

3701-8-07.1 **Early intervention individualized family service plan and service delivery.**

This rule applies to early intervention service providers serving infants or toddlers who have been determined eligible and in need of early intervention services, and who are participating with parent consent in the help me grow (HMG) early intervention program.

For purposes of this rule, parent means a birth or adoptive parent of a child; a guardian generally authorized to act as the child's parent, or authorized to make early intervention, education, health or developmental decisions for the child (but not the State if the child is a ward of the state); an individual acting in the place of a birth or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives; a person who is legally responsible for the child's welfare; or a surrogate parent who has been assigned by the department.

(A) Early intervention service coordination contractors shall ensure every individualized family service plan:

(1) Is completed on form HEA 7720 (effective July 1, 2012) and includes all of the following information:

(a) A statement about the child's present levels of development in the following areas: physical; cognitive; communication; social or emotional; and adaptive; or an attached evaluation and assessment report on form HEA 8032 (effective July 1, 2012) inclusive of this information;

(b) A statement about the family's resources, priorities, and concerns related to enhancing the development of their child's development; or, when a family-directed assessment was conducted, an attached form HEA 8032 (effective July 1, 2012), inclusive of this information;

(c) A statement of the measurable, functional outcomes expected to be achieved for the child and family and the criteria, strategies, and time lines used to determine the degree to which progress toward achieving outcomes identified on the IFSP is being made;

(d) The specific early intervention services, as defined in rule 3701-8-01 of the Administrative Code, which are necessary to meet the unique needs of the child and family to achieve the outcomes identified on the IFSP; including the length, duration, frequency, intensity, service provider and method of delivering the early intervention services; a statement that each early intervention service is provided in the natural environment for that child or a justification as to why the service will not be provided in the natural environment; the location of each service; and payment arrangements;

(e) A description of the steps the service coordinator or family will take to

assist the child and family in securing any and all services which are identified as needed to achieve outcomes, but are not currently being provided;

(f) The projected and actual start dates for the initiation of each early intervention service and the anticipated duration of each service; and

(g) The name of the service coordinator, who is responsible for ensuring the implementation of the early intervention services identified on a child's IFSP and coordination with other agencies and individuals serving the child.

(2) Is developed, reviewed, and evaluated in accordance with the following time lines and requirements:

(a) The initial IFSP is developed within forty-five calendar days after program referral.

(i) Development of the initial IFSP shall occur with a multidisciplinary team including, at a minimum, the parent of the child, other family members when requested by the parent, an advocate or person outside of the family when requested by the parent, the child's service coordinator, and one person who conducted the evaluation or assessment of the child.

(ii) If the evaluator or assessor cannot attend the IFSP development meeting in person, arrangements shall be made for the person's involvement using the telephone, by having a knowledgeable authorized representative attend in their place, or making pertinent records available at the meeting.

(iii) Any individual who will be providing early intervention services should attend the development meeting when appropriate to the specific and individual needs of the child.

(iv) Using form HEA 8039 (effective July 1, 2012), the child's service coordinator shall mail, deliver, email or otherwise provide written notification of the initial IFSP meeting to meeting participants in advance of the meeting.

(b) Periodic reviews of the IFSP shall occur every one hundred eighty calendar days, more frequently when the family requests such a review; or within forty-five calendar days of program referral for any child who transfers early intervention service coordination contractors within Ohio.

(i) A periodic review occurs to determine the degree to which

measurable progress toward achieving the outcomes identified in the IFSP is being made and whether modification or revision of the outcomes or services identified in the IFSP is necessary.

(ii) A periodic review shall be carried out by a meeting or another means that is acceptable to the parent.

(iii) The service coordinator shall ensure the revised IFSP is mailed, delivered, emailed or otherwise provided to the parent for the parent's signature; and

(iv) After the parent signs a revised IFSP, one copy of the revised sections of the IFSP shall be provided to the parent and service providers, with parent consent.

(c) The IFSP is evaluated during a meeting at least annually.

(i) Annual IFSP meetings shall include the current evaluations and child and family-directed assessments, and other information available from the child and family to determine the early intervention services necessary.

(ii) Annual meetings to evaluate the child's IFSP shall occur with a multidisciplinary team including, at a minimum, the parent of the child, other family members when requested by the parent, an advocate or person outside of the family when requested by the parent, the child's service coordinator, and one person who conducted the most recent evaluation or assessment of the child.

(iii) If the evaluator or assessor cannot attend the meeting in person, arrangements shall be made for the person's involvement using the telephone, by having a knowledgeable authorized representative attend in their place, or making pertinent records available at the meeting.

(iv) Any individual who will be providing early intervention services should attend the meeting when appropriate to the specific and individual needs of the child.

(v) Using form HEA 8039 (effective July 1, 2012), the child's service coordinator shall mail, deliver, email or otherwise provide written notification of the annual IFSP meeting to meeting participants no less than ten calendar days in advance of the meeting.

(d) All IFSP meetings shall be:

(i) Conducted in settings and at times that are convenient and agreed

upon by the parents; and

(ii) Conducted in the native language of the parent or other mode of communication used by the family, unless it is clearly not feasible to do so.

(3) Each child's parent shall be informed prior to their child turning eighteen months of age that contact information will be shared with the local education agency unless the parent opts out on the IFSP signature page. For children who are determined eligible for early intervention at or after eighteen months of age, the parent shall be informed prior to the initial IFSP development that contact information will be shared with the local education agency unless the parent opts out on the initial IFSP signature page.

(a) Early intervention service coordination contractors shall send the local education agency report for all local education agencies in the counties of contracted service by the first day of every February, May, August, and November; with data run from the statewide data system no more than ten calendar days in advance of the deadline.

