



DEPARTMENT OF ECONOMIC SECURITY

Your Partner For A Stronger Arizona



AzEIP Programmatic Meeting

May 23, 2023

Revised June 2, 2023

AzEIP Programmatic Meetings

Will have a different topic each month that will provide technical assistance around AzEIP Policy and Procedure.

This month's topic will focus on **Interim IFSP**.

The topic for June 2023 will be around Service Coordination services.



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What is an Interim IFSP?

What is an Interim IFSP?

An Interim IFSP is a **temporary plan** developed only under the most **extraordinary circumstances** that will allow the child and family to receive early intervention services prior to the completion of the initial planning process (IPP).

Purpose of Interim IFSP

- To provide immediate support for children and their family who:
 - Meet AzEIP eligibility criteria
 - Require AzEIP supports and services to begin immediately and
 - Cannot wait for IPP steps to be completed
 - Eligibility determination
 - Child and Family Assessment
 - Initial IFSP
- Emergency Measure to be used only in extreme circumstances



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IDEA Part C

Interim IFSPs provision of services before evaluations and assessments are completed.

Early intervention services for an eligible child and the child's family may commence before the completion of the evaluation and assessments in §303.321, if the following conditions are met:

- Parental consent is obtained.
- An interim IFSP is developed that includes:
 - The name of the service coordinator who will be responsible, consistent with §303.344(g), for implementing the interim IFSP and coordinating with other agencies and persons; and
 - The early intervention services that have been determined to be needed immediately by the child and the child's family.
- Evaluations and assessments are completed within the 45-day timeline in §303.310.

[IDEA Part C Regulations 303.345](#)



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AzEIP Policy Manual

AzEIP Policy Manual

An interim IFSP may be developed for an eligible child when the child and family are in immediate need of services prior to the child and family assessment and completion of the IFSP.

The evaluations and/or assessments must be completed within 45 days from referral.

[AzEIP TBEIS Policy Manual 2022 3.6](#)



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AzEIP Procedure Manual

AzEIP Procedure Manual

If it is determined by the service coordinator and family that early intervention services need to begin before the Child and Family Assessment (CFA) can be completed, such as when a child is in a medical crisis or has an obvious or immediate need, the service coordinator and family may develop an Interim IFSP which includes all the following:

- The name of the service coordinator
- The early intervention services determined to be needed immediately
- Parental consent to initiate services.

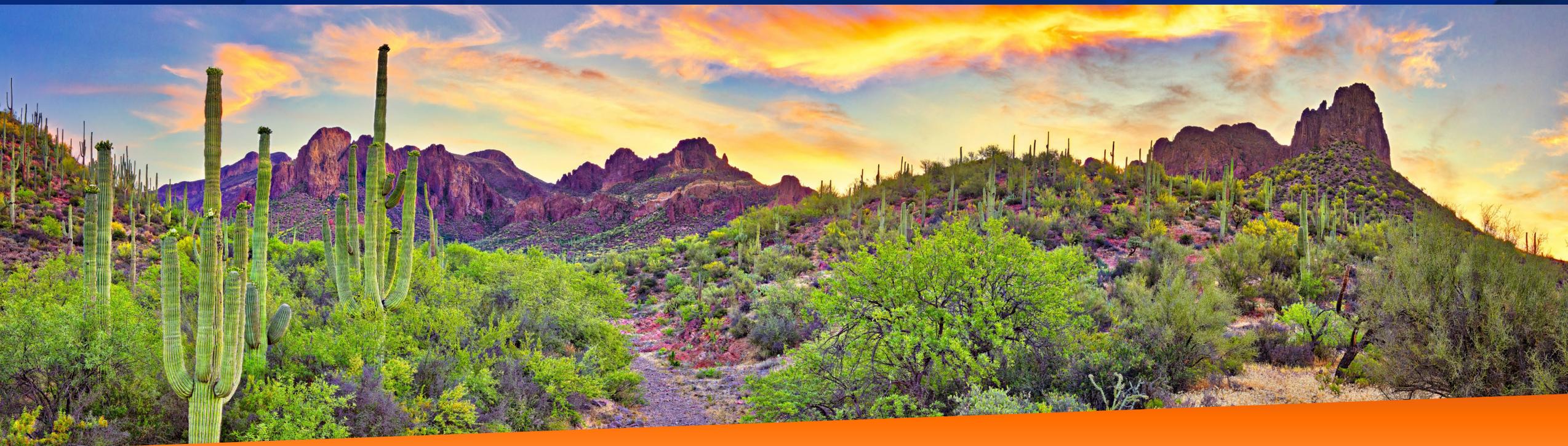
The Child and Family Assessment and Initial IFSP must still be completed within 45 days from the date of the referral.

