

Early Intervention Program Overview



Welcome to the EI Partners Training Program!



Individuals with Disabilities Education Act (IDEA)

- IDEA is a federal program authorizing state and local aid for services for children with disabilities.
- The Early Intervention Program is a national program under Part C of IDEA.
- Established by Congress in 1986.

Part C of IDEA

The Early Intervention Program for Infants and Toddlers with Disabilities

Congress established the Part C (Early Intervention) program in 1986 in recognition of "an urgent and substantial need" to:

Enhance the development of infants and toddlers with disabilities

Reduce educational costs by minimizing the need for special education through early intervention

Minimize the likelihood of institutionalization, and maximize independent living

Enhance the capacity of families to meet their child's needs

NYS Department of Health

	<p>NYS DOH was designated as lead agency of the Early Intervention Program in 1987. The EIP is administered by the NYS DOH through the local county Health Departments or other designated county offices.</p>
	<p>In NYS, the EIP is established in Article 25 of the Public Health Law.</p>
	<p>NYS EIP has been operational since July 1, 1993</p>
	<p>Revised regulations became effective November 30, 2016.</p>

Early Intervention Program Mission

The mission of the Early Intervention Program is to identify and evaluate as early as possible those infants and toddlers whose healthy development is compromised and provide for appropriate intervention to improve child and family development.

- **Family-Centered**
- **Community-Based (Natural Environments)**
- **Coordinated Services**
- **Measurable Outcomes for Children & Families**

Cost of EI Services

There is no cost to families for EI Services. However, it is important for your service coordinator to obtain correct insurance coverage information in order to obtain any available reimbursement from

Medicaid

Private Insurance

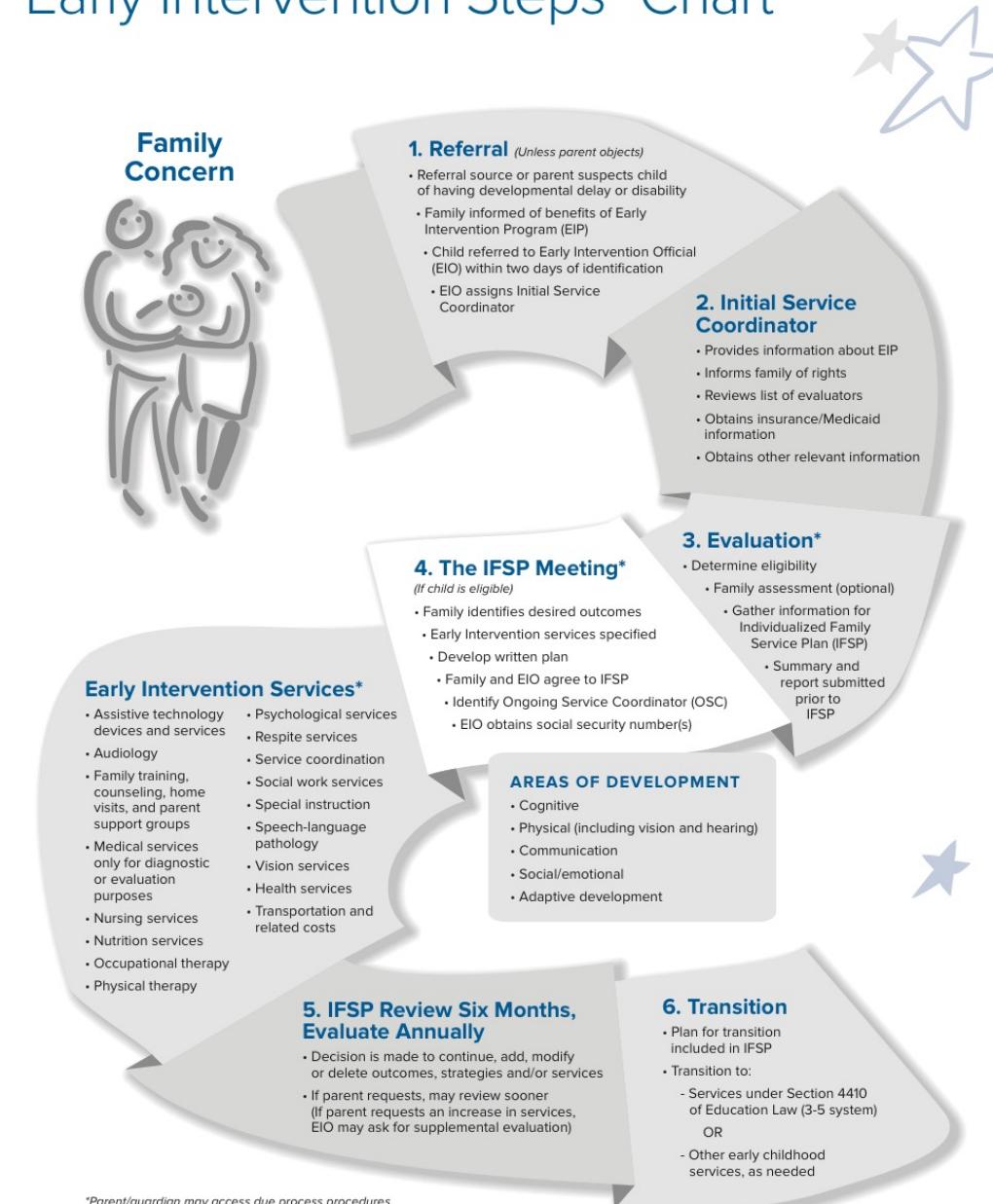
NYS DOH Child Health Plus

State DOH reimburses municipalities

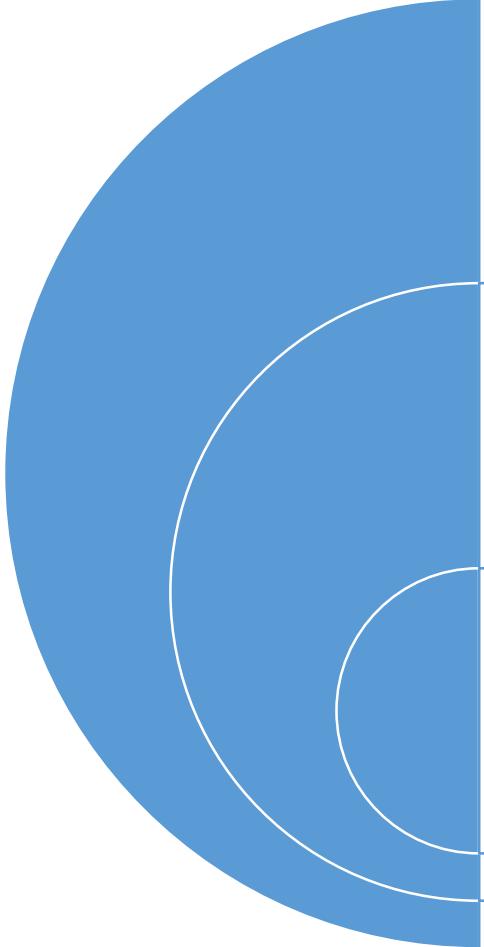
Early Intervention Official/Designee

The Early Intervention Program requires that each county/municipality have an Early Intervention Official (EIO) or an appropriate designee (Early Intervention Official Designee--EIOD).

“Early Intervention Steps” Chart



Step 1:Referral

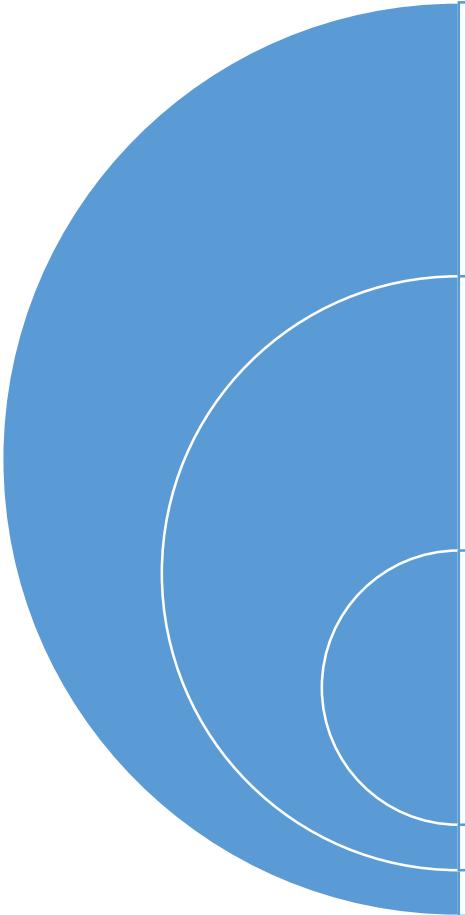


Professional (physician, nurse, etc.) or parent refers child to local Early Intervention Official

Child referred to Early Intervention Official (EIO) within 2 days of identification

EIO assigns Initial Service Coordinator

Step 1:Referral



Professional (physician, nurse, etc.) or parent refers child to local Early Intervention Official

Child referred to Early Intervention Official (EIO) within 2 days of identification

EIO assigns Initial Service Coordinator

Step 2 - Initial Service Coordinator

Review your family's rights and make sure you understand them

Talk with you about your child's evaluation and how this evaluation will determine eligibility

Give you a list of evaluators in your county and help you pick one that will meet your child's and family's needs

With your permission, help arrange for your child's evaluation

Inform you that, in NYS, EI services must be provided at no cost to your family. Insurance is used for reimbursement for EI services

Attend your child's evaluation if you wish

Help you arrange for transportation to your child's evaluation, if you need it

Help you understand what this meeting will be like, who else must be there, and who can be invited

Collect information and documentation about your child's insurance coverage, including public and private insurance

Step 2 - Initial Service Coordinator (If your child is eligible for services)

Answer your questions about the EIP

Set up a meeting to work on your Individualized Family Service Plan (IFSP)

Help you understand what this meeting will be like, who else must be there, and who can be invited

Explain how your health insurance can be used and that early intervention services will be at no cost to you

If your child is uninsured, the ISC is responsible for assisting you in identifying and applying for benefit programs for which your family may be eligible, however, you are not required to enroll in order for EIP services to be provided,

Obtain information about the status of your family's private insurance coverage and Medicaid status

Help you resolve any problems that might come up – including disagreements about the service(s) you and your child might need

Give you information on other programs and services which can help your family

With your consent, notify the appropriate OPWDD contact person of the potential eligibility of your child for OPWDD programs and services

Step 3: Evaluation

Multidisciplinary evaluation determines eligibility and includes:

- Health assessment (e.g., vision and hearing screening)
- Assessment of physical, cognitive, communication, social-emotional, and adaptive development
- May include a family assessment (optional)

Five Developmental Domains

- Cognitive—thinking, reasoning, learning
- Physical—fine motor, gross motor, vision, hearing, sensory;
- Communication - talking and understanding what others are saying; includes pre-linguistic behavior such as babbling, imitating sounds, and pointing;
- Social-Emotional—relating to others
- Adaptive (self-help skills)—sleeping, feeding, toileting, dressing

Eligibility

In NYS, children are eligible for the EIP if they are under three years of age and have:

- Diagnosed physical or mental condition – having a high probability of resulting in developmental delay; or
- 12 month delay in one or more functional areas; or,
- a 33% delay in one functional area or a 25% delay in each of two areas; or,
- if standardized instruments are used during the evaluation process, a score of at least 2 standard deviations below the mean in one functional area or a score of at least 1.5 standard deviations below the mean in each of two functional areas.

For children found to have a delay only in the communication domain, delay is defined as:

- Score of 2 standard deviations (SDs) below the mean in the area of communication; OR
- If no standardized test is available or appropriate for the child, OR the tests are inadequate to accurately represent the child's development in the *informed clinical opinion of the evaluator*, a delay in communication shall be a severe or marked regression in communication development

Family Assessment

(optional to family)

- Family directed and used to help your family determine the resources, priorities, and concerns you have related to caring for and enhancing your child's development
- Helps your family to think about what you need most from EI services and from other community services or supports which may be available to you.
- Summarizes your family's current resources.
- You decide what information from the voluntary family assessment should/can be included in the evaluation report, and what can be discussed later at your IFSP meeting.

