

CHAPTER 3: EARLY INTERVENTION SERVICES

REVISION DATES: 07/01/2021, 12/14/2018

EFFECTIVE DATES: 04/01/2022, 07/01/2019

INTENDED USER(S): All ADES/AzEIP personnel, AzEIP Service Providing Agencies including all employees, contractors, subcontractors, and volunteers.

REFERENCES/AUTHORITY: 20 U.S.C. §§ 1431, et seq.; 34 C.F.R. §§ 303.303-346, 420, and 421, 34 C.F.R. §§ 303.340; 342(a), 343(a) and § 303.344, § 303.342(b) and § 303.342(c), Rush, D. D., & Shelden, M. L. (2011). The early childhood coaching handbook. Baltimore, MD: Paul H. Brookes Publishing Co.

3.9 Initial IFSP

- 3.9.1 The Service Coordinator schedules the initial IFSP meeting with the family and sends the family and other participants an IFSP Meeting Notice with the agreed-upon date, time, and location of the meeting.
 - A. If the child is DDD eligible DDD will provide on-going service coordination, the service coordinator invites the DDD service coordinator to attend the initial IFSP meeting.
- 3.9.2 The service coordinator and at least one (1) team member from the multidisciplinary evaluation or assessment team attends the IFSP meeting and provides information gathered throughout the initial planning process (IPP).
- 3.9.3 The service coordinator facilitates the initial IFSP meeting, ensuring everyone on the team can participate, and documents the discussion in the IFSP packet.
- 3.9.4 The service coordinator documents the child and family's demographic information and the child's current health status, including results of the vision and hearing screenings in the IFSP.
- 3.9.5 If the CFA was completed at a separate meeting from the initial IFSP, the service coordinator reviews and updates as needed the CFA pages of the IFSP.
- 3.9.6 The IFSP team develops participation-based outcomes that reflect the family's priorities and interests, and the routines and activities with which they would like support from early intervention and documents the outcomes and strategies on the IFSP Outcomes page.
- 3.9.7 The service coordinator explains that the purpose of transition planning is to ensure the transition out of early intervention, at any time, is as smooth as possible for the child and family.
- 3.9.8 The service coordinator follows the policies outlined in the AzEIP Policy Manual, Chapter 4: *Transition*, to ensure that all transition activities are completed within required timelines based on the child's age at AzEIP eligibility determination.

- 3.9.9 Based on the family's interests, priorities, and routines, the IFSP outcomes, and the child's area(s) of developmental delay, the IFSP team selects a Team Lead (TL) who will work most closely with the child and family throughout the child's eligibility in early intervention.
- A. For example, if during the CFA the family expresses concerns about their child's participation in the neighborhood childcare setting, the team may designate the Developmental Special Instructionist (DSI), who has expertise in working with childcare center and/or a relationship with that center, as the TL.
 - B. If the AzEIP TBEIS Contractor has elected to provide dual role service coordination, only the TL for the family may be the dual role service coordinator after the initial IFSP meeting, unless DDD holds service coordination.
- 3.9.10 The IFSP team determines if the TL will need support from any other IFSP team member(s) and how the other team member(s) will be involved with the family, such as through team meetings or joint visits, and documents how any direct services will be provided on the IFSP Services page.
- 3.9.11 The service coordinator documents on the IFSP Services page the frequency and duration in which the service provider(s) is needed to build the family's capacity to support their child's needs and attain the child and family outcomes, as well as each team member's role in supporting the TL and family.
- 3.9.12 The IFSP team determines the Planned Start Date (PSD) of each service, considering the family's priorities and availability, and documents the date(s) on the IFSP Services page. The PSD should be as soon as possible after the IFSP and, unless the provider will be conducting a separate service visit after the initial IFSP meeting concludes, should not be the date of the IFSP meeting.
- 3.9.13 The service coordinator discusses and documents on the IFSP Payment Arrangements page all possible funding sources to be utilized for the services, including:
- A. Private insurance: the service coordinator explains how private insurance is used to pay for the service(s) with the family's written consent to bill insurance and disclose personally identifiable information (PII) to the health plan.
 - B. AHCCCS: the service coordinator explains how AHCCCS is used to pay for the service(s) with the family's written consent to bill insurance and disclose personally identifiable information (PII) to the health plan.
 - C. Other resources as identified by the team.
- 3.9.14 The Service Coordinator must obtain consent for insurance each time an early intervention service frequency, duration or intensity is increased and when a new service is added to the IFSP.

- 3.9.15 The Service Coordinator explains that if private/public insurance and/or community resources are not available for the service(s) needed to meet the outcomes on the IFSP, then AzEIP may be the funding source as the payor of last resort.
- 3.9.16 The Service Coordinator documents existing and/or needed community resources under the “Other Services” section of the Payment Arrangements page.
- 3.9.17 The Service Coordinator provides a written copy of their procedural safeguards, which are detailed in the Child and Family Rights in the Arizona Early Intervention Program (AzEIP) booklet, and explains all of their rights including but not limited to the following:
- A. if the parent agrees to the IFSP as written, the parent’s signature on the IFSP is consenting to initiate services
 - B. the parent’s option to accept/decline services if the parent disagrees with the services identified on the IFSP.
 - C. the dispute resolution process (i.e., filing a complaint, requesting mediation or a due process hearing) if the parent disagrees with the IFSP as written.
- 3.9.18 The Service Coordinator obtains the parent’s initials, indicating agreement/disagreement with the IFSP, and signature on the Informed Consent page.
- 3.9.19 If the family would like to share the IFSP with anyone, such as the referral source or pediatrician, etc., the Service Coordinator documents the name of the individual or agency on the IFSP Informed Consent page and obtains the parent’s signature to release the IFSP.
- 3.9.20 The Service Coordinator completes a new Consent to Bill Health Insurance form and obtains the parent’s signature to document whether the child has public and/or private insurance and if so, if the parent provides or declines consent to share their personally identifiable information and use the insurance for on-going services.
- 3.9.21 The service coordinator:
- A. ensures the parent has a copy of the evaluation, if conducted, and the IFSP within ten business days after the IFSP meeting
 - B. ensures that IFSP team members have a copy of the IFSP within ten business days after the IFSP meeting
 - C. sends the IFSP to other individuals with whom the parent has consented to share, such as the pediatrician, Healthy Families, Early Head Start, DCS, other early education or childcare programs, and documents the distribution in the Record Access and Release log
 - D. ensures all IFSP data is entered into the ADES data system(s)

- E. if DDD will provide on-going service coordination, ensures the complete child record is provided to the DDD service coordinator.