[AzEIP TBEIS Procedure Manual 2022 3.4.1 \(G\)](#)



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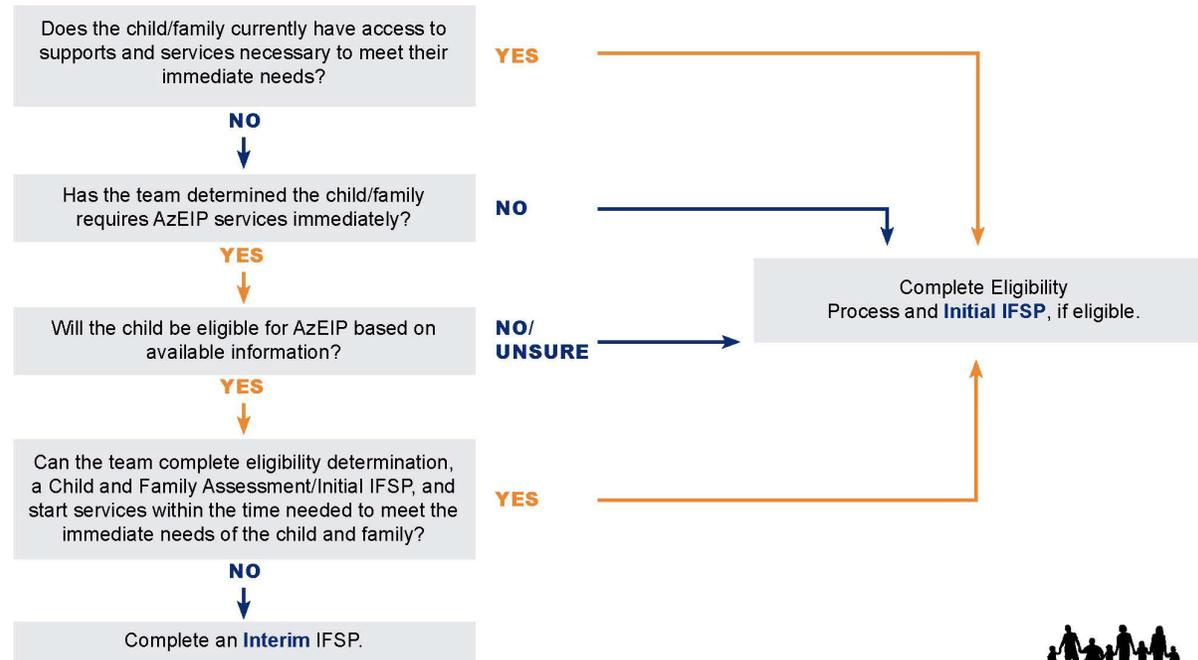
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Interim IFSP in Practice

AzEIP Interim IFSP Decision Tree

AzEIP Interim IFSP Decision Tree



Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • TTY/TDD Services 7-1-1

GCI-1162A OTHENG (6-23)



Steps Taken When Completing an Interim IFSP

1. Initial Visit (Explain AzEIP and Obtain Consents)
2. Identify the need for immediate services for the child and family
3. Utilize the **Interim IFSP Decision Tree** to determine immediate need for services
4. Document the justification for Interim IFSP within SC Contact log
5. SC creates the Interim IFSP* **immediately** with the family to:
 1. Identify the service(s)
 2. Obtain parental consent
6. SC enters Interim IFSP into I-TEAMS
7. Services are provided **immediately** after the creation of the Interim IFSP
8. Team continues with eligibility process to meet the 45 Day Timeline
 1. Eligibility determination (record review or evaluation)
 2. Child and Family Assessment
 3. Initial IFSP