The Individualized Family Service Plan (IFSP)

- **Individualized** – the plan is designed for your particular child and family
- **Family** – the plan is about your family and the outcomes you hope to reach for your child
- **Service** – the plan includes details about the when, who, how, and where of services
- **Plan** – the plan is written to be referred back to, with modifications as needed

The Initial Individualized Family Service Plan (IFSP) Meeting

If your child is eligible for the Early Intervention Program and you consent to proceed in the program, a meeting is held within 45 days of your child's referral to the EIP to discuss and develop the IFSP

- The IFSP meeting must be held at a time and place that is good for you and your family.

Who attends:

- You, your ISC, the Early Intervention Official (EIO) in your county, and member(s) of the evaluation (MDE) team
- You can invite others to attend the IFSP meeting
- Your ISC can invite others to take part in the meeting, with your consent,
- You, your ISC, your child's evaluators, and your EIO will review the information and will decide together how the EIP will help your child and family.

Step 4: Individualized Family Service Plan (IFSP) Meeting

**If eligible, the EIO/D convenes an IFSP meeting within 45 days
of the child's referral to EIP**

- With Parental consent your family's resources, priorities and concerns related to your child's development will be discussed,
- You will help to identify outcomes (improvements you would like to see in your child's development) for your child and family,
- Strategies, activities, and services that will lead to the outcomes you hope to reach will be developed and written on the plan,
- Your need for respite services will be discussed
- To include a service in your IFSP, you and all members of the IFSP team must agree to the service,
- You may accept or decline any EI service without jeopardizing your child's right to receive any of the other EI services identified in the IFSP.

Step 4: IFSP (cont'd.)

Your family's IFSP will include the following information:

- A statement of your child's current level of functioning,
- With your permission, a statement of your family's resources, priorities, and concerns,
- A statement of the measurable outcomes expected to be achieved for your child and family that also includes timelines.
- The criteria and procedures that will be used to determine whether progress toward achieving the outcomes is being made and whether modifications or revision of the outcomes or services are necessary.

Step 4: IFSP (cont'd.)

Your family's IFSP will include the following information:

- A statement of the EI services, including transportation, needed to meet your child's and family's needs,
- A statement on the frequency, intensity, and method of delivering services and the location of services
- A plan for when your child is in day care, and when needed, for EI service providers to train the day care staff to meet the needs of your child,
- A physician's, physician's assistant's or nurse practitioner's order or prescription for EI services that require an order/prescription from specific medical professionals,

Step 4: IFSP (cont'd.)

Your family's IFSP will include the following information:

- A statement about other services, including medical services that are needed by your child and family that are not provided or paid for by the EIP,
- The dates that services are expected to begin as soon as possible after the IFSP meeting, once you have signed the plan and given your permission,
- The name of the ongoing service coordinator who will help you to put the plan into action,
- The steps to help your child and family change to other services, including preschool special education services. In the EIP, this is called transition planning,
- A statement of the natural environments where EI services will be provided.

Natural Environments

Natural environment means settings that are natural or normal for the child's age peers who have no disability, including the home, a relative's home when care is delivered by the relative, child care setting, or other community setting in which children without disabilities participate.

Natural Environments are not just places for services like home and childcare, but the natural routines and activities the child does in those places.

Family-Centered Services

- Early intervention services should focus on the needs and supports of the family
- Parents provided with opportunities to participate during times that are convenient to them
- Respite services (temporary child care) are available to families of children with disabilities

Early Intervention Services

- Assistive Technology
- Devices and Services
- Audiology Services
- Family Training,
- Counseling, Parent Support Groups
- Medical Services for Diagnostic/Evaluation Purposes
- Nursing Services
- Nutrition Services
- Occupational Therapy
- Physical Therapy
- Psychological Services
- Service Coordination
- Special Instruction
- Speech-Language Pathology
- Social Work Services
- Specific Health Services
- Transportation and Related Costs
- Vision Services

Ongoing Service Coordinator

Organizes and assists in the development, review, and evaluation of the IFSP

Assists families with identifying available service providers

Coordinates and monitors the delivery of services

Coordinates the performance of evaluations and assessments

Informs families about the availability of advocacy services

Coordinates with medical and health care providers

Assists families with the development and implementation of a transition plan

Updates family insurance information as needed

Step 5: Review IFSP

- The IFSP is reviewed every six months to continue, add, modify, or delete outcomes, strategies, and/or services
- It may be reviewed sooner if the parent requests

Step 5: Review IFSP (cont'd.)

- Determining ongoing eligibility:
 - Purpose of a multidisciplinary evaluation is to determine initial and continuing eligibility
 - Must be approved/requested by the EIO
 - Must have parental consent
- An evaluation should be performed when the child has made substantial progress
- Parent can select the evaluator

External Evaluations

The EIO, may request a supplemental evaluation by an approved provider when a parent requests an increase in services more frequently than the six month review of the IFSP, or a modification of the IFSP at any time, on the basis of "external evaluation" and recommendations and/or prescriptions.

Ongoing Assessment

With parental consent, certain evaluations and assessments may be requested or repeated:

- When an observable change in the child's development requires changes to the IFSP
- When the parent, EIO, SC, or service provider(s) requests a reassessment

A child may receive additional assessments when the EIO agrees to it.

Step 6: Transition

The EIP serves eligible children and their families from Birth to age 3.

At age 3, Children will leave the Early Intervention Program and move on to the next stage. This is called transition.

Children transition from the EIP:

- When they have progressed to the point where they no longer qualify for services
- The day before their third birthday if they have not been found eligible for preschool special education services (CPSE services under Section 4410 of the Education Law).
- to Preschool Special Education Programs or other appropriate early childhood services at or around age three

A child **MUST** transition from EIP on the day before his or her third birthday **UNLESS** the child has been determined to be eligible for services under Section 4410 of the Education Law

Transition

A transition plan is developed for every child who transitions from the Early Intervention Program to:

- Programs under the Section 4410 of the Education Law, or
- Other appropriate early childhood services

Transition

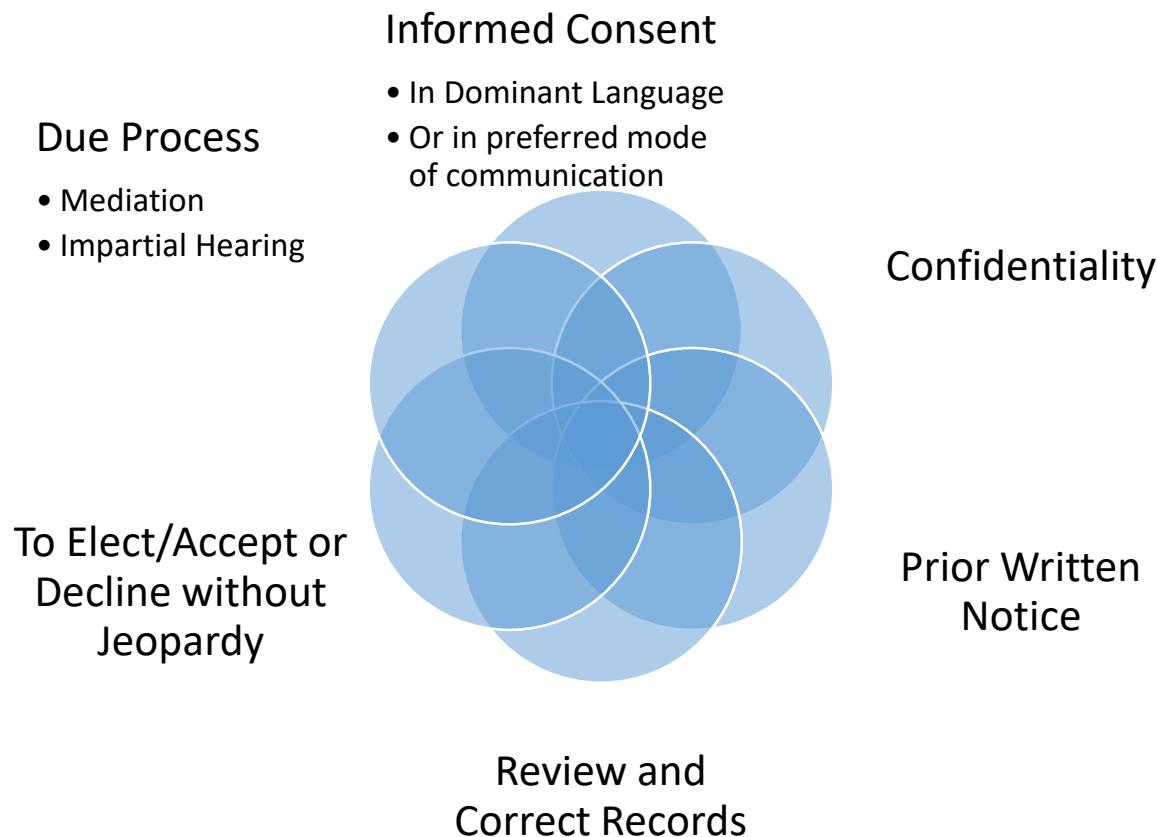
- ▶ For children who may be eligible for CPSE services, the service coordinator sends written notification to the school district 90 days before the child's potential eligibility, unless parent objects ("opts out")
- ▶ Transition Conference is convened at least 90 days before child is first eligible for CPSE services

Transition Timeline

Eligible children may start preschool special education services as they turn three:

- January—June 30, they can transition as early as January 2 in the year they turn three
- July 1—August 31, they can transition as early as July 1 in the year they turn three
- September—December 31, they can transition as early as July 1 in the year they turn three

Safeguarding Family Rights



Due Process

You also have the right to use due process procedures to settle disagreements or complaints about your child's eligibility for the EIP, or complaints about your child's EI services.

Mediation:

A voluntary and confidential way to work out disagreements and complaints you may have about your child's early intervention services through a mediator.

Impartial Hearing:

Impartial hearings are carried out by hearing officers who are fair and unbiased. The hearing officer has the power to decide requests made by either you or the EIO.

System Complaint:

A system complaint can be filed if you believe that your EIO, service coordinator, evaluator or service provider is not doing his or her job under the law.

A Parent's Basic Guide to the Early Intervention Program

<https://www.health.ny.gov/publications/0532.pdf>

New York State Department of Health

Bureau of Early Intervention

Empire State Plaza
Corning Tower, Room 287
Albany, New York 12237-0660
Phone: (518) 473-7016
Fax: (518) 486-1090
beipub@health.ny.gov

www.nyhealth.gov/community/infants_children/early_intervention/

WELCOME

Family Initiative Coordination Services Project
through a grant from the New York State Department of Health
Bureau of Early Intervention.

"Would you tell me, please, which way I ought to go from here?"

"That depends a good deal on where you want to get to," said the Cat.

"I don't much care where –" said Alice.

"Then it doesn't matter which way you go," said the Cat.

From Lewis Carroll's,
Alice in Wonderland



Agenda

- WELCOME
- OVERVIEW
- ORIENTATION/OVERVIEW OF THE NYS DOH EIP
- BEST PRACTICE AND THE IFSP PROCESS
- DEVELOPING MEANINGFUL IFSP OUTCOMES
- **BREAK**
- ACTIVITY
- DEBRIEF
- CLOSING REMARKS, WEBINAR EVALUATION FORMS

Ground Rules

- **LISTEN:** SIMPLY LISTEN CAREFULLY TO THE OTHER SPEAKERS AND TO YOUR OWN REACTIONS.
- **RESPECT:** ACCEPT THE VALIDITY OF ANOTHER POINT OF VIEW, EVEN IF YOU DISAGREE.
- **SUSPEND JUDGMENT:** CONSIDER THE POSSIBILITY THAT OTHERS MAY BE RIGHT OR HAVE AN APPROACH THAT YOU HAD NOT CONSIDERED.
- **SPEAK UP:** SHARE YOUR VIEWS FULLY AND HONESTLY WITH EVERYONE.

