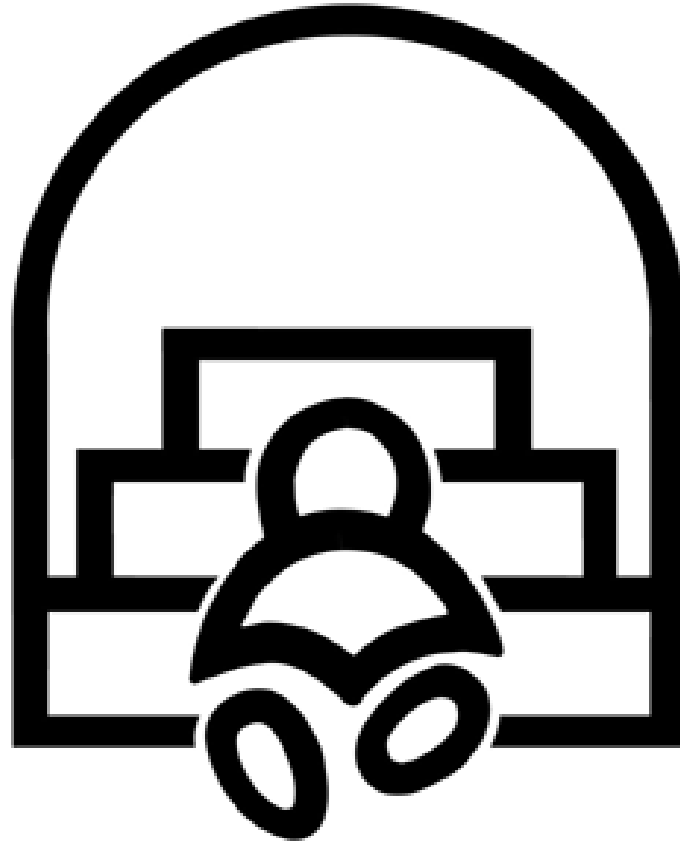


Indiana's Early Intervention System



First Steps

**Service Coordination Orientation Training
Module 4 –**

Evaluation and Assessment

Participant Materials

Training course for Indiana First Steps Early Intervention System 1/2008

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Introduction

Module Three focused on the referral and intake/planning phases of the pathways to early intervention. The same visual diagram outlining the pathway that appeared in Module Three is also included in Module Four.

Module 4 continues along the pathway and focuses on the processes of evaluation and assessment to determine eligibility which can then result in enrollment in First Steps. The procedures that follow are written in general terms since this is a statewide training. Service coordinators are encouraged to contact their supervisors about specific SPOE procedures.

Training Materials Needed

To complete Service Coordination Module 4, you need a computer with Internet access and the following:

- Participant Materials for Module 4
- PowerPoint slides for Module 4
- 3-ring binder – the same binder assimilated in Module 1
- Folder(s) to keep downloaded material
- First Steps Practice Manual
- First Steps Forms – indicated throughout the participant material

Training Objectives

- Understand the eligibility determination process designed for Indiana's First Steps System.
- Learn the definitions of evaluation and assessment and understand how the two activities complement each other to determine a child's eligibility.
- Understand Indiana's broad definition of eligibility.
- Learn the role of the Assessment, Evaluation, and Programming System (AEPS) tool used to determine a child's eligibility.
- Understand the options available to parents based on the results of eligibility determination.
- Learn of the importance of the eligibility determination meeting and when it takes place.



