

Determination of EI Service Needs and Beginning Services “Timely”

The evaluation & assessment team completes evaluation and/or assessment and either provides information to the Service Coordinator or attends scheduled Individualized Family Service Plan (IFSP) development meeting. The journey from evaluation and/or assessment to IFSP outcome development contains many required steps. This guidance document outlines those requirements for Ohio’s Early Intervention system.

As evaluation and assessment teams are coordinated locally, the E & A team makeup is determined by the reason for referral. This is the expectation, which has been in place since the 2004 Reauthorization of IDEA Part C. Given the teams’ role in identifying needs and proposing IFSP outcomes, *it is critical to include the most appropriate members on the evaluation and/or assessment team from the very beginning of a family’s journey in Early Intervention.*

The evaluation and assessment team makes their observations and recommendations about child and family needs available to the Service Coordinator so that he/she can prepare for the initial IFSP Development meeting. This preparation includes:

- Review of the evaluation and assessment;
- Discuss with parents about services receiving outside of the IFSP and whether or not the family wants to continue/seek non-EI services as part of the IFSP under “Other services” or continue/seek separate from the IFSP;
- Discuss with parents about what EI is in Ohio, how we determine needs, what they can expect*;
- Discuss with parents about what kind of private insurance the family has access to and their options for payment for these services; and
- Discuss potential funding applications (BCMH, Medicaid, EISOP/POLR) and start by telling the family what information they should start gathering, should a service be identified as needed and is not readily available in the county system.

The Service Coordinator also needs to invite participants to the initial IFSP development meeting with enough notice for possible participation [OAC 3701-8-07.1(A)(2)];

- With informed consent, release evaluation and assessment results to potential providers who will be invited to IFSP meeting;
- Ask parents who they would like to invite (advocate, child care provider, therapist) to their IFSP meeting; and
- Provide HEA 8039 (Notice of IFSP meeting) to parents and others in advance of the meeting.

IFSP team members come prepared with an understanding of what was learned about the child and family during the eligibility and assessment process, including the family priorities. During this meeting, the team identifies agreed-upon functional and contextualized outcomes to address over the next six months.

***You should know the “What Is EI” position statement well enough to share this with families**

FOLLOWING the development of functional, contextualized IFSP outcomes, as well as steps/activities to meet those outcomes, the IFSP TEAM determines services and service providers, the frequency, intensity, location,

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method and payment source for the service needed to meet the outcome. Review service options to meet needs within and outside the county, including potential availability of local and regional EI service providers (through county boards of DD [CBDD], regional infant hearing program [RIHP] parent advisors and audiologists, and ODH contracted payor of last resort [POLR]);

Keep in mind that services which occur in natural environments are known to impact effectiveness for infants and toddlers, but that a parent always has the choice to seek services outside of EI.

All EI services necessary to meet IFSP outcomes for which a specific provider has been identified must begin within 30 calendar days of the IFSP being signed by the parent in order to be considered “timely.” It is the Service Coordinator’s responsibility to document and monitor timeliness of all services on an IFSP.
[OAC 3701-8-07.1]

Services Accessed Before IFSP Outcomes are Written

Service Coordinators should determine if families are already receiving services that could be considered “Early Intervention services.” If so, the question every Service Coordinator needs to ask is.....*Are those providers willing and able to serve this child through his or her IFSP to meet the team-determined IFSP outcomes?*

Strategies for determining this include:

- Local processes already in place for coordination with private providers;
- Information sharing and invitation of the provider(s) to IFSP meetings;
- Use of a form (sample attached) to document notification and commitment of private providers to provide IFSP services;
- The IFSP available for implementation on January 15, 2015 provides space for all of the following: (a) EI services necessary to meet IFSP outcomes for which a specific provider has been identified; (b) EI services which are needed to address an IFSP outcome, but which are not yet coordinated; and (c) other services which are being accessed, but are not EI. All of these services are required parts of the IFSP [34 CFR 303.344].
- If you need clarification on what is or is not an EI service, please see the Position Statement, available here:
http://www.helpmegrow.ohio.gov/~media/HelpMeGrow/ASSETS/Files/Professionals%20Gallery/HMG%20Early%20Intervention/EI%20Memos/Early_Intervention_Mission_Principles_Vision_June2014.ashx

Services Needed but Not Available

- In instances where the assessment process has led to recommendations in services not immediately available or known to the Service Coordinator, the same sample form provided in this document can be used to bridge the conversation with potential providers. Using the form can also be a strategy to move toward providing a needed service not currently in place.
- Make certain that once a service is identified as needed to meet an IFSP outcome, the Service Coordinator completes funding applications and works on behalf of the family to meet that service need. Every EI service necessary to meet an IFSP outcome for which a specific provider has been identified on an IFSP is the responsibility of the Service Coordinator to coordinate.