Questions and comments about

Pre- recorded Webinar

Early Intervention Program Overview



BEST PRACTICES & REGULATORY REQUIREMENTS

- **Family-centered services and supports**
- **Family Assessment**
- **Parent Interview**
- **Natural Environments**
 - **Everyday Routines, activities and places**

FAMILY CENTERED SERVICES

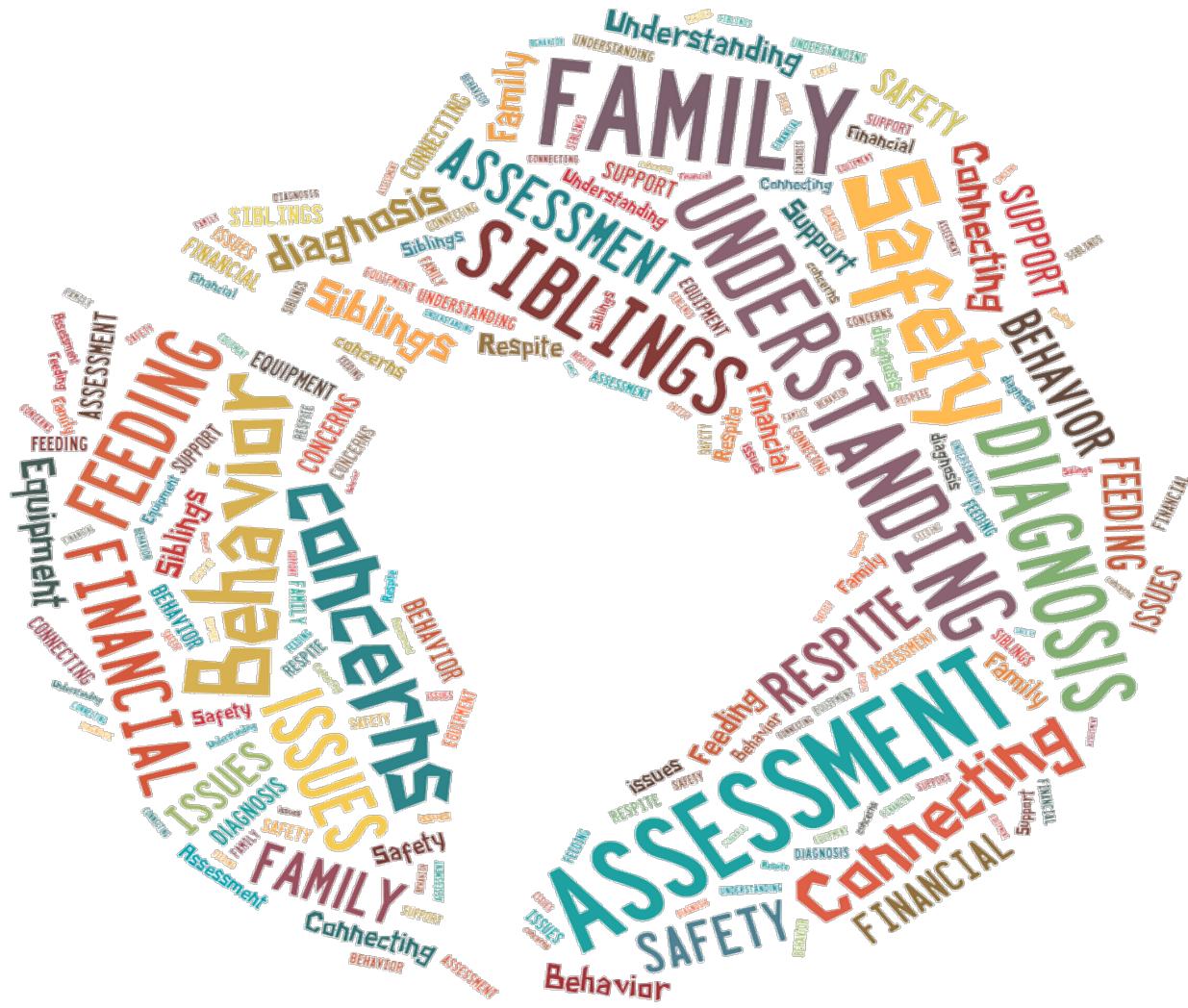
One of the primary goals of the New York State Early Intervention Program (EIP) is to be family-centered. EIP promises to provide support and services to a family, as well as their child with a disability, with services that respect a family's culture, their concerns, priorities and resources.

Family Centered Services

- Enhance development
- Reduce educational costs
- Maximize independence
- Enhance capacity of families
- Enhance capacity of communities

Family Assessment

CONCERNS
PRIORITIES
RESOURCES



WHAT IS FAMILY ASSESSMENT?

Concerns
Priorities
Resources

Voluntary
Optional to
the Parent

- Optional component of the Multidisciplinary Evaluation (MDE)
- Performed by qualified personnel
- Based on personal interview
- Family's concerns, priorities, resources
- Completed by IFSP Meeting: 45-days from referral

Family Assessment

Priorities

After thinking about your concerns and your typical day, what are your priorities?

Resources

- Strengths
- Abilities
- Formal and Informal Supports

What Is A Parent Interview?

Obtains information from your perspective as the child's parents, and with your (parent) consent, from other individuals familiar with your child's development, regarding concerns about your child's developmental status and progress.

Must be conducted as part of your child's multidisciplinary evaluation

Examples of Parent Interview Questions

- What activities do you and your child like to do (e.g., hiking, going on picnics, playing games at home)?
- What activities do you and your child have to do on a regular basis (e.g., go to the store, give kids a bath, prepare meals, walk the dog)?
- What are your child's interests?
- What makes your child happy, laugh and/or smile?
- What routines and/or activities does your child **not** like?
- What makes this routine and/or activity difficult and uncomfortable for your child?
- Is there a time of day that's not going well for you? What would you like help with? What supports would be helpful for you and your child? What have you thought about doing or trying?

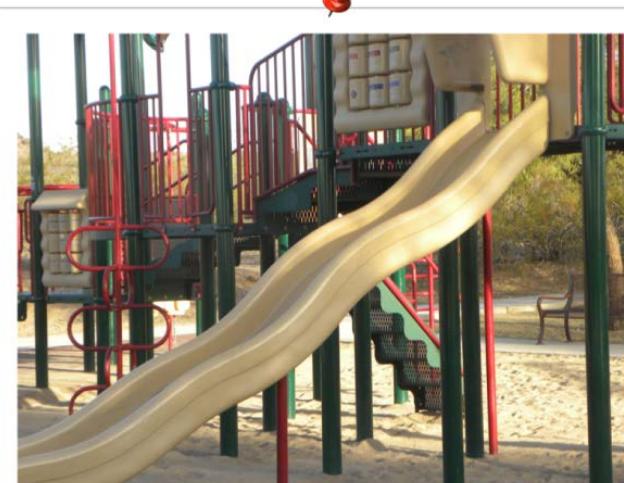
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Natural Environment

PEOPLE

PLACES

ACTIVITIES



NATURAL ENVIRONMENTS

Promotes Inclusion

“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.”

Sec. 303.12

IT'S THE LAW!

NATURAL ENVIRONMENTS

INDIVIDUALIZED

FAAMILY

SERVICE

PLAN

DEVELOPING MEANINGFUL IFSP OUTCOMES

IFSP outcomes are statements of the changes family members want to see for their child and themselves in relation to the child's development.

MEANINGFUL OUTCOMES

**KEY
QUESTIONS**

**WHAT WOULD YOU OR YOUR
CHILD BE DOING DIFFERENTLY?**

Playing

Shopping Meals

Communicating

Connect

Informed

IFSP OUTCOMES

- **BASED ON YOUR PRIORITIES**
- **WRITTEN IN CONTEXT OF ROUTINES**
- **DEVELOPED BY THE IFSP TEAM**
- **MEANINGFUL TO YOU AND YOUR FAMILY**
- **WORDED IN WAYS THAT ARE UNDERSTANDABLE BY FAMILIES**

OUTCOMES

NOT MEANINGFUL WHEN:

- They don't relate to your interests
- They limit the possibilities
- Identify many possibilities but no actions

5 MINUTE BREAK

Sample Family Priorities

- Getting around in our home.
- Being able to communicate.
- Being able eat by him/herself.
- Being able to play with his/her toys.
- Understanding potential Assistive Technology (AT) devices
- Understanding diagnosis



Questions Parents Should Be Asked

- **What would your child be doing differently?**
- **In which part of the day would having him/her be able to _____ help?**
- **More specifically what does it mean when you say that you want him/her to _____?**
- **How would you know that you have accomplished that?**

Important Concepts

- **Acquisition** means learning new skills.
- **Fluency** is the ability to perform a skill in a continuous or fluid way.
- **Generalization** means using learned skills or behaviors across different settings, people, times, activities, or materials.
- **Maintenance** is the ability to use the same skill over time.
- **Adaptation** refers to the child's ability to use elements of previously learned skills and adapt them to new demands and situations.

Using Information to Develop Outcomes

- 1) Start with your priorities about your child's learning/development and/or your family's needs
- 2) Consider what's working and what's challenging in everyday routines and activities
- 3) Consider how your child's developmental skills, needs and disability influence your child's learning and participation in everyday routines and activities

Before Developing Outcomes

Ask Yourself:

Why are we writing this outcome?

Is this outcome in context of activities that I/we *choose* to do?

Is this outcome written in language that I/we use and understand?

Does this outcome really matter to me/us?

During Outcome Development

Think about:

Behavior desired of your child.

Specific details that describe what the behavior should look like (how often, how long, etc.).

Routine or activity in which your child will use the behavior.

Conditions associated with the behavior/activity (adaptations, assistance, guidance, etc.).

Evaluate Your Outcomes

Determine if the outcome:

- **is necessary and functional for your child's and family's life.**
- **reflects real-life settings.**
- **integrates developmental domains and is discipline-free.**
- **is jargon-free, clear and simple.**
- **emphasizes the positive, not the negative.**
- **uses active words rather than passive words.**

Examples

This	Not This	Why?
Sam will participate in dinner by sitting in his chair and eating his food with reminders from mom or dad.	Sam will behave appropriately during dinner.	Lacks specificity for demonstrating the behavior.
Francisco will participate in meals, play time, and music by pointing to the item he wants to eat, drink, play with, or sing about when he is given two choices.	Francisco will communicate preferences by pointing when presented with two items.	Lacks the routines affected by the outcome. Includes what could be considered, for some families, professional jargon.
Josie will participate in meals by drinking from a cup without a lid.	Josie will drink from a cup.	Lacks the routines affected by the skill. Conditions not specified: What kind of cup should Josie drink from?

Elements of Outcome Statements

Behavior:

Feed self with a spoon.

Specific details:

Eat a half bowl of cereal by himself

Routine or activity:

During breakfast at the kitchen table

Conditions:

in his highchair with tray and adapted spoon with verbal prompts, but no physical guidance.



Sample Outcome

Jesse will use a spoon to eat a half bowl of cereal and milk at the breakfast table with verbal reminders, if necessary, but no physical help



Sample Outcome Statements

Getting around in our home.

When they get home from grocery shopping Shauniqa will walk up the driveway by herself.

Being able to communicate.

When his father leaves for work in the morning Michael will say bye-bye.



Sample Outcome Statements (cont'd)

Being able to eat by him/herself.

During snack time at the child care center,
Maria will use her fingers to eat cheerios.

Being able to play with his/her toys.

While his mother is making dinner Anton
will play on the floor in the kitchen with his
pop-up toy by himself.