Pathway to Early Intervention Services

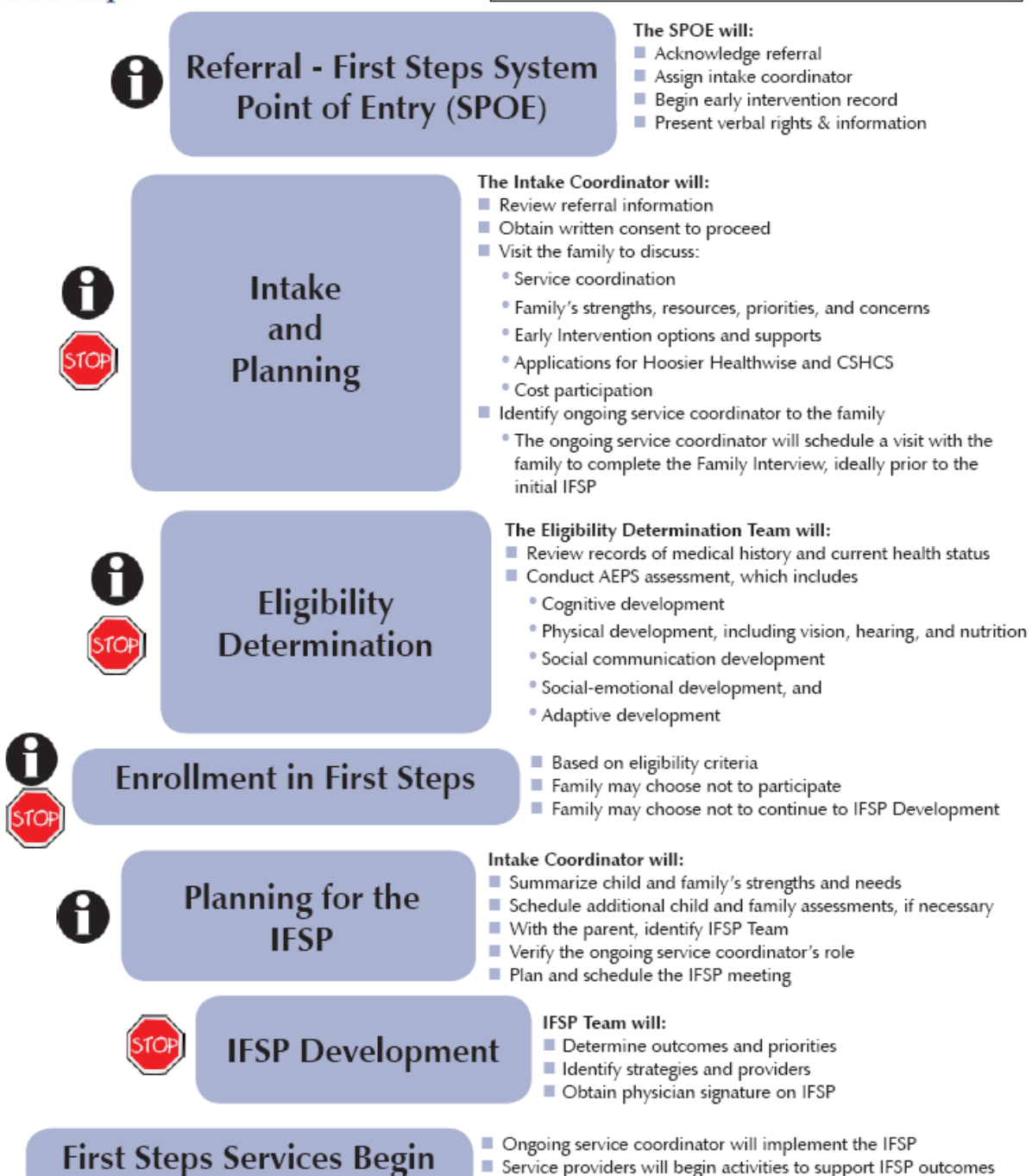
Symbols Key



Informed Rights and Procedural Safeguards given to family.



Parent declines or child not eligible.



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Evaluation and Assessment

During the intake meeting, the service coordinator responsible for intake explained the evaluation and assessment process to the parents and obtained the family's written permission to proceed with the developmental evaluation to determine eligibility. Additionally, the service coordinator responsible for intake asked the ED Team Scheduler to contact the family to schedule the evaluation meeting. The family was given an oral and written notice of the evaluation meeting to be conducted by the ED Team members.

The following section of Module Four focuses on Indiana's definition of eligibility as well as the actual eligibility determination process that leads to the eligibility determination meeting. Both intake and ongoing service coordinators must be aware of the concepts involved in eligibility determination to be able to explain it to the families and answer any questions they might have.

Indiana's Eligibility Definition

Each state is responsible for defining its eligible population within the parameters set by IDEA. Indiana has a broad eligibility definition. Eligible children must

- have a medical condition that has a high probability of resulting in a developmental delay or a developmental delay
- be between birth and their 3rd birthday.
- be in need of early intervention services.

Eligibility is determined by a multidisciplinary team using multiple sources of information and must be re-determined annually. Indiana has two categories of eligibility: high probability of developmental delay and developmental delay.