**SPAs should notify the AzEIP Office when an Interim IFSP has been completed.*

Interim IFSP versus Other IFSPs

Interim IFSP	Initial IFSP	IFSP Reviews	Annual IFSP
<ul style="list-style-type: none"> • Written during IPP when the team identifies an immediate need and AzEIP services are required to be provided before eligibility can be determined and the initial IFSP can be created • Services are provided immediately after the creation of the Interim IFSP • Interim IFSP contains minimal information <ul style="list-style-type: none"> ○ Name of child ○ Service Coordinator's name ○ Service identification ○ Family written consent 	<ul style="list-style-type: none"> • Service Coordinators have 45 days to complete after the date of referral • Completed after <ul style="list-style-type: none"> ○ AzEIP eligibility determination ○ Child and Family Assessment • DDD SC is invited if child has been determined eligible for DDD and targeted <ul style="list-style-type: none"> ○ DDD takes on SC responsibilities day after Initial IFSP 	<ul style="list-style-type: none"> • Completed between the Initial IFSP and Annual IFSP • Previous IFSP is reviewed • IFSP Reviews include: <ul style="list-style-type: none"> ○ Addendums per request of family ○ 6 month Reviews ○ DDD Targeted ○ LTCS IFSPs ○ Transition Meetings 	<ul style="list-style-type: none"> • Completed one year after the Initial IFSP • Previous IFSP is reviewed • New IFSP document is created

What does an Interim IFSP look like?

An Interim IFSP is a **temporary** abbreviated version of an Initial IFSP with an expedited start date to meet the family's **immediate** need.

The required components of an Interim IFSP include:

1. Name of child
2. Name of Service Coordinator
3. Services the child will receive
4. Parent's signature

What does an Interim IFSP look like?

GCI-1021A FORFF (4-22)
(IFSP Packet - Page 1 of 19)

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Arizona Early Intervention Program (AzEIP)

**This is the
INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP)**

For Sadia Sanchez and Family

Interim IFSP Initial IFSP Annual IFSP

Date: 05/23/2023

Service Coordinator: Jack B Nimble

Team Lead: _____

Our Mission – Early intervention builds upon and provides supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities.

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • TTY/TDD Services 7-1-1 • Disponible en español en línea o en la oficina local

GCI-1021B FORFF (4-22)
(IFSP Packet - Page 2 of 19)

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Arizona Early Intervention Program (AzEIP)

IFSP Type: Interim
 IFSP Date: 05/23/2023

CHILD AND FAMILY

Child's Name (First, M.I., Last): Sadia Sanchez Date of Birth: _____

Gender: Female Male Child ID No.: 123456 AzEIP Eligibility Date: _____

Service Coordinator's Name: _____ Agency/Program: _____

Phone No.: _____ Email Address: _____

With Whom the Child Resides

Parent Family Member Foster Parent Guardian

Name (First, M.I., Last): Florence Sanchez

Address (No., Street, City, County, State, ZIP Code): _____ Major cross streets or directions to the home: _____

Phone No.: _____ Email Address: _____

Language used by the parent/caregiver: _____ Interpreter needed: Yes No If yes, what language? _____

School District: _____ Date Child is 2.6: _____

Additional Caregiver/Address

Parent Family Member Guardian

Name (First, M.I., Last): _____

Address (No., Street, City, County, State, ZIP Code) *If different than above:* Major cross streets or directions to the home: _____

Phone No.: _____ Email Address: _____

Language used by the parent/caregiver: _____ Interpreter needed: Yes No If yes, what language? _____

Health Information

Primary Care Provider (PCP): _____ Phone No.: _____

Date vision screening conducted (Vision screening checklist): _____ Number of indicators or risk factors checked: _____

Comments, next step: _____

Date hearing screening conducted (Hearing screening tracking form is NOT a hearing screening): _____

Results of OAE (or other hearing screening): Left Ear _____ Right Ear _____

If a hearing screening has not been conducted within 6 months, strategies to obtain a screening must be included.