GROUP ACTIVITY

OUTCOMES



1. ALL CHILDREN ARE UNIQUE, WITH THEIR INDIVIDUAL STRENGTHS AND TALENTS. THE PRESENCE OF A DISABILITY OR SPECIAL NEED IS NOT THE DEFINING CHARACTERISTIC OF ANY CHILD.
2. CHILDREN GROW AND DEVELOP IN THE CONTEXT OF RELATIONSHIPS WITH THEIR FAMILIES AND OTHER CAREGIVERS.
3. ALL CHILDREN HAVE THE RIGHT TO BELONG, TO BE WELCOMED, AND TO PARTICIPATE FULLY IN THE TYPICAL PLACES AND ACTIVITIES OF THEIR COMMUNITIES.
4. CHILDREN WITH AND WITHOUT SPECIAL NEEDS LEARN IMPORTANT THINGS FROM ONE ANOTHER.
5. EVERYDAY ROUTINES, ACTIVITIES, AND PLACES OFFER COUNTLESS OPPORTUNITIES FOR CHILDREN TO LEARN AND DEVELOP.
6. THE LIVES OF FAMILIES ARE ENHANCED WHEN THEY ARE SUCCESSFUL IN MAINTAINING THEIR EVERYDAY LIVES AND RELATIONSHIPS.

DISCUSSION

Q & A

"Would you tell me, please, which way I ought to go from here?"

"That depends a good deal on where you want to get to," said the Cat.

"I don't much care where –" said Alice.

"Then it doesn't matter which way you go," said the Cat.

From Lewis Carroll's,
Alice in Wonderland



EVALUATION

YOUR FEEDBACK IS APPRECIATED



(I will Place link to survey here)

PARENT RESOURCES

- Early Childhood Direction Center (ECDC)
<http://www.p12.nysed.gov/specialed/techassist/ecdc/locations.htm>
- Parent Training and Information Centers (PTIC)

New York Region 1 PTIC Collaborative
<http://www.advocatesforchildren.org/node/932>
 - [IncludeNYC](#),
 - [Sinergia](#),
 - [Long Island Advocacy Center](#)
New York Region 2 PTIC Collaborative
<http://www.parentcenterhub.org/find-your-center/>
 - <http://www.starbridgeinc.org/>
- NYS Special Education Parent Centers
<http://www.p12.nysed.gov/specialed/techassist/parentcenters.htm>
- Parent to Parent NYS
<http://parenttoparentnys.org/site/>

LINKS TO IMPORTANT INFORMATION

- Municipal/County Contacts for the Early Intervention Program
https://www.health.ny.gov/community/infants_children/early_intervention/county_eip.htm
- Parent's Questions and Answers
https://www.health.ny.gov/community/infants_children/early_intervention/parents_questions_and_answers.htm
- Working with your IFSP Team – Important information for Parents
<https://www.health.ny.gov/publications/4856.pdf>
- Early Intervention Program – A Parent's Guide
<https://www.health.ny.gov/publications/0532.pdf>
- Flyer - Early Help Makes a difference
<https://www.health.ny.gov/publications/0527.pdf>
<https://www.health.ny.gov/publications/0528.pdf> (Spanish)
- Transition Calculator
<http://www.p12.nysed.gov/specialed/preschool/transitioncalculator.htm>

THANK YOU!

Family Initiative Coordination Services Project



Information about Early Intervention Councils

Early Intervention Councils

- **State Level Council**

Early Intervention Coordinating Council (EICC)

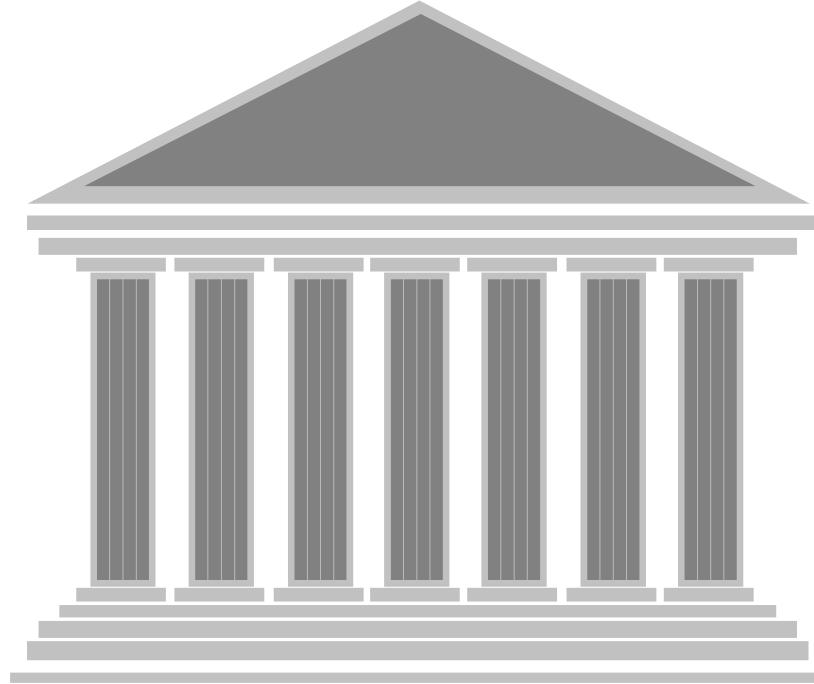
- **Local (Municipal/County) Level Councils**

Local Early Intervention Coordinating Council
(LEICC)



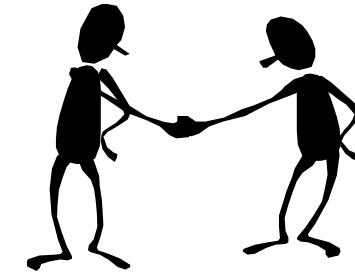
Handouts

- 2 Information Sheets
 - The NY State Early Intervention Coordinating Council(EICC) & Standing Committees
 - The Local Early Intervention Coordinating Council(LEICC)
- Section 69-4.13 of the New York State Early Intervention Regulations
- Copy of Presentation Overheads

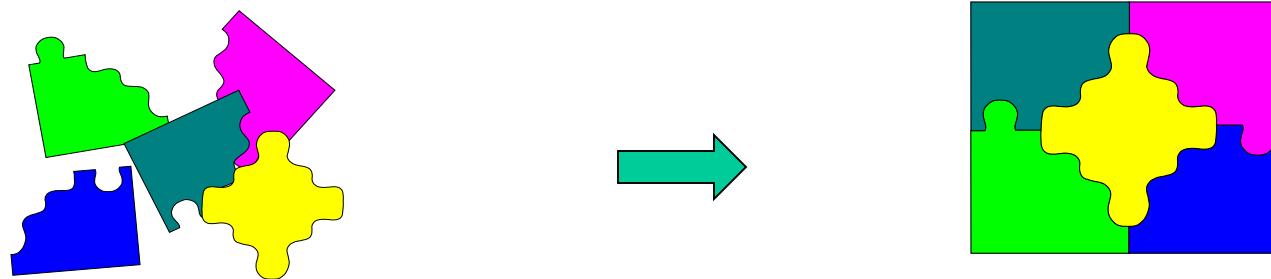


A State Interagency Coordinating Council
is required by federal law

New York State Supports Interagency Collaboration



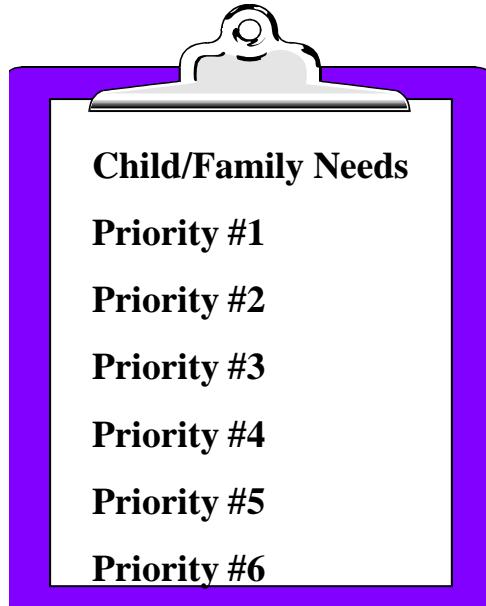
The early intervention system is a complex and complicated service system. Ongoing collaboration among participating agencies helps to prevent fragmentation.



When designing a system that would *work* well for families collaboration was seen as a vital component.

Why do we need an Interagency Coordinating Council?

One agency, organization, program or discipline can not accommodate all of the diverse needs of infants and toddlers with special needs and their families



What does the Early Intervention Coordinating Council(EICC) do?

Advises & Assists
the New York State Department of Health
Early Intervention Program
with its responsibilities
as the **lead** agency

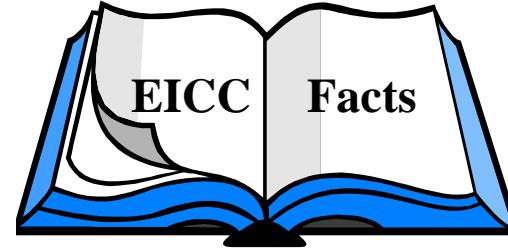


for the Early Intervention Program

What does the EICC advise and assist the Department of Health about?

- Identifying the sources of financial support for EI services and programs
- Enhancing Transition procedures
- Identifying barriers to timely & effective service delivery
- Developing coordinated standards & procedures with other state EI service agencies
- Preparing & submitting an annual report to the Governor and legislature on the status of the EIP⁸

More EICC facts



- Who appoints members to the EICC?
- Is the EICC required to have certain membership?
- Can anyone attend an EICC meeting?
- How often does the EICC meet?
- Does the EICC have reporting responsibilities?

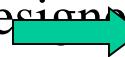
Local Early Intervention Coordinating Councils

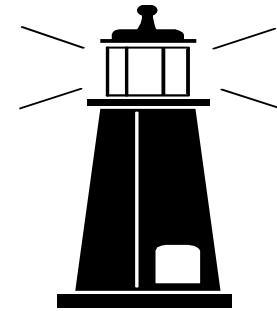


- Some states decided to go one step further and require local councils on the county or municipal level.
- NYS is a state that has made a commitment to collaboration among the stakeholders by establishing a requirement in law & regulation that each municipality have a Local Early Intervention Coordinating Council(LEICC).

LEICC Membership Requirements

- The chief executive officer or their designee of the municipality's
 - department of social services
 - department of health and mental hygiene.
- A representative from the local Developmental Disabilities Services Office(DDSO).
- A representative from one or more Committees on Preschool Special Education(CPSE) of local school districts in the municipality.



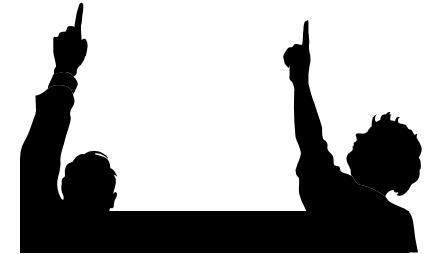


The Role of the LEICC

The Local Early Intervention Coordinating Council (LEICC) advises and assists the county/municipality's Early Intervention Official(EIO) regarding the following:

- * the planning for, delivery, and evaluation of early intervention services for eligible children and their families, including identifying gaps in services;
- * the identification of service delivery reforms necessary to promote the availability of early intervention services within natural environments;
- * the coordination of public and private agencies;
- * other matters relating to early intervention policies and procedures within the municipality as are brought to its attention by parents, providers, public agencies, or others.

Frequently Asked Questions



- How often does the LEICC meet?
- Can anyone attend an LEICC meeting or must you be a member to attend?
- Does the LEICC have reporting requirements?
- How can I find out more about the LEICC in my county?



Learning more about *your* municipality's LEICC

Questions you may want to ask:

- Does your LEICC have a mission statement?
- What priority areas are being addressed at the present?
- Are there specific subcommittees/work groups?
- How often & where does the LEICC meet?
- When is the next LEICC meeting?
- How can I receive meeting notices/minutes?
- How can I become involved?
- Is there support for parent member participation?

Welcome!