High Probability of Developmental Delay

In order to be eligible in this category the child must have a diagnosed physical or mental condition that has a high probability of resulting in developmental delay. Specific diagnoses and conditions of eligibility are defined in Indiana law. These diagnoses and conditions must be supported by a physician or psychologist indicating what the physical or mental condition is and a multidisciplinary evaluation report that early intervention services are needed. The categories include:

1. Chromosomal abnormalities or genetic disorder
2. Neurological disorder

3. Congenital disorder
4. Sensory impairment including vision and hearing
5. Severe toxic exposure, including prenatal exposure
6. Neurological abnormality in the newborn period
7. Low birth weight of less than or equal to one thousand five hundred (1500) grams, which is equivalent to 3.1 pounds

Developmental Delay

Children shall be considered eligible to receive early intervention services if they are experiencing developmental delays, as measured by standardized assessments or criterion-referenced measures. A developmental delay is defined as:

- (1) delay in one or more areas of development as determined by:
 - (A) two (2) standard deviations below the mean; or
 - (B) twenty-five percent (25%) or more in function below the chronological age (adjusted for prematurity, if applicable) on an assessment instrument that yields scores in months; or
- (2) a delay in two (2) or more areas of development as determined by:
 - (A) one and one half (1 ½) standard deviations below the mean; or
 - (B) twenty percent (20%) or more in function below the chronological age (adjusted for prematurity, if applicable) on an assessment instrument that yields scores in months (Rule 7. Eligibility 470IAC3.1-7-1).

The five developmental domains are as follows:

- cognitive development
- physical development, including vision, hearing, and fine and gross motor skills
- communication development
- social/emotional development
- adaptive development

Developmental Domain: What does it mean?

Developmental Areas	What is Assessed
Cognition	How a child learns and solves problems.
Physical Development	How a child moves, uses manipulation skills, and how a child sees and hears.
Communication	How a child lets the world know his/her wants and needs. How a child understands and uses language (both verbal and nonverbal).
Social or Emotional	How a child relates and interacts with both objects and people.
Adaptive or Self-care	How a child eats, dresses, and takes care of other needs

Informed Clinical Opinion

In rare instances, eligibility may be determined using informed clinical opinion when the standardized assessments or criterion referenced measures are not appropriate because of a child's age or disability. When developmental delay is determined by informed clinical opinion of the early intervention team (including the parents), it must be justified with direct observation data and rationale to support eligibility and the need for services, including:

- a complete developmental history, as currently reported by the parent or primary caregiver
- a review of pertinent records related to the child's current health status and medical history.
- consideration given for functional status, rate of change and prognosis for change in the near future based on anticipated medical or health factors
- at least one other assessment procedure to document delayed development, such as observational assessment or planned observation of the child's behaviors and parent child interaction or documentation of delayed development by use of non-standardized assessment devices, such as developmental checklists (IAC 3.1-7-1)

Eligibility Determination Process

Eligibility determination occurs at designated intervals. Initial eligibility determination must occur within 45 calendar days of referral. Eligibility is then re-determined annually.

Both the initial and annual eligibility for the First Steps Early Intervention System must be determined by the involvement of a multidisciplinary team (MDT). This team is comprised of the following members:

- family
- service coordinator working with the family
- ED Team members (2 disciplines)
- Child's primary care physician

The ED Team performs an initial evaluation and assessment and reports the results to the multidisciplinary team, which then determines eligibility. The ED Team must have two or more professionals in different disciplines which must come from the following areas:

- Physical therapist
- Occupational therapist
- Speech therapist
- Developmental therapist

ED Team members are not eligible to provide ongoing direct services (therapy) within the county or zip code(s) in which they serve as an ED Team member.

Each team has a single point-of-contact called the scheduler. This individual works closely with the intake and ongoing service coordinators and is responsible for:

- Organizing and scheduling evaluations and assessments
 - The scheduler contacts the family within 2 SPOE business days and arranges the evaluation to occur within 10 SPOE business days.
 - Once the appointment with the child/family is scheduled, the Scheduler contacts the service coordinator responsible for intake to inform him/her of the scheduled appointment date, time, and place. This will allow the service coordinator responsible for intake to schedule the eligibility determination and IFSP meetings and provide the family with the required 10-day written notice.



-
- Distributing reports to intake coordinator.

The ED Team uses multiple sources of information to evaluate and assess for First Steps eligibility. The scheduler will forward the following documents to the ED Team members to use during their evaluation and assessment:

- The Referral form
- The Social History section from the Combined enrollment form, which includes basic information such as date of birth, family members, and basic health history
- Concerns and priorities of the family
- Permission to Evaluate/Proceed
- Reciprocal Consent
- Other supporting documentation, if available (including the Physician's Health summary, copies of any screening, assessment or other reports by community and preschool providers, etc.) or summary of health/medical status

Evaluation and Assessment Tool

As of October 1, 2006, the Bureau of Child Development Services has mandated that the Eligibility Determination teams must use the Assessment Evaluation and Programming System (AEPS) tool to assist in determining the level of developmental delay in all five domains. Standardizing this process assures that all First Steps children across the state are being evaluated and assessed in the same format. ED Team members are approved by the state and receive training in Indiana's Part C eligibility definition and the state approved evaluation/assessment tool.