Federal compliance requirement for TRS (Timely Receipt of Services)

The federal requirement for TRS is set forth in 34 CFR 303.342(e) which says that “*each* early intervention service must be provided as soon as possible after the parent provides consent for that service.” HMG EI

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program rule then stipulates that services must start within 30 calendar days of the consent for service, as provided by signing the child and family’s IFSP [OAC 3701-8-07.1(D)(7)].

The Service Coordinator has the responsibility to “coordinate, facilitate, and monitor the delivery of EI services to ensure that the services the child needs start within 30 calendar days of the parent signing the IFSP” [OAC 3701-8-07.1]. It is the IFSP teams’ responsibility to focus on the parent(s) priorities and increasing their ability to enhance their child’s development, through a manageable number of IFSP outcomes. Once outcomes are agreed upon, only then are service types and providers determined by the team.

Key IFSP development considerations include:

- Typically, only specific service type providers may state the need for that specific service type (e.g. only a physical therapist may state that physical therapy is a “needed service;” however, the team may make a recommendation for further assessment to determine whether PT services are needed, if no PT participated in the initial assessment); therefore it is critical to include the most appropriate members on the evaluation team from the very beginning;
- Any identified need for further assessment goes on the steps/activities section of the IFSP rather than the Services section;
- The IFSP meeting does not constitute an EI service;
- Early Intervention services by definition are only those that occur following the development of the IFSP and directly support the IFSP outcome(s), once consented to by parent by his/her signing of the IFSP;
- It is the expectation per state and federal law that every EI service is provided in the natural environment:
 - When a service cannot be provided in the natural environment, a justification must be written on the IFSP, and
 - For now, the state will focus on the commitment to team processes within a primary provider approach; functional outcomes, and family-directed service delivery;

Once you have determined outcomes to meet needs, services to meet the outcomes, and service providers to provide the services; the IFSP is signed and then each of these services must start within 30 calendar days of the parent signing the IFSP. Remember that the initial IFSP is due no later than 45 calendar days from the date of program referral. These timelines are federal requirements and minimize delays in the short window we have to serve these kids and families.

- When a Service Coordinator is struggling to secure a service provider to address an IFSP outcome for a child and family, refer to the Central Directory for your county. This is a requirement of the Central Coordination contractors per OAC 3701-8-04 and must include service providers for Early Intervention.
- Moreover, if you discover a gap in services, you should make your Supervisor aware who can inform the local Family & Children First Council. You can also call ODH & DODD consultants for ideas.

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EXAMPLE PROVIDER FORM

This form is not a requirement, but a tool you may use, including revising the language to fit your message. The purpose is to communicate the commitment of what it means to be a provider of Early Intervention service as part of a child & family’s IFSP, so that when service providers may be held to the federal regulations and Ohio Administrative Code (Rule), they are compliant and the child and family receive what they need to achieve their IFSP outcomes/outcomes.

Dear Service Provider,

[insert child’s name] was evaluated through our Ohio Help Me Grow Early Intervention System and was determined eligible for services. For a little background, this is the program in Ohio which fulfills Part C of the Individuals with Disabilities Education Act, which means that this child and family are being served under a federal entitlement for as long as they are eligible and in need of Early Intervention services.

We are getting ready to have a meeting to develop *[insert child’s name]* Individual Family Service Plan (IFSP). The IFSP team has identified you as a potential provider of service and we would welcome your participation in developing the IFSP outcomes and determination of what services will be needed to support those outcomes.

Participating as an early intervention provider means the following:

1. Supporting this child and family to accomplish this outcome(s) based on the family priorities;
2. Accepting payment through the parent’s private or public insurance, EI System of Payment, or Medicaid, as applicable;
3. Starting within thirty days of a parent signing an IFSP;
4. Participating in child assessments and team conversations at this child’s IFSP meetings; and
5. Providing the service in a natural environment, or assisting the team in developing a justification and timelines to move the service into natural environments.

As the family’s Service Coordinator, on behalf of the family and the rest of the team, I invite you to become a member of *[insert child’s name]* IFSP team. I will contact you this week to discuss your participation and how I and other team members can support you. If you would like to contact me, please do so *[insert method and contact information for that method]*.

Thanks in advance for your participation,

Please return to at *[insert Service Coordinator email, phone, or other contact methods]*