Early Intervention Partners

Session Goals: Friday

1. To discuss family experiences in the Early Intervention Program with a public policymaker.
2. To review the opportunities for parent leadership in the Early Intervention program in the Downstate region.
3. To outline the leadership goals defined by each participant.

Partners: Leadership Quest

- GOAL: The goal of this session is to interview each of the individuals in the group.
- PROCESS: You will be working in a series of pairs. Each pair will meet for one two minute period. When the facilitator rings the bell, check off the name of the person that you just spoke with. Then find a different person on your list to chat with. The facilitator will ring the bell when the next conversation should begin.

Partners: Leadership Quest

- **TASK:** The goal of each two-minute conversation is for both people to leave the chat with a clear sense of:
 - The name of the person they've met
 - Some new information about the person's child or children that is important to share;
 - One example of leadership that each person observed since the last session? (something you did, something you saw others do, something you read about, saw in a movie or on TV, etc.

Discussions with Early Intervention Officials

- What is the role of the EIO?
- What area is served?
- What are the challenging issues for the area?
- What are the leadership opportunities for parents?
- What are other opportunities for parent involvement?

Individual Leadership Goal

Early Intervention Partners Training Project

Practical Vision Statement...

- My commitment as a parent leader is inspired by...
 - What do you hope for?
 - What do you value?
 - What can you do to put these hopes and values into practice?

Examples

- Forming a Parent Support Group
- Obtaining accessible playground equipment for a community location (park, school, etc.)
- Speaking at a local college about parent experiences
- Starting a playgroup
- Increasing opportunities for family support programs (e.g. respite)

Developing an Individual Leadership Goal

- Decide what actions to take;
- Identify and obtain the resources that you need;
- Determine others who need to be involved.

An Individual Leadership Goal ...

- Can be achieved within a three month timeframe;
- Is something you can accomplish;
- Addresses issues or concerns that are important to you;
- Benefits children and families in the early intervention program;
- Can be a team effort, (e.g., starting a support group, working on public awareness activities, etc.)

Questions to Ask Yourself

- Is your goal:
 - specific?
 - realistic?
 - stated positively?
- Have you written it on the goal worksheet?
- Is this your goal, or does it really belong to someone else?
- Is the goal something that means something to you?
- Does the goal challenge you?
- Can you explain how you will know that you have reached your goal?

Leadership Web Page

Your task:
To design a web page
that captures the overall
vision and key goals of
each of your group
member's leadership
project.

Leadership Web Page

- 1.** Appoint a scribe.
- 2.** Each member describes leadership project
- 3.** Group decides:
 - Name of page
 - Overall theme (what holds it together?)
 - Links to individual projects

Welcome!

Early Intervention Partners Session –

Session Goals: Saturday

1. To review the opportunities for parent leadership in the Early Intervention program in the Downstate region.

Partners: Leadership Wordsmiths

- GOAL: To clarify how our group views parent leadership.
- WHAT YOU WILL NEED:
 - Each table will need
 - markers,
 - chart paper, and
 - a set of post-it notes.

Partners: Leadership Wordsmiths

- **TASK:** Select a scribe for the group. As a group your task is to come up with one statement which reflects a key belief or observation about leadership. You have five minutes to craft a statement that accurately conveys the perspective of all of the members of your group.
- **PROCESS:** Use chart paper to draft your leadership statement together. Once you've finished drafting, write the finished leadership statement on the chart paper labelled "Final Statements." The facilitator will then reorganize the groups.

Part C: History

- 1986: Individuals with Disabilities Education Act (IDEA) was amended by Congress
- New part (now known as Part C), added to address early intervention for children birth to three with disabilities and their families.

Part C: Purposes

- ❖ require states to establish early intervention as a system of services to support children and families;
- ❖ encourage states to tailor services and supports individually for a child and family to address developmental, social, and therapeutic needs of the child, as well as the needs of the family in order to enhance the child's development;
- ❖ support children in their families, in their homes and in the communities where they live; and
- ❖ assure that all Part C services help a child or family achieve specific, practical results in these natural environments.

Part C: Features

- ❖ Families, service providers, and policymakers have focused much attention on this provision.
- ❖ Because early intervention services are family-centered and seek to address family issues in a holistic model, people have had to examine and adjust the way they work in partnership with families and professionals.
- ❖ The provision of services in natural environments has encouraged many promising practices, as well as raised challenges and questions for both families and service systems.

Natural Environments: Policy Definitions

The term *natural environments* is found in the text of P.L. 108-106, the Individuals with Disabilities Education Act (IDEA) Amendments of 2004, under Part C:

Natural Environments: Policy Definitions

634(4)

The term early intervention services means developmental services that...

(g) To the maximum extent possible, are provided in natural environments, including the home, and community settings in which children without disabilities participate...

Natural Environments: Policy Definitions

Proposed regulation

Sec. 303.126 Natural environments.

Natural environments means settings that are natural or normal for an infant or toddler without a disability...

Natural Environments in IDEA: Other Provisions

635(16) Policies and procedures to ensure...
that

- (a) To the maximum extent appropriate, early intervention services are provided in natural environments; and
- (b) The provision of early intervention services ...occurs in a setting other than a natural environment that are most appropriate... only when early intervention services cannot be achieved satisfactorily... in a natural environment.

Natural Environments Guidelines:

The following are a few of the many questions which can serve as a guide in determining if a particular setting or opportunity is a natural environment for a particular child.

If the answer to the questions is YES, the activity is usually considered to be in a natural environment...

- ❖ Is the support or service a part of the child's and family's day to day routine (at home, at child care, at a community location)?
- ❖ Is the activity accessible and available to all young children in the community?
- ❖ **Are there other children involved from the child's community, neighborhood, or other circle of friends?**
- ❖ **Would the family have chosen this activity as part of their routine if their child did not have a disability?**

Natural Environments Guidelines:

The following are a few of the many questions which can serve as a guide in determining if a particular setting or opportunity is a natural environment for a particular child.

If the answer to the questions is YES, the activity might NOT be in a natural environment...

- Is the service provided in a special education or disability related environment?
 - Do most of the other children involved have IFSPs or are they mostly siblings of children who have IFSPs?
- Is the activity separate or different from whatever activity a typical child in the community is involved in?
 - Is the activity primarily designed for children who have disabilities?

HISTORY OF THE DISABILITY MOVEMENT

Early Intervention Partners Training Project
Session II

INTRODUCTION

The history of the disability movement, and the laws and regulations that resulted from those efforts.

WHERE'S MOLLY?

Video and Group Activity

- Video would be here, but too large to email ppt with it attached, I will send in separate email

DISCUSSION QUESTIONS

- What struck you most about the film? What values did you see?
- What didn't you know or ever think about?
- What was the role of parents? Siblings? Community (other family members, friends, etc.)? Professionals?
- What did professionals believe?
- What services were available? How did society treat children/adults with disabilities?
- How does this compare to your own experiences since the birth of your child with special needs?

THOUGHT POINTS

Policies” are shaped and changed over time by society’s values and attitudes towards disabilities, the role and responsibilities of parents, and beliefs about children.

We know from research that our values have been formed by the time we are eighteen years old. We also know that only a major life event can cause us to change our values once they have been formed.

THOUGHT POINTS

Families are the constant and a powerful influence in the lives of children; this is the foundation upon which the early intervention program focuses its efforts to support families to care for their young children with disabilities.

THOUGHT POINTS

Culture has a critical role in shaping values, attitudes and beliefs, and we need to ensure that as parent leaders we advocate for policies, services and supports that recognize and respect cultural differences.

TIMELINE

History of the Parent and Disability Movement

	1930s-1940s	1950 – 1960s	1970s	1980s	1990s	2000+
Major Federal Legislation	<p>1935 - Social Security Act (Title V) Impact: • 1st official acknowledgement of federal responsibility for children's welfare • Maternal & Child Health Services targeted to provide better pre- & post-natal care</p>	<p>1968-PL 90-538 (HCEAA) Impact: Funded model demonstration programs for disabled infants/preschoolers/parents; this was the foundation of today's Early Intervention (EI) programs</p>	<p>1975-PL 94-142 (reauthorized in '78, '83, '86, '90, '97, 2003) Impact: Established the legal right to a free & appropriate public education (FAPE) for all children regardless of their disability • EHA — IDEA</p>	<p>1986-PL 99-457, Part H (Part C) Impact: • Gave states incentive to create a state-wide comprehensive system of EI; resulted in passage of NYS EIP law/reg • Minimum standards set by Federal Gov't.</p>	<p>Americans with Disabilities Act (ADA) Impact: A significant civil rights act for people with disabilities. Required public accessibility, e.g., curb cuts, ramps, elevators, lifts on busses & more</p>	<p>Individuals with Disabilities Education Improvement Act of 2004, Public Law 108-446^[1] Impact: Not yet known.</p>
Parent Role's	<p>Permission needed to visit children in institution Parents as organization members, e.g. United Cerebral Palsy Association - 1949 Passive role for parents</p>	<p>Parent allowed to visit child in hospital for one hour a day Parents as service developers</p>	<p>Parents as recipients of professional decision-making Parents as political advocates (PARC)</p>	<p>Early Childhood focus on parents as effective teachers of their children: Train-the-Parent</p>	<p>Families as equal members of the team Families as experts Families as partners with professionals</p>	<p>Professionals listen and ask about my concerns and priorities for my child</p>
Values & Attitudes	<p>Segregation Institutionalization Isolation Stigma; Shame; Secret Parents are cause of disability</p>	<p>"Bad Blood" Parents unrealistic Don't challenge— Professionals know what is best.</p>	<p>Services available in segregated settings No one tells me about services available Independence Equality FAPE</p>	<p>Partnerships Families as a social system</p>	<p>Family-centered practices Strengths-based systems of care Place the person before the disability</p>	<p>Natural Environments Cultural Competence Accountability Measurable Outcomes Family Engagement</p>

Source: Meisels, S.J. & Shonkoff, J.P. (1990). *Handbook of early childhood intervention*. NY: Cambridge University Press.

A PICTURE TIMELINE

A Historical Perspective of Services for Children
and Adults with Disabilities

Syracuse State Institution for
Feeble Minded Children, Syracuse, N. Y.



