards, and services that are authorized to be provided by DC EIP.

**Service Planning** – includes but is not limited to paper reviews, observations, and active participation during an IFSP meeting.

**Strong Start Child and Family Data System (SSFDS)** - The DC Early Intervention electric system of Record

**Strong Start Child and Family Data System (SSCFDS)** - The DC Early Intervention electric system of Record

**Supporting Documentation** – Any document that supports or substantiates a claim. Supporting documentation can include: A PDF of an email, an evaluation completed by a physician, hospital discharge documents, a letter sent to a family, etc.  
Therapist Supervisor

**Timely Service Delivery** – clients must receive indicated IFSPs services within 30 days of the date that the Parent/Guardian signs the IFSP.

**Transition Plan** – As part of the IFSP process, this plan must be developed after child is age two but before child's 3rd birthday and must include services and procedures to support smooth transition of the child to preschool or other appropriate community services.

**Transdisciplinary Evaluation Team** - are unique to the field of early intervention (Briggs, 1997). The trans-disciplinary approach is fundamentally different from the multidisciplinary and interdisciplinary approaches. The foundation of the transdisciplinary team is collaboration. One assessment is performed by the team and one integrated report is written by the team. The approach is family centered. It maximizes the participation of family members and minimizes inconvenience to families.

**Unit (Rate Unit)** – defined in 15 minute increments, 4 Units = 60 Minutes