

EARLY INTERVENTION SERVICES THROUGH PART C AND HELP ME GROW

FEDERAL AND STATE LEVELS

Certain Early Intervention Services for Infants and Toddlers with Developmental Disabilities are required under Federal law: the Early Intervention Program for Infants and Toddlers with Disabilities (Part C) under IDEA—the Individuals with Disabilities Education Act.

Federal law stipulates 17 services each state must make available for children ages 0 to 3, and requires that those services are provided in natural environments to the maximum extent appropriate and provided by qualified personnel as defined by federal law.

IDEA also requires an assessment of the each child's unique strengths and needs, a family-directed assessment of the family's resources, priorities and concerns; and a written Individualized Family Service Plan (IFSP) developed by a multidisciplinary team. The IFSP must include measurable outcome goals for the child and a statement of specific early intervention services based on peer-reviewed research necessary to meet the unique needs of the child and family

The Ohio Department Health (ODH) is the lead agency coordinating these required Early Intervention(EI) services for Ohio. Services are coordinated through the Help Me Grow Program. Following Federal requirements, Ohio's Help Me Grow Program identifies four goals:

1. Enhance the development of infants and toddlers with disabilities
2. Reduce educational costs by minimizing the need for special education
3. Minimize the likelihood of institutionalization and maximize independent living
4. Enhance the capacity of families to meet their child's developmental needs

COUNTY LEVEL

The Help Me Grow Program ensures required early intervention services are provided statewide. Because Ohio operates on a county system, services are implemented at the county level, under ODH regulation. All counties are required to make the 17 early intervention services available in some way. The services are offered through EI providers, including Ohio's 88 County Boards of Developmental Disabilities. Every county must have service coordination professionals, whose roles are to coordinate Part C services for the family across all agency lines. In some cases the service coordinators are employed at the County Board of DD, while in others they are employed at different county agencies (such as the county Health department). In addition, some counties have qualified personnel on staff to provide various services (e.g., speech therapy), while in other cases counties seek out providers of services elsewhere.

The state also has an administrative process for families to utilize if they feel their Part C options are not provided.

PROCESS FOR DEVELOPING APPROPRIATE OUTCOMES AND DETERMINING NECESSARY HELP ME GROW SERVICES

Evaluation: An Evaluation Team evaluates the child for eligibility of Help Me Grow (Part C) early intervention services.

Child Assessment: The child's developmental strengths and needs are assessed.

Family Assessment: Under the family's direction, the family's resources, priorities and concerns are assessed, as well as identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of the child.

Team Develops Measurable Outcomes: A team develops measurable and achievable outcomes for the child and family based on assessment information. Team includes parents, service coordinator, assessment individual, any providers identified, anyone the parent invites. There may be several outcomes identified. An outcome must be developed in accordance with federal and state law, and is based on what the team reasonably expects the child to be able to do. Outcomes consider what the child needs and what the family needs to support that development.

Example of a measurable outcome: *Johnny should begin forming words in the next six months.*

Not a measurable outcome: *Johnny should have six months of speech therapy.*

Team Determines Services Necessary: Once outcomes are developed, the team determines what services are necessary to support each outcome. *Federal law requires 17 services be provided or available to the family, and stipulates that services should be provided by qualified personnel in natural environments (working with the child in his daily routines or interactions).*

A Family IFSP is Written: The outcomes and services are documented in an IFSP, which must be completed according to federal and state laws. The IFSP must show the outcomes as measurable and achievable; describe the frequency, intensity and duration; and indicate services are provided in natural environments or show adequate explanation why not.

Note: ODH provides training to the counties on how to develop an IFSP, including how to develop viable outcomes.

Consent Required: Parent or guardian must provide written consent of the IFSP before services are to be provided.

Review and Update: IFSP and progress are reviewed every six months and the IFSP is evaluated for needed revision at least annually.

CLERMONT COUNTY HIGHLIGHTS

While all counties must provide the required EI services in some way, the Clermont County Board of DD provides a broad array of Early Intervention services through its own staff and programs.

- Board staff includes: Occupational therapists, physical therapists, speech language pathologists and early intervention specialists.
- The Help Me Grow Service Coordinator is also on staff at the Board.
- Finally, the Clermont EI service team has completed training on *Evidence-based Early Intervention Services using a Team Approach*. This training includes guidance on how to form an EI team and how to come together to develop outcomes that meet the family's support needs.

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SEVENTEEN SERVICES IDENTIFIED UNDER PART C

Assistive technology service

Audiology services

Family training, counseling and home visits

Health services (limited to health services required to enable child to benefit from EI services; does not include surgical services or purely medical services)

Medical services (provided by a licensed physician to perform diagnostic or evaluation services to determine child's developmental status)

Nursing services

Nutrition services

Occupational therapy

Physical therapy

Psychological services

Service coordination

Sign language and cued language services

Social work services

Special instruction

Speech-language pathology

Transportation and related costs (as needed to provide EI services only)

Vision services

Miscellaneous Notes on County Board of DD Involvement:

Part C requires that every county make the EI services available. For the most part these services are coordinated through the County Boards of DD, but not all. In several cases there are additional providers other than the County Boards. In select cases where a County Board does not have the resources, it may not be a provider of any EI services. Morrow County is an example. Jackson and Vinton have had at times and other times have not. Most County Boards of DD are involved in EI services.