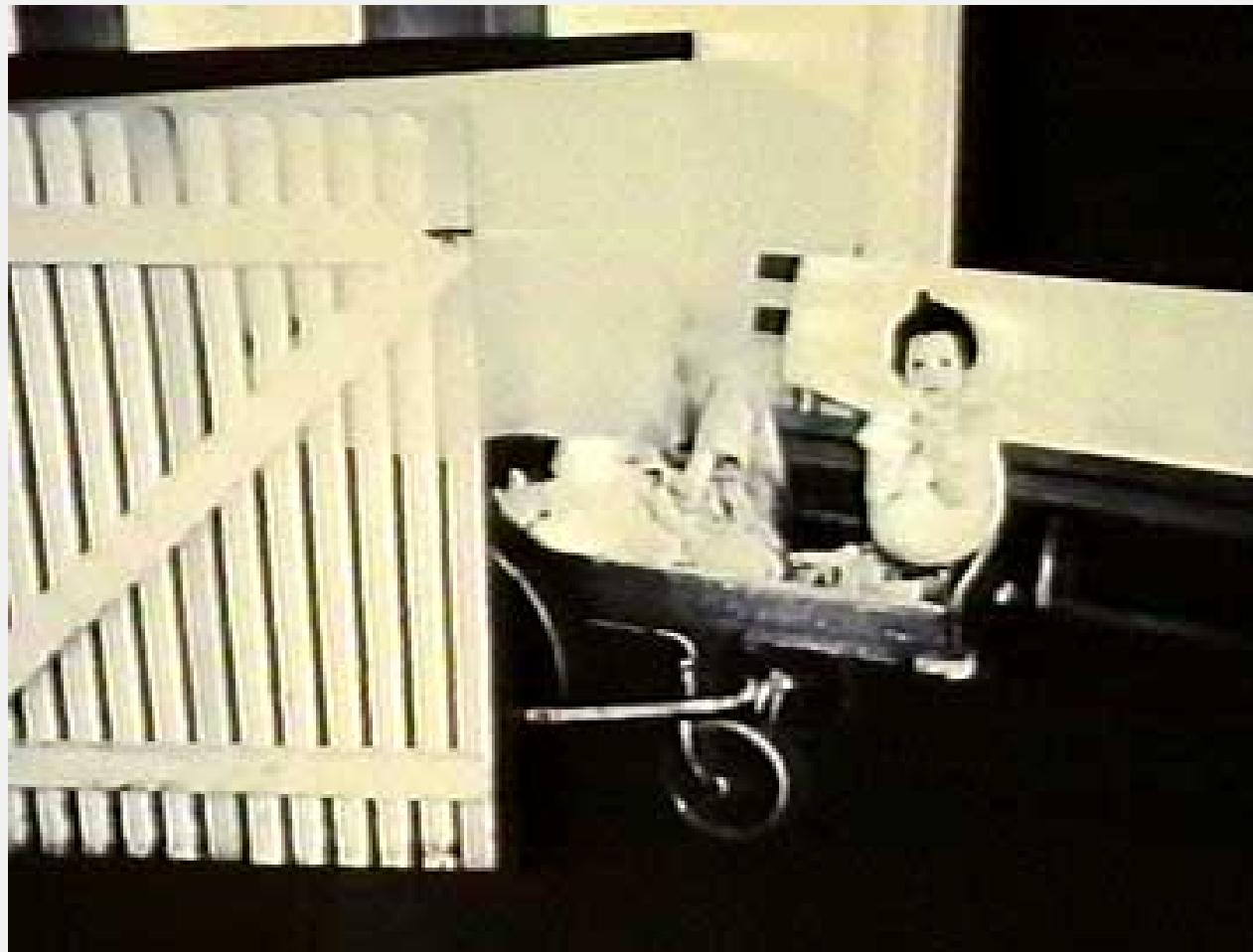
SYRACUSE STATE INSTITUTION FOR FEEBLE MINDED CHILDREN

[HTTP://WWW.PEOPLE-INC.ORG/MUSEUM/EXHIBITS/INDEX.HTML](http://WWW.PEOPLE-INC.ORG/MUSEUM/EXHIBITS/INDEX.HTML)

Willowbrook



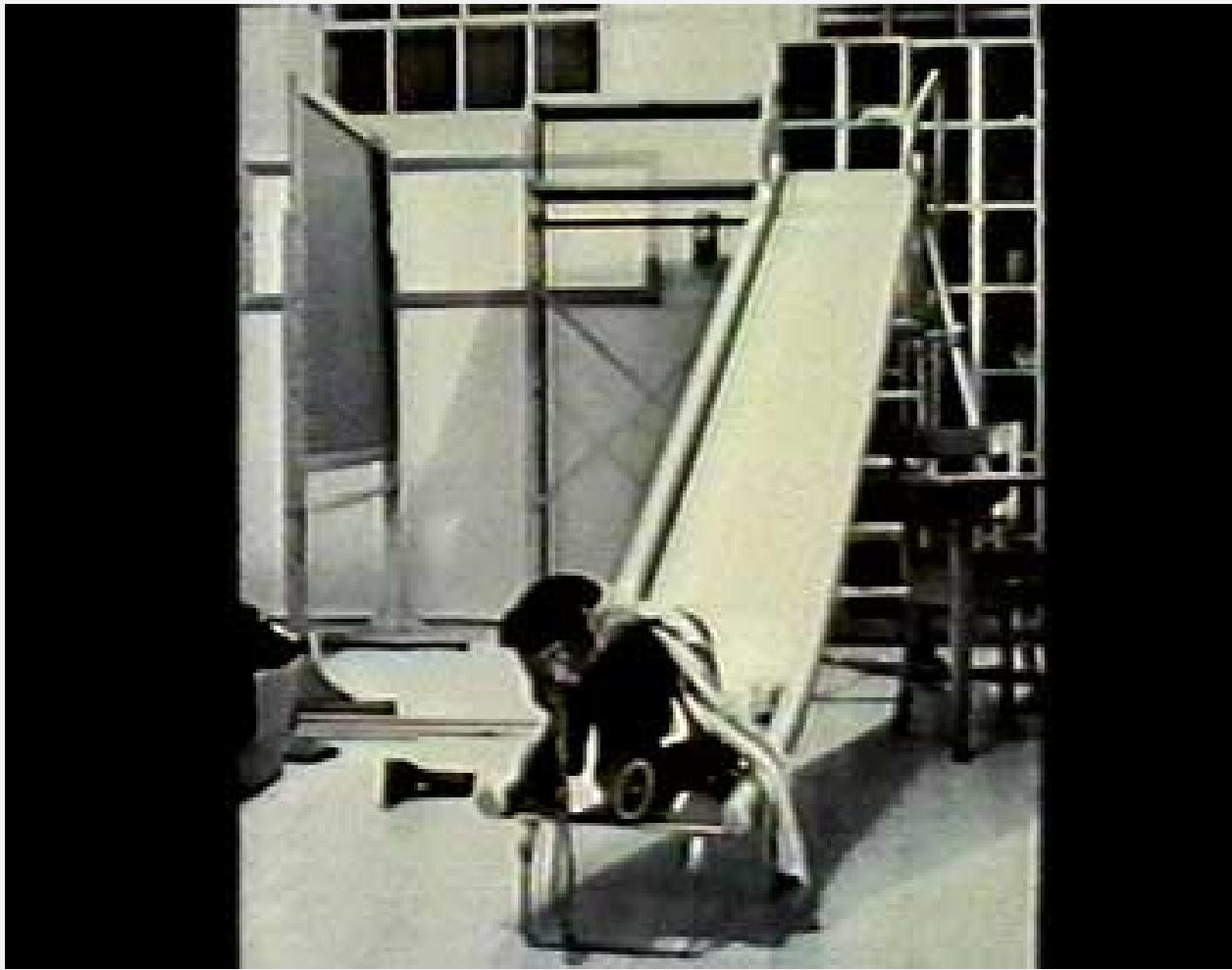
INSTITUTIONAL LIFE



INSTITUTIONAL LIFE



DESPAIR



Individual Leadership Goal

Early Intervention Partners
Training Project

Developing an Individual Leadership Goal

- ▶ Decide what actions to take;
- ▶ Identify and obtain the resources that you need;
- ▶ Determine others who need to be involved.

An Individual Leadership Goal:

- ▶ Can be achieved within a three month timeframe;
- ▶ Is something you can accomplish;
- ▶ Addresses issues or concerns that are important to you;
- ▶ Benefits children and families in the early intervention program;
- ▶ Can be a team effort, (e.g., starting a support group, working on public awareness activities, etc.)

Session II

- ▶ Identify a leadership goal.

Questions to Ask Yourself

- ▶ Is your goal:
 - specific?
 - realistic?
 - stated positively?
- ▶ Have you written it on the goal worksheet?
- ▶ Is this your goal, or does it really belong to someone else?
- ▶ Is the goal something that means something to you?
- ▶ Does the goal challenge you?
- ▶ Can you explain how you will know that you have reached your goal?

Between Sessions I and II

- We ask that you think about:
 - "Action" steps or things that you need to do in order to reach your goal.
 - The resources needed, for example: time, postage, photocopying, professional/agency support, word processing, information, etc.

Session II

- ▶ Participate in a group activity that highlights your group's Individual Leadership Goals.

Examples

- ▶ Forming a Parent Support Group
- ▶ Obtaining accessible playground equipment for a community location (park, school, etc.)
- ▶ Speaking at a local college about parent experiences
- ▶ Starting a playgroup
- ▶ Increasing opportunities for family support programs (e.g. respite)

Legislative History

Civil Rights Legislative History

- **The Civil Rights Act of 1964**, which prohibits discrimination on the basis of race, color, religion, sex, or national origin.

Both the Section 504 of the Rehabilitation Act of 1973 and the ADA (1990) were modeled after the Civil Rights Act of 1964.

The legal structure of the ADA is based on the Civil Rights Act of 1964 and the Rehabilitation Act of 1973.

- **Section 504 of the Rehabilitation Act of 1973 (Amended to incorporate the ADA Amendments act of 2008)**
 - Section 504 is a federal law designed to protect the rights of individuals with disabilities in programs and activities that receive Federal financial assistance from the U.S. Department of Education (ED)
- **The American Disability Act (ADA) of 1990 (amended in 2008)** is a civil rights law that prohibits discrimination against individuals with disabilities in all areas of public life, including jobs, schools, transportation, and all public and private places that are open to the general public. The purpose of the law is to make sure that people with disabilities have the same rights and opportunities as everyone else.

Civil Rights Law versus Special Educational Law

ADA

A civil rights law to prohibit discrimination solely on the basis of disability in employment, public services, and accommodations.

IDEA

An education act to provide federal financial assistance to State and local education agencies to guarantee special education and related services to eligible children with disabilities.

504

A civil rights law to prohibit discrimination on the basis of disability in programs and activities, public and private, that receive federal financial assistance.

Who is protected?

ADA

Any individual with a disability who:

- (1) has a physical or mental impairment that substantially limits one or more life activities; or
- (2) has a record of such impairment; or
- (3) is regarded as having such an impairment.
- (4) Further, the person must be qualified for the program, service, or job.

IDEA

Children ages 3-21 who are determined by a multidisciplinary team to be eligible within one or more of 13 specific disability categories and who need special education and related services.

504

Any person who

- (1) has a physical or mental impairment that substantially limits one or more major life activities,
- (2) has a record of such an impairment or
- (3) is regarded as having such an impairment. Major life activities include walking, seeing, hearing, speaking, breathing, learning, working, caring for oneself, and performing manual tasks.

History of Special Education Law

- Prior to 1977 Many children with disabilities were denied access to a public education. Most were either:
 - Home schooled,
 - Did not receive any education, or
 - Were institutionalized.
- **PL 94-142, Education for all Handicapped Children Act (EHA) of 1975** (enacted in 1977) was the foundation for today's special education.

Four Purposes of P.L. 94-142

- “to assure that all children with disabilities have available to them a free appropriate public education which emphasizes special education and related services designed to meet their unique needs
- to assure that the rights of children with disabilities and their parents are protected
- to assist States and localities to provide for the education of all children with disabilities
- to assess and assure the effectiveness of efforts to educate all children with disabilities”

Source: *Education for All Handicapped Children Act, 1975*

Individuals with Disabilities Act (IDEA)

- IDEA is the nation's special education law. IDEA provides billions of dollars in federal funding to assist states and local communities in providing educational opportunities for special education students.
- In exchange for federal funding, IDEA requires states to provide a free appropriate public education (FAPE) in the least restrictive environment (LRE). The statute also contains detailed due process provisions to ensure the provision of FAPE.
- Part A of IDEA contains the general provisions, including the purposes of the Act and definitions.
- Part B contains provisions relating to the education of school-aged and preschool children (3-21), the funding formula, evaluations for services, eligibility determinations, Individualized Education Programs (IEPs), educational placements, requirements for procedural safeguards (including the discipline provisions), withholding of funds and judicial review.
- Part C of IDEA provides early intervention and other services for infants and toddlers with disabilities and their families (from birth until age 3), as well as grants to states to support these programs.
- Part D provides support for various national activities designed to improve the education of children with disabilities, including personnel preparation activities, technical assistance, and special education research.

Special Education Legislative History Timeline

1975

1977

1986

1990

1992

1997

2004

Congress passes PL 94-142 (Education of the Handicapped Act or EHA)

Age range is extended to include 3 to 21 year olds. (3-5 optional for states)

Congress amends EHA, mandating service for 3-5 year olds and [creating an optional program for 0-2](#).

In 1990, EHA is re-named the Individuals with Disabilities Education Act (IDEA).