The AEPS area goal scores determine eligibility through a standard deviation score. The ED Team is responsible for completing all sections of the evaluation report of the AEPS, and the service coordinator is responsible for ensuring the evaluation report has been completed correctly.

The use of the AEPS® assessment to determine eligibility produces at least three important benefits.

1. First, the AEPS ® assessment is a comprehensive curriculum-based assessment. Therefore, the information derived from the AEPS ® assessment during eligibility determination can be used for multiple purposes:
 - a. To help establish eligibility for services.
 - b. To develop meaningful, functional, and developmentally appropriate outcomes/goals.

-
- c. To create effective intervention content and procedures.
 2. A second benefit accrues because agency and program personnel can save time and valuable resources. Administration of the AEPS ® assessment can be done by a wide variety of personnel and adults who are familiar with the child, giving SPOEs and ED Teams flexibility in who is involved and coordination of assessment efforts.
 3. Third, using the AEPS ® assessment to determine eligibility meets all Division of Early Childhood recommended assessment practices (Sandall et al., 2005) as well as the recommendations of the President's Commission on Excellence in Special Education 2002. The assessment recommendations issued by these bodies represent the most current and effective information available to the field of EI/ECSE (Pretti-Frontczak, p.5-7).

Eligibility Determination Results

Eligibility determination will result in one of the three findings below:

- Child is eligible and in need of services. Proceed to development of an IFSP.
- Child is eligible, but currently not in need of services. The family will receive information on their rights, child's current developmental level, community supports/services, and First Steps contact information should they have further concerns or the child's status changes.
- Child is not eligible and does not need services. The family receives information on their rights, the child's current developmental level, community supports/services, and First Steps contact information should they have further concerns or the child's status changes.

Eligibility Form

Eligibility must be clearly documented. Indiana uses a standardized eligibility form on which to record the results of the initial evaluation. This form is called First Steps Part C Eligibility Determination Statement (State Form 50054). It is often referred to as the Eligibility Form. Each child must be identified as having either a documented medical diagnosis/condition that has a high probability of resulting in developmental delay or a documented developmental delay.

Even if a child is not found eligible as a result of having the AEPS assessment completed, the same eligibility form must be completed.



Go to <http://www.in.gov/fssa/ddrs/2817.htm> and click on First Steps Part C Eligibility Determination Statement SF 50054 to review the form used in Indiana.

Entitlements

The First Steps Early Intervention System, under federal and state regulations, must provide certain services at no cost to all families, including those activities designed to identify potentially eligible infants and toddlers and determine those early intervention services that are appropriate for each individual child and family. Some services are available to all families, and some are available only to eligible families. Services which are entitlements or no cost to families include:

- Evaluation/Assessments (as needed, available for all families)
- Individual Family Service Plan (IFSP) Development (for eligible families)
- Procedural Safeguards (available for all families)
- Child Find (available for all families)
- Service Coordination (available for eligible families)

Therefore, should a child be found eligible but not in need of services, the family can still participate at the entitlement level.

Eligibility Determination and Planning

AEPS Report

After the evaluations are completed, the ED Team prepares a comprehensive, multidisciplinary report of the assessment activity of the child and family. The ED Team also designates a member of the team to serve as the Lead ED Team member. It is this member who forwards the ED Team report to the intake coordinator within **2** SPOE business days of the evaluation meeting. The service coordinator responsible for intake will review the report. If necessary, the intake coordinator must contact the ED Team members to discuss and get clarification prior to the eligibility determination meeting. Once the intake coordinator fully understands the report, then the intake coordinator mails it to the family. The intake coordinator then contacts the family to review the evaluation. At this



time, families can make an informed decision to hold the eligibility/IFSP meeting. If the family chooses to proceed, the intake coordinator confirms the date of the meeting. If a 10-day notice has not been provided, one must be issued to the family and the team. A 10-day prior, written notice must be sent before the eligibility/IFSP meeting with the family can be held.

Ongoing Service Coordinator Assigned

Once the AEPS report is returned to the intake coordinator, the SPOE assigns an ongoing service coordinator who then becomes involved with the families from this point on. The intake coordinator is still responsible for all service coordination activities leading up to the IFSP development and contacts the families to inform them of their ongoing service coordinator.

The newly assigned ongoing service coordinator then contacts the family to complete the family interview. Ideally, the ongoing service coordinator meets with the family 15-30 minutes before the eligibility determination/IFSP meeting begins to complete the interview. This allows the family an opportunity to meet the service coordinator who works with them after the initial IFSP is written and to begin a working relationship with the new service coordinator. Additionally, this allows the ongoing service coordinator to attend the IFSP development meeting.