Comments, next step: _____

Please describe your child's current health status. Include diagnosis (if applicable), specialists involved, serious illnesses, seizures, hospitalizations, and medications taken regularly and how this may be impacting your child's development.

What does an Interim IFSP look like?

GCI-1021G FORFF (4-22)
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ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Arizona Early Intervention Program (AzEIP) IFSP Type: Interim
 IFSP Date: 05/23/2023

INDIVIDUALIZED FAMILY SERVICE PLAN SERVICES NEEDED TO MAKE PROGRESS TOWARDS OUTCOMES

Child's Name (First, M.I., Last): Sadia Sanchez Date of Birth: _____

Outcome No.	Early Intervention Service	*Intensity	Frequency		Service Setting H = Home C = Community O = Other (If other, complete the justification below)	Method TL = Team Lead JV = Joint Visits TC = Team Conferencing NTL = Non Team Lead	Duration	
			No. of sessions	No. of minutes per session			Planned Start Date	Planned End Date
NA	Service Coordination	I	4x	30	<input checked="" type="checkbox"/> H <input type="checkbox"/> C <input type="checkbox"/> O	NTL	05/23/23	07/23/23
NA	Speech Therapist	I	10x	45	<input checked="" type="checkbox"/> H <input type="checkbox"/> C <input type="checkbox"/> O	NTL	05/24/23	07/23/23
					<input type="checkbox"/> H <input type="checkbox"/> C <input type="checkbox"/> O			
					<input type="checkbox"/> H <input type="checkbox"/> C <input type="checkbox"/> O			
					<input type="checkbox"/> H <input type="checkbox"/> C <input type="checkbox"/> O			
					<input type="checkbox"/> H <input type="checkbox"/> C <input type="checkbox"/> O			

Select ONLY one Primary Service Setting: H C O
(Primary Setting is the setting in which the infant or toddler receives the most hours of an early intervention service.)
*Intensity: I = Individual UN = Multiple eligible children (2) UP = Multiple eligible children (3 or more)

JUSTIFICATION OF EARLY INTERVENTION OUTCOMES THAT CANNOT BE ACHIEVED SATISFACTORILY IN A NATURAL ENVIRONMENT

Service _____ Location of Service _____ Service Provider _____

If an early intervention service is not provided in the natural environment, what is the justification for the IFSP team's decision that outcomes cannot be achieved in the natural environment?

Explain how early intervention services will support the child's participation in routines and activities to meet the IFSP outcomes.

Explain the plan and timeline to move services into the natural environment.

GCI-1021I FORFF (4-22)
(IFSP Packet - Page 18 of 19)

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Arizona Early Intervention Program (AzEIP) IFSP Type: Interim
 IFSP Date: 05/23/2023

INDIVIDUALIZED FAMILY SERVICE PLAN INFORMED CONSENT BY PARENT(S) FOR SERVICES

Child's Name (First, M.I., Last): Sadia Sanchez Date of Birth: _____

I have participated in the development of this IFSP and understand that I can accept or refuse any or all of the services identified in the IFSP. I understand that my consent for services may be withdrawn at any time. Please initial and sign below.

- JS 1a. I agree with the proposed IFSP as written. I further understand that my signature below indicates that: (a) I have been fully informed of the services being proposed and the reason for the proposal of services; (b) my service coordinator explained my rights under this program; and (c) I give consent to carry out this IFSP as written.
- 1b. I do not agree with the proposed IFSP as written (Prior Written Notice form must be completed and given to the family). However, I do consent to the following services/frequency.
- JS 2. My service coordinator explained my rights under this program.
 Accept Decline a written copy of the AzEIP Family Rights Handbook.
3. I have received a copy of the AzEIP Family Survey (Annual or Transition/Exit IFSP).

Flora Sanchez 05/23/2023
Date _____ Parent Signature _____ Date _____

In addition to the release of this IFSP to team members, I give my consent for a copy of this IFSP to be sent to the individuals or agencies listed below.