[In NYS, the Early Intervention Program \(EIP\) is created and the Dept. of Health is designated as lead agency to provide services for children from birth through age 2.](#)

The 1997 re-authorization of IDEA placed an emphasis on access to the general curriculum was added to the statute.
[In NYS, the EIP operated under Emergency Regulations from 1993-1997. The Current regulations were adopted in November 1997, and updated November 2016.](#)

Congress again re-authorizes the IDEA (PL 108-446), this time renaming it as the Individuals with Disabilities Education Improvement Act (IDEIA), though it is still referred to as "IDEA".

NYS Department of Health



NYS DOH was designated as lead agency of the Early Intervention Program in 1987. The EIP is administered by the NYS DOH through the local county Health Departments or other designated county offices.

In NYS, the EIP is established in Article 25 of the Public Health Law.

NYS EIP has been operational since July 1, 1993

Revised regulations became effective November 30, 2016.

Our Vision for Early Intervention

**Early Intervention Partners Training
Project**

Early Intervention School Bus



As a group, think about a school bus that represents your vision for early intervention in New York.

Your group's task is to draw a picture of a school bus that represents all of your ideas. Your group will be asked to present your picture to the large group.

Early Intervention School Bus



- What does the bus look like?
- What are the special details about the bus?
 - Color
 - Size
 - Special Features
- Where is the bus going?
- What does the destination look like?
- Where has the bus been?
- Where is it now?

Who is on the bus?

Who is not on the bus?

Where are the people who aren't on the bus?

PUBLIC SPEAKING, LEADERSHIP AND ADVOCACY

Early Intervention Partners Training Project

Offered through a contract from the NYS Department of Health

Early Intervention Program

Role play topics

- Attending your child's IFSP meetings
- Advocating for inclusion/supports within your community setting
- Speaking with providers, Service Coordinator, or EIO/EIOD about your concerns
- Advocating on a Local, State or National Level.

Leadership Role

- Who will you contact (Federal, State, or Local official)
- State your position.
- Tell how this change would impact on your family or organization/constituents.
- SUGGEST SOLUTIONS
 - Identify things that he or she can do.
- Provide any written documents
- Thank them for your time.

Advocacy Role

- Decide what are you advocating for?
- Decide who are you advocating to?
(your child/ community)
- Planning,
- preparation,
- communication,
- problem-solving,
- Suggest solutions,
- Discuss next steps, if needed.

Group members should:

- Decide on their role.
- Discuss and outline their individual or group role.
- Identify the key points of the issue and/or their position.
- Determine how to best present their position.
- If a disagreement occurs, Plan on how to politely disagree and how to respectfully share your points and concerns, and discuss next steps.

Important Things to Remember for Positive and Successful Advocating

10/90

RULE

10% of our time talking about the past...

90% of our time talking about making things better!

Principals of Effective Communication, Advocacy and Team Building

- Meaningful participation by all
- Respectful
- Child focused
- Courteous and civil
- Speaks one at a time
- Listens
- Open minded



Debrief

- What did you learn?
- How was this helpful to you?
- Where/How else can you use these skills?

Early Intervention Partners Training Project

Role Play

Advocating for inclusion/ community supports within your community

Your child and others in your community have a physical disability that doesn't allow them to access your local playground. Your attending your town hall meeting to advocate for a handicap accessible playground.

Some pointers:

- Acknowledge the members of the committee: Madame Chairperson, etc, thank you for the opportunity to talk to you today...
- Introduce yourself and tell where you are from.
- Provide information:
 - State your position.
 - Tell how this would impact on your family or organization/group.
 - Suggest solutions.
- Thank the committee members.
- Provide a written copy of your comments. You can also ask if you can leave:
 - A list of names and addresses of the members of your organization.
 - A chart, graph or other research material that reinforces your position.
 - A one page fact sheet.

Taking a leadership role, make a persuasive 3 minute speech to advocate for a handicap accessible playground. Describe how not having access to a playground impacts your child and others. Describe how it could benefit them. Supply some ideas and solutions.

Work as a group and elect a speaker.

NOTES:

Key Points:

Early Intervention Partners Training Project

Role Play

Providing Public Comment on a potential Legislation change

Currently NYS EIP is at no cost to families. Implementation of a sliding scale pay is being considered. They are asking for public comment. Decide your groups position (for or against), and discuss how this could impact families.

Some pointers:

- Acknowledge the members of the committee: Madame Chairperson, etc, thank you for the opportunity to talk to you today...
- Introduce yourself and tell where you are from.
- Provide information:
 - State your position.
 - Tell how this would impact on your family or organization/group.
 - Suggest solutions.
- Thank the committee members.
- Provide a written copy of your comments. You can also ask if you can leave:
 - A list of names and addresses of the members of your organization.
 - A chart, graph or other research material that reinforces your position.
 - A one page fact sheet.

Position: In favor of sliding-fee scale Opposed to sliding-fee scale

Work as a group and elect a speaker.

NOTES:

Key Points:

Early Intervention Partners Training Project

Role Play

ROLE PLAY:

Speaking to your provider or Service Coordinator about your concerns

You have some concerns about your service provider and are not sure how to address them. Your EI providers think that your child has met all of their outcomes and are recommending that he/she no longer needs Early Intervention Services. You disagree.

Some pointers:

When voicing your concerns, you should always:

- Calmly share your concerns
- Be respectful
- Focus on your child, not on being right or winning
- Listen and keep an open mind

Things to think about when having this conversation:

- Review all session notes and progress reports prior to conversation.
- List all your concerns and back up with examples
- Speak to other providers (if any).
- Listen with an open mind.
- Think about how can this be resolved?
- What are your options/ next steps?

Roles:

Provider:

Parent #1:

Parent #2:

Discuss as a group the best way to approach your provider with your concern/disagreement. Work as a group and select two people to role play the situation with your provider/Service Coordinator.

NOTES:

Key Points:

Early Intervention Partners Training Project

Role Play

ROLE PLAY:

Attending your child's IFSP Meeting

Your child has been participating in EI for 6 months, and you are attending your second IFSP meeting. You feel your child has not met most of his outcomes and you are very upset. You plan to request an increase in services. Your provider mentioned to you that your child is doing well, and has the appropriate services.

Some pointers:

- Educate Yourself- Become an expert on your child's disability and best practices
- Be Prepared – Understand your rights and know what you want for your child
- Be Professional - Working together with the team usually results in the best IFSPs
- Try to think about things from the county/provider's perspective to ensure your requests are reasonable
- Ask Why?
 - It will help you understand why they are making certain recommendations
 - Understanding their views will help you better explain yours, especially if they differ
- Make sure you review all evaluations and progress reports prior to meeting.
- Put a list together of your questions and concerns
- If a disagreement arises:
 - Be respectful
 - Focus on your child, not on being right or winning
 - Listen and keep an open mind
 - Calmly share your concerns
- If no agreement is made, keep calm and ask about next steps

Roles:

Service Coordinator or EIO:

Special Education teacher (provider):

Parent #1:

Parent #2:

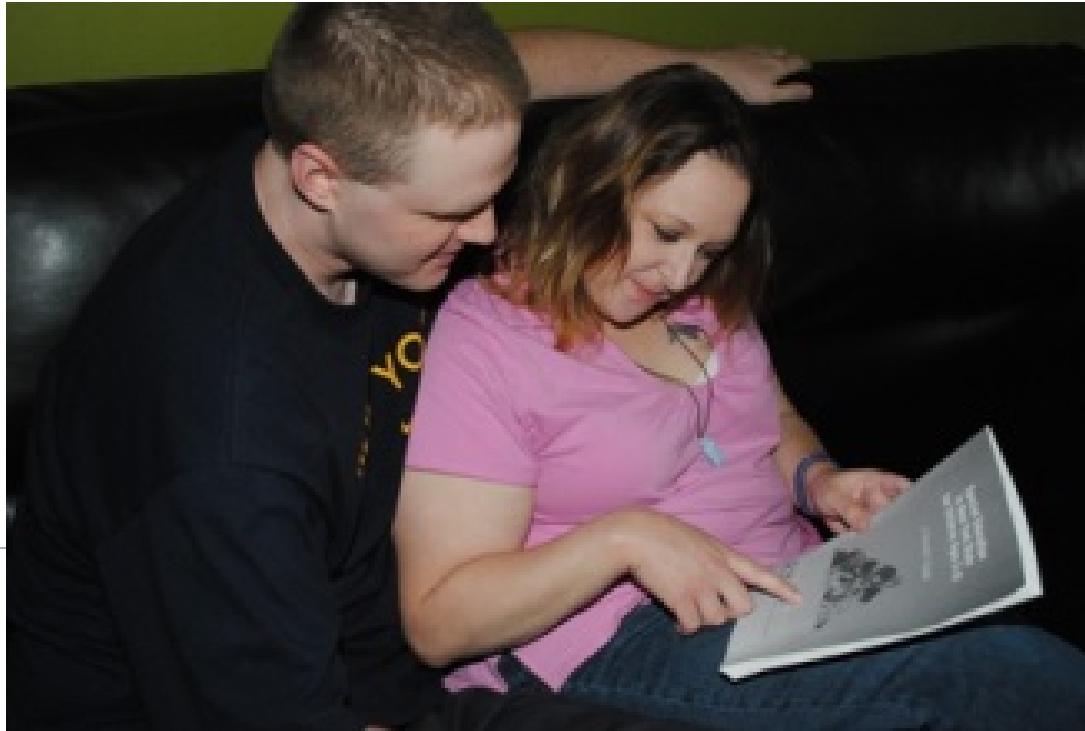
(Select) provider:

Grandparent or babysitter:

NOTES:

Key Points:

Transition



INFORMATION FOR PARENTS OF CHILDREN IN THE
EARLY INTERVENTION PROGRAM

Age Eligibility

For the Early Intervention Program

- Eligible children can receive EIP services between the ages of birth to three.
- The last date eligible children can receive EIP services ***is the day before their third birthday***, unless CPSE eligibility has been established.

Age Eligibility (cont'd.)

For the CPSE

Children become “first eligible” for CPSE services while participating in the EIP depending on the month they were born:

- Birthdays January to June: first eligible on **January 2** of the same year the child turns 3
- Birthdays July to December: first eligible on **July 1** of the same year the child turns 3

Child’s birth date and “first eligible” date help to identify the dates by which other transition activities **must** occur:

- Notification to CPSE
- Transition Conference
- Referral to CPSE
- Last Date for EIP Services

Transition Dates

Child's Birthday	Initial Date Child is eligible for CPSE	Last date for child to receive EI services if found eligible for CPSE services
January to June	January 2 nd	August 31 st
July to August	July 1 st	August 31 st
September to December	July 1 st	January 1 st

- The service coordinator shall provide written notification to the committee of preschool special education of the local school district in which a child resides of the potential transition of the child not fewer than 90 days prior to the child's potential eligibility for services under the Education Law, Section 4410.
This notification happens automatically UNLESS the parent objects. The parent must be afforded at least 30 calendar days to object.
- With parent consent, the service coordinator shall convene a transition conference with the parent, service coordinator, and the chairperson of the CPSE or designee, at least 90 days prior to the child's eligibility for services under Education Law, Section 4410, or no fewer than 90 days before the child's third birthday, whichever is first, provided, however, that such conference shall not be held more than nine months prior to the child's third birthday, to review program options and if appropriate, establish a transition plan.

* as per NYS Early Intervention Regulations 69-4.20 (b) and 69-4.20 (d) (4)

CPSE and EIP Services

Public Health Law, Section 2541 and Early Intervention Regulations 69-4.1(m)(1)(iii) provide that any toddler who is receiving CPSE services under Section 4410 of the Education Law ***cannot also*** receive services under the Early Intervention Program at the same time.

Transition Facts

A transition plan must be developed for *all* children exiting the Early Intervention Program and the plan must be included in the child's IFSP, with parental consent.

It is very important to begin discussing transition with families as early as possible to ensure a smooth and timely transition for the child and family.

New York State is required to report annually to the Federal government on the percentage of children exiting the EIP who have IFSPs with transition steps and services.

What is a Transition Plan?