Family Interview/Exit Interview

The family interview occurs between the evaluation and assessment phase and the eligibility determination meeting and is most often the responsibility of the ongoing service coordinator. However, the intake coordinator may complete this step.

The interview has two functional purposes:

1. it is a tool to be used by the multidisciplinary team to assist the family in writing outcomes on the IFSP.
2. it gathers data for the First Steps System accountability and allows First Steps to measure family outcomes.

Therefore, ideally, the family interview will take place before the eligibility/IFSP meeting. The ongoing service coordinator has a conversation with the family to determine its priorities and concerns. The interview focuses on the child's present level of development, where in the family's daily routine the family sees the need for assistance, and what resources and needs the family identifies.

If the ongoing service coordinator cannot attend the eligibility/IFSP meeting to interview the family, he/she must meet face-to-face with the family within 30 days of the date the IFSP was written.

The family has an exit interview that takes place when the family exits First Steps. More information about this interview is provided in Module Seven.

Preparing for the Eligibility Meeting

The intake coordinator then prepares for the eligibility/IFSP meeting by compiling the necessary paperwork:

1. Indiana Eligibility Form
2. blank IFSP form – the IFSP form should not be completed before the eligibility/IFSP meeting because the IFSP is to reflect the families' needs, priorities, and concerns.
3. copies of the ED Team report and any other documents that may help determine eligibility
4. copies of matrices for each direct service provider for each domain area of concern

During the intake meeting, the service coordinator explained the Matrix system to the families and asked them to do some research by going to the web and reading the matrices of the providers who might be able to work with their children. This is one way to get the families involved in the care of their children.

If the families do not have access to the internet, the intake coordinator is encouraged to mail hard copies of all matrices for direct service providers who provide services in the designated service areas to the families before the eligibility meeting. This, too, allows the families to get involved in the care of their children.

Enrollment in First Steps

Eligibility Determination Meeting



The eligibility determination meeting must occur before the initial IFSP meeting. Most commonly, the intake coordinator will schedule the eligibility/ initial IFSP meeting for the same day. However, parents may request to schedule two separate meetings. This

means that the team meets one day to discuss and determine eligibility and schedules another meeting to write the IFSP remembering that the IFSP must be written within 45 calendar days from the date of referral.

The intent of the eligibility meeting is to summarize the findings of the initial assessment and to formally establish and document the child's eligibility. Indiana's early intervention system has a standardized Eligibility Form, which must be completed at the eligibility meeting.

Eligibility Determination Meeting Agenda

Service coordinators should follow the agenda below when conducting an eligibility meeting:

- Introductions of all attendees, first and last name and specialty area, lead by SC responsible for intake
- SC responsible for intake briefly discusses intent of the meeting:
 - To discuss the child's potential eligibility
 - To discuss the information from the ED Team assessment activity
 - To insure the family understands its rights and responsibilities
- Entire report is discussed by the ED Team member. The ED Team member summarizes what he/she saw during the assessment activity – family has opportunity to ask questions.
- Eligibility is discussed – is the child eligible; how is child eligible? Is the child in need of First Steps services? Utilize Section Three (3) of the IFSP.

Eligibility is discussed by all attendees. At the end of every eligibility determination meeting, the service coordinator completes the First Steps Part C Eligibility Determination Statement (State Form 50054) and provides a list at the bottom of the form of everyone who was involved in determining the child's eligibility (which must include the family, the service coordinator, and the two ED Team members from two different disciplines).



The family must sign the Eligibility Form (State Form 50054) as well as the service coordinator and all other team members. If the physician and ED Team members are not present, the service coordinator can write "Per Report" in the area for their signatures.



The service coordinator must identify the two disciplines determining eligibility by domain area. Near the bottom of the Eligibility Form (State Form 50054) is an area that asks for 1st Discipline and 2nd Discipline to be completed. This verifies that the procedural safeguard requiring that the multidisciplinary team consisted of professionals from two different disciplines was followed.

Once the Eligibility Form (State Form 50054) has been signed by all members of the team, the child has been enrolled in First Steps, and the team is ready to begin the development of the IFSP.

Evaluation and Assessment

The terms evaluation and assessment have been used in the previous discussion about eligibility determination and IFSP development. The two have different meanings and purposes in the First Steps System.

The term **evaluation** is used to describe the process of reviewing all information (including the referral form, any existing child assessment reports by community and preschool providers, the family interview, the combined enrollment form, etc.) relating to a child's development for the purpose of determining initial and annual eligibility. As stated previously, the evaluation is conducted by members of a