Name of Individual/Agency (e.g., pediatrician, Early Head Start program)	Purpose
Dr. Phyllis Physician	Collaboration

Parent Signature: Flora Sanchez Date: 05/23/2023

I understand that I have agreed to disclose my IFSP to the person/agency listed above and that person/agency may not disclose this IFSP to anyone else without my consent. This consent is valid for one year unless I revoke it at any time.

GCI-1021J FORFF (4-22)
(IFSP Packet - Page 19 of 19)

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Arizona Early Intervention Program (AzEIP) IFSP Type: Interim
 IFSP Date: 05/23/2023

INDIVIDUALIZED FAMILY SERVICE PLAN IFSP TEAM

Child's Name (First, M.I., Last): Sadia Sanchez Date of Birth: _____

The following team members participated in the development of this IFSP. Each individual understands the plan as it applies to their role in providing services. All team members understand that the IFSP must be reviewed at least every 6 months and can be revised at any time by the request of any team member, including the family. List team members, present or not, who contributed to the development of the IFSP.

IFSP TEAM MEMBERS				
Service Coordination	Discipline/Role	Agency/Program	Phone No.	Initial if present
Jack B Nimble	Service Coordinator	ABC Kids	123-555-5555	<u>JBN</u>
Team Lead	Discipline/Role	Agency/Program	Phone No.	Initial if present
Samantha Speech	Speech Therapist	ABC Kids	456-555-5555	<u>SS</u>
IFSP Team Member	Discipline/Role	Agency/Program	Phone No.	Initial if present
IFSP Team Member	Discipline/Role	Agency/Program	Phone No.	Initial if present
IFSP Team Member	Discipline/Role	Agency/Program	Phone No.	Initial if present
Core Team Members		Discipline/Role		



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Misconceptions about Interim IFSPs

Corrections on Misconceptions about Interim IFSPs

- Interim IFSPs **do not** replace Initial IFSPs, the Initial IFSP must still be completed within 45 days of referral.
- IFSPs are **not** labeled as Interim IFSPs because they take place in addition to the regular 6-month or Annual IFSP.
- Transition Meetings are **not** Interim IFSPs.
- Interim IFSPs are **not** created due to the inability to obtain medical records or because a child is in the hospital during the Initial Planning Process.
- Interim IFSPs do **not** speed up the DDD or ALTCS eligibility process.
- Interim IFSPs are **not** created when there is a gap in IFSPs.



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Common Questions about Interim IFSPs

When is it appropriate to use an Interim IFSP versus a regular IFSP?

- During the Initial Planning Process, the team identifies an immediate need for AzEIP services.
- Team has utilized the Interim IFSP Decision Tree confirming the need of an Interim IFSP.
- The family agrees to an Interim IFSP being completed.

If an Interim IFSP is completed, how and when do we transition to a Initial IFSP?

- Interim IFSP and their services occur in conjunction with the Initial Planning Process.
- The Initial IFSP must be completed within 45 days.
- An Interim IFSP ends when the Initial IFSP is written.



How is billing different for an Interim IFSP?

The interim IFSP will be conducted by the service coordinator with the participation and input of the core team member(s) who will be involved in the eligibility determination and Child and Family Assessment.

The Interim IFSP is billed on the I-TEAMS service delivery page as a “IFSP Interim Meeting”.

Due to an I-TEAMS systems issue, Interim IFSP service delivery is billed offline until the issue has been resolved.

When doing an Interim IFSP does it change our process/timeline for determining DDD eligibility?

The DDD eligibility application must be submitted within two (2) business days of the AzEIP eligibility determination.

The Child and Family Assessment and Initial IFSP must still be completed within 45 days from the date of the referral.(AzEIP Policy 3.6.2 & Procedure 3.4.1 G)



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Scenarios For Discussion

Scenario 1

Elijah is 2½ years old and was recently removed from his family home due to abuse and neglect. His social worker reported behavioral concerns and after removal, Elijah was diagnosed by a psychologist with a severe language delay. A potential foster family was identified but the foster parents say they will only accept Elijah's placement if they can receive immediate support for caring for a child with a severe language delay and significant mental health/behavioral challenges.