A working document developed by the IFSP Team and updated at each IFSP meeting which outlines the procedures and steps to be implemented that will prepare the child and family for a change in service delivery when the child turns 3 years old, or at any other time that the parent chooses to end EI services.

The Transition Plan will include:

- a review of program and service options for the child from the child's third birthday through the remainder of the program year, if appropriate;
- steps for the child and his or her family to exit from the Early Intervention Program;
- steps and services to help the child adjust to and function in a new setting;
- procedures to prepare program staff or individual qualified personnel who will be providing services to the child to facilitate a smooth transition; and
- transition services and other activities that the IFSP participants determine are needed by the child and family to support the transition of the child.

When Will My Service Coordinator Discuss Transition?

For children who are 2 years of age or older at the time they enter the EIP, discussions should begin immediately at the initial visit and first IFSP meeting.

For younger children, an initial discussion about transition should occur at the initial visit. The transition plan should be developed at the IFSP meeting closest to the child's 2nd birthday and updated at every subsequent IFSP meeting.

Developing Your Transition Plan

The IFSP team should discuss:

- Child’s current progress, strengths, and needs
- Are services from other state and local agencies needed?
- What community resources are available to assist the child and family?
- What actions are necessary to help the child and family adjust to a new service setting?
- Is notification to the CPSE of the child’s potential eligibility appropriate?

When Is CPSE Notification Appropriate?

The IFSP Team should consider:

- Nature and extent of the child's disability
- Child's current developmental status and level of progress made in EI
- Functional abilities and needs of the child
- Results of any recent evaluations/assessments
- Recommendations made by the child's service providers
- Family's perspective

When CPSE Notification Is Not Appropriate

The Transition Plan should include:

Identification of community early childhood programs to address ongoing developmental concerns and steps to ensure transition is completed by the child's third birthday.

Activities to support and maintain progress made in the EIP and information to help the parent identify any future concerns.

Service Coordinators should:

The service coordinator shall assist the parent in the development of a transition plan to other appropriate early childhood and supportive services. The service coordinator shall assist the parent in identifying, locating, and accessing such services.

Advise families that they can still make a referral to the CPSE at anytime and include CPSE contact information in the transition plan

Remind families that the last date for services under the EIP is the day before the child's third birthday.

Service Coordinator Responsibilities

1. Explain the CPSE transition process to the family, including all steps and timelines, and ensure their understanding
2. Explain the written notification to CPSE and the opt-out process
3. Convene a transition conference
4. Facilitate parent referral to the CPSE in the school district in which the child resides
5. Transmit child records to the CPSE with parental consent
6. Attend CPSE meeting, if invited
7. Maintain all documentation in the child's record

Explain CPSE Transition Process

Service Coordinators must ensure parents understanding of all transition steps and timelines, which include:

- Incorporating appropriate activities and steps into the child's IFSP that will ensure a smooth transition from EI to CPSE
- Making decisions about:
 - opt out
 - having a transition conference
 - CPSE referral
 - determining which EI records will be transmitted to CPSE
- The CPSE evaluation process and initial CPSE meeting
- Options for determining a transition date

Written Notification and Opt Out

Service coordinators must explain the following to the parent and ensure their understanding that:

- written notification will automatically be provided to the local CPSE when the child is potentially eligible for services, ***unless the parent opts-out of this notification.***
- written notification is made not fewer than **90 days** before the date on which the child is first eligible to receive CPSE services.
- parent has 30 calendar days from the date the notification process is explained to opt out. Parents can opt out at any time within the 30 days.
- If parent does not respond within the 30 days, written notification will be sent to the CPSE.

Written Notification and Opt-Out (cont'd.)

- If parent chooses to opt out, the form “***Written Notification and Opt-Out Requirements and Timeline Parent Form,***” is completed.
- If parent **does not** choose to opt out, the “***Notification of Potential Eligibility to the Committee on Preschool Special Education***” form must be completed and sent to the local CPSE **at least 90 days** before the date on which the child is first eligible to receive CPSE services.
- No other personally identifiable information than the information requested on the form can be disclosed to the CPSE without parental consent.

Transition Conference

The purpose of a transition conference is to provide parents with an opportunity to meet with the EI service coordinator and the CPSE chair, receive information, and ask questions.

The transition conference is an important opportunity for parents to be informed about and discuss all aspects of their child's transition.

The transition conference can also help inform and facilitate the parent's decision about referring their child to CPSE. Parents should also be informed that they don't need to have made a definite decision to refer their child to CPSE in order to have a transition conference.

Transition Conference (cont'd.)

Service Coordinators must:

- Offer parents the opportunity to participate in a transition conference, even if a referral to CPSE has already been made.
- Obtain written parental consent using ***“Consent Form For Transition Conference”*** provided in the Tool Kit.
- Arrange for and convene the transition conference at least **90 days** prior to the child's eligibility for CPSE services, or no fewer than **90 days** before the child's third birthday, whichever is first. However, the conference **shall not** be held more than nine months prior to the child's third birthday.

Transition Conference (cont'd.)

Required Participants:

Service Coordinator, **must attend and invite:**

- Parent
 - Service coordinator
 - CPSE chair or designee
 - Foster care case worker, when appropriate
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- CPSE chair **must** be formally invited and documentation of this invitation **must** be maintained.
 - With the parental consent, representatives of other service delivery systems with whom the child and family are currently involved or from whom the child may need services (such as OPWDD or OCFS), can be invited.

Topics for Discussion

- Difference between CPSE and EIP service systems and what to expect if CPSE services are provided
- Importance of referring child and determining eligibility for CPSE services before their 3rd birthday and last day for EIP eligibility
- Explanation of CPSE evaluation process, eligibility criteria, and possible service options
- Options for other early childhood services and supports, e.g., Head Start

Topics for Discussion (cont'd.)

- As with EI, participation in CPSE services is voluntary.
- Explanation of all required CPSE timelines.
- Parents must make their own referral to the CPSE with the assistance of their EI service coordinator
- The CPSE will contact the parent to provide information about the evaluation process following receipt of the child's referral.

Topics for Discussion (cont'd.)

- The CPSE must receive timely consent to evaluate the child to ensure an eligibility determination by the child's third birthday and continuity of services.
- The CPSE must complete the initial evaluation, and meet to review the results and develop a recommendation within **60 calendar days** of the date the parent's consent to evaluate is received. Upon receipt of the recommendation, the Board of Education must arrange for the appropriate special education services to be provided within **60 school days** from the date the parent's consent to evaluate is received.
- The service coordinator will provide the child's most recent EIP evaluation report and other evaluation and assessment records to the CPSE, with parental consent, to assist with their evaluation.

Topics for Discussion (cont'd.)

- If the child is determined eligible for CPSE services before their 3rd birthday, the parent will have options regarding when to transition the child out of EI.
- If the CPSE does not render an eligibility determination by the child's third birthday

OR

- If the CPSE finds the child ineligible for services ***the child's eligibility for the EIP ends on the day before the child turns three.***

Parent Chooses Not to Participate in a Transition Conference

Service Coordinators must:

- obtain parent declination within 30 calendar days of notification of potential referral.
- Document in the child's records the parent declination of a transition conference.
- notify the parent in writing of all of the information that would have been discussed at the transition conference, including:
 - ***Transition Information for Parents Including Steps to Transition***
 - ***Comparison of the EIP and Preschool Special Education***
- inform parent that they can still make a referral to the CPSE at any time without participating in a transition conference.

Referral to CPSE

Service Coordinators must:

Assist parent in referring their child to the CPSE.

Complete ***"Parent Referral to the Committee on Preschool Special Education"*** form and forward to the CPSE (no fewer than 90 days before the child's potential eligibility)

Ensure that parent understands that they can choose to make the referral now, or at another time in the future, though if they are not determined eligible for CPSE before the Child's 3rd birthday, eligibility for early intervention will end on the day before the child's 3rd birthday.

Inform parent that receipt of the referral will result in immediate action by the CPSE, including forwarding consent and evaluation information to the parent.

Transmit Records to the CPSE

Service Coordinators must:

Inform parents that evaluation reports and other EI records will be reviewed by the CPSE to inform their evaluation process.

Assist parents in determining which EI records will be sent to the CPSE.

Obtain parental consent to transmit EI records to the CPSE using, ***“Consent for Transmittal of EIP Evaluations and Records”*** form in the Tool Kit.

Initial CPSE Meeting

The initial CPSE meeting must take place within sufficient time to allow the Board of Education to implement the recommended services within **60 school days** from the date parental consent to evaluate was received.

Determining When to Transition to CPSE

Parents can choose to:

- Transition to CPSE on the “first eligible” date
- Identify another transition date after the “first eligible” date
- Remain in the EIP until the child ages out
 - Children who turn 3 on or before August 31st can receive early intervention services through August 31st of that calendar year.
 - Children who turn 3 on or after September 1st, can receive early intervention services through January 1st of the next calendar year.

Parents who choose to remain in the EIP should be informed that if they change their mind and want to transition to CPSE sooner, they should contact the CPSE chair.

Maintaining Documentation

Service coordinators must:

Maintain complete and accurate documentation of all transition activities in the child's record, including documentation of all discussions with parents and others related to transition.

All transition forms and other paperwork must be completed in their entirety, and maintained in the child's record.

CPSE Responsibilities

Participate in the transition conference.

Accept and act upon referrals of age-eligible children in a timely manner.

Provide information to the parent about the CPSE evaluation process and request parental consent to conduct the evaluation.

Follow-up with parents who do not provide evaluation consent to ensure they understand the request.

Must complete the evaluation, initial CPSE meeting, and provide recommendations to the Board of Education within 60 school days of receiving the parent's consent to evaluate.

Develop the IEP at the initial CPSE meeting.

Ending Eligibility for EIP Services

A child thought to be potentially eligible for CPSE services is no longer eligible to receive EIP services upon their third birthday when:

- Parent makes no referral to the CPSE and the child is not evaluated.
- Parent makes referral but does not consent to the child's CPSE evaluation in a timely manner, resulting in no eligibility determination prior to the child's 3rd birthday.
- EIP transition activities are not completed or necessary information was not relayed to the parent in a timely manner, resulting in no CPSE eligibility determination prior to the child's 3rd birthday.
- CPSE evaluation and eligibility activities are not completed in a timely manner, resulting in no eligibility determination prior to the child's 3rd birthday.

Ending Eligibility for EIP Services

(cont'd.)

- EIP services will end and the child and family will experience a gap in services if transition activities are not timely.
- No exceptions are made unless the Department provides guidance in the wake of an extraordinary event or disaster (Hurricane Sandy).
- If the CPSE has not determined eligibility before the child's third birthday **for any reason**, the service coordinator must develop a transition plan to other appropriate early childhood and supportive services and the child **must** be discharged.

Decision to Initiate CPSE Services

Parents decide at the initial CPSE meeting when to transition their child out of EI and into CPSE.

This date is recorded on the IEP as the date that CPSE service will be initiated.

If parents reconsider and wish to transition their child on a different date than the one decided upon at the initial CPSE meeting, they must contact the CPSE to discuss changing the IEP start date.

Resources

Visit the BEI Web page for:

http://www.health.ny.gov/community/infants_children/early_intervention/index.htm

- Program regulations
- Memoranda and guidance documents
- Early Intervention publications
- Referral information
- Municipal contacts
- How to subscribe to the BEI Electronic Mailing List
- And other helpful information...

Guidance Documents on the DOH Website:

<http://www.health.ny.gov/guidance/oph/cch/bei/>

Resources

(cont'd.)

Early Childhood Direction Centers (ECDC) For additional information, visit:
<http://www.p12.nysed.gov/specialed/quality/regassoc.htm>

Special Education in New York State for Children Ages 3-21: A Parent's Guide:
<http://www.p12.nysed.gov/specialed/publications/policy/parentguide.htm>

Special Education Parent Centers:
<http://www.p12.nysed.gov/specialed/techassist/parentcenters.htm>