(4) For children who are at least two years and three months old, the IFSP shall include steps that will be taken and services that will be provided on section eight of form HEA 7720 (effective July 1, 2012) to support a smooth transition of the child from HMG early intervention to either preschool special education services or other appropriate services. Early intervention service coordination contractors shall ensure:

(a) Every child who is at least two years and three months old has at least one written transition outcome; and

(b) The transition outcome shall identify the discussions with, and training of parents, regarding future placements, and procedures to prepare the child for changes in service delivery, including steps to help the child adjust to and function in a new setting.

(5) For every child in HMG early intervention, a transition planning conference shall be held no less than ninety calendar days, but not more than nine months prior to the child's third birthday. For a child who is potentially eligible for special education pre-school, the local education agency shall be notified of the child's potential eligibility, and with parent consent, a representative shall be invited to the transition planning conference.

(6) A copy of the IFSP shall be provided either electronically or in paper hard copy at no cost, to every child's parent and offered, with parent consent on form HEA 8019 (effective July 1, 2012), to each service provider identified on the child's IFSP within ten calendar days after obtaining the parent's signature on the IFSP.

(B) An interim IFSP may be developed when exceptional family circumstances make it impossible to complete the child assessment before the needed services begin. An interim IFSP is available for a child who is eligible because of a diagnosed physical or mental condition, in accordance with Appendix 07 - A of rule 3701-8-07 of the Administrative Code, as long as:

(1) Parental consent is obtained;

(2) The interim IFSP includes the name of the service coordinator and the early intervention services that are needed immediately by the child and the child's family; and

(3) The required child assessment and IFSP are completed within forty-five calendar days after referral.

(C) When the service coordinator suspects the family may be eligible for HMG home visiting, the service coordination contractor shall ensure the service coordinator:

(1) Discusses the home visiting program, goals, and services with the family;

(2) Asks the parent if they consent to the service coordinator contacting the centralized coordination contractor; and

(3) With parent consent, informs the centralized coordination contractor about the potentially eligible family by making a system referral for the family to HMG home visiting.

(D) Early intervention service coordination contractors shall ensure that each child in early intervention is assigned one service coordinator, who will serve the family as the service coordinator, as soon as possible after program referral, but in enough time to complete service coordination activities in the time lines required. In addition, early intervention service coordination contractors shall ensure that service coordinators meet the qualifications as required in rule 3701-8-03 of the Administrative Code and:

(1) Act as the single point of program contact for carrying out the activities of service coordination;

(2) Explain activities to the parent before parent consent is sought;

(3) Provide the parent with a written copy of early intervention parent's rights in their native language, unless it is clearly not feasible to do so;

(4) Assist the parent in gaining access to, and coordinating the provision of, the early intervention services the child and child's family needs, including making referrals to providers for needed services and scheduling

appointments;

(5) Coordinate evaluations and assessments;

(6) Facilitate and participate in the development, implementation, review, and meetings to evaluate IFSPs;

(7) Coordinate, facilitate, and monitor the delivery of early intervention services to ensure that services the child needs start within thirty calendar days of the parent signing the IFSP; except when the family has an exceptional family circumstance which keeps the family from being able to receive the service within thirty calendar days after signing the IFSP;

(8) Coordinate the funding sources for early intervention services needed; and

(9) Facilitate the development of a transition plan from early intervention to special education pre-school, if appropriate, or other services, in accordance with paragraphs (A)(4) and (A)(5) of this rule.

(E) A child shall be exited from HMG early intervention when any one of the following is true:

(1) The child reaches three years of age;

(2) The child's IFSP outcomes have been met and the child's IFSP team members agree the child does not need additional outcomes;

(3) The child is determined eligible, but not in need of early intervention services, in accordance with paragraph (E) of rule 3701-8-07 of the Administrative Code or the child does not complete required assessment procedures;

(4) The child has been evaluated in accordance with paragraph (B)(4)(b) of rule 3701-8-07 of the Administrative Code and the developmental evaluation tool does not indicate a developmental delay of at least one and one half standard deviations below the mean in at least one of the following areas: adaptive, cognitive, communication, physical, and social or emotional development; informed clinical opinion is not used for eligibility; or the child does not complete required eligibility procedures;

(5) The parent terminates program participation; or

(6) The child moves out of the state of Ohio.

(F) Early intervention service coordination contractors shall inform the centralized coordination contractor every time:

(1) A child or family needs to change early intervention service coordination

contractors; or

(2) A referral for a child is received from the family or another referral source. Contractors shall not serve a family who has not been assigned by the centralized coordination contractor through a program referral.

(G) When the referral source is a professional, early intervention service coordination contractors shall, with parent consent, provide a follow-up to the referral source on form HEA 8037 (effective July 1, 2012) within forty-five calendar days after receiving the program referral.

(H) Early intervention service coordination contractors, upon execution of a contract or other agreement with the department to provide services, shall ensure that funds provided by the department, will not supplant other federal, state, or local funds in place to serve the population of infants and toddlers with disabilities or developmental delays. The following HMG early intervention services shall be provided at no cost to families:

(1) Screening, developmental evaluation, child assessment, and family-directed assessment;

(2) Development, review, and meetings to evaluate IFSPs;

(3) Service coordination;

(4) Procedural safeguards; and

(5) Transition planning.

(I) Early intervention service coordination contractors shall designate one individual as the contract manager who is responsible for oversight and monitoring of the required activities of the grant, contract or agreement.

(J) Early intervention service coordination contractors shall ensure that service coordinators are supervised by an individual who is qualified, in accordance with rule 3701-8-03 of the Administrative Code.

(1) Supervision includes ensuring that service coordinators adhere to program requirements, timelines, and documentation in accordance with rules 3701-8-07 and 3701-8-07.1 of the Administrative Code and

(2) Supervision is documented.

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