Scenario 2

Tahani has been in the NICU for 3 months following his birth. He has a tracheostomy and is ventilator and g-tube dependent. He is now ready to be discharged. The hospital staff will not allow Tahani to be discharged home until nursing services are in place. Family would like to have DDD and ALTCS eligibility determined in order to set up nursing services and bring Tahani home.



Scenario 3

Che was recently diagnosed by a private speech-language pathologist with a significant communication disorder. Her father would like to begin speech therapy immediately because Che will turn 3 years old in four months.



Scenario 4

Johann stayed two days in the hospital newborn nursery for observation and will come home within the next couple of days. He did not pass a newborn hearing screening and results of genetic testing to rule out Enberg Syndrome are expected back in 2 weeks. Johann's family is anxious about interacting and bonding with an infant with a potential hearing loss and requested immediate EI services.



Scenario 5

Leo is currently in the NICU and has a qualifying diagnosis of seizure disorder. He will not be discharged for at least 2 more months. His family stated they are not ready to receive any EI services.



Scenario 6

Sadia was discharged from the hospital after an eight-week stay. She was premature with many medical complications including a qualifying diagnosis of Failure to Thrive. Weight gain is a challenge for her and she will need to be closely monitored now that she is home. Her family is eager to get EI in place to assist with Sadia's feeding skills and encourage her overall development.





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Interim IFSP Reminders

Interim IFSP Reminders

- Interim IFSPs occur rarely and only in extreme circumstances.
- An Interim IFSP does not replace or take the place of the Initial IFSP.
- The 45-Day Timeline requirement still must be met.
- Interim IFSP should only be marked on the IFSP Cover Sheet if an Initial IFSP has not been conducted (interim is not used to identify an addendum, other review, or transition meeting).
- SPAs must have internal processes in place to continuously monitor that all staff understand and are implementing services and supports in accordance with AzEIP Policy and Procedure.



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General Reminders

General Reminders

- Transition Planning:
 - The PEA Notification and Transition Conference (TC) decisions are two separate decisions.
 - The families initial the IFSP transition pages to acknowledge each of their decisions (PEA Notification and TC)
 - If a family would like a TC, the SC initiates a conversation with the family to discuss and identify who the family would like to attend, including other early childhood providers (e.g., Head Start, private or community preschool)
- Transfer Request forms are required every time a child is transferred from one SPA to another unless it is the same day of the initial referral and there is no billing.
- Monitoring a child's milestones is not an outcome.
- Listing a child's name or initials, I-TEAMS ID or any other Personally Identifiable Information (PII) in the subject line of an email (encrypted or otherwise) is discouraged as it could lead to a FERPA violation and places SPAs at risk of a security breach
- SPAs must enter all service delivery into I-TEAMS even if it will not be reimbursable.



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Resources we would like to share

Resources we would like to share

[IDEA, Part C](#)

[AzEIP TBEIS Policy Manual effective April 1, 2022](#)

[AzEIP TBEIS Procedure Manual effective April 1, 2022](#)

[AZEIP TBEIS Billing Manual](#)

[AzEIP I-TEAMS Manual](#)

[Resources and Tools for AzEIP Service Providers](#)

Thank you for attending!

AzEIP Quality Improvement Team

- Erica Melies, AzEIP Quality Improvement Manager
- Tanya Goitia, AzEIP Continuous Quality Improvement Manager
- Lidia Gonzales, AzEIP Continuous Quality Improvement Manager
- Pamela Meurer, AzEIP Continuous Quality Improvement Manager
- Anissa Albert, AzEIP Technical Assistance Specialist
- Amanda Tipotsch, AzEIP Technical Assistance Specialist
- Chantelle Curtis, AzEIP Professional Development Coordinator
- Amanda Honeywood, AzEIP Administrative Assistant

Next Meeting Topic: Service Coordination

Send your questions around the topic to AzEIPQualityImprovement@azdes.gov prior to 06/23/2023.

Date/Time: 06/27/2023 3pm-4pm

Video call link: <https://meet.google.com/wkk-oxzv-qfk>

Call In: (US) +1 530-487-5062 PIN: 733 700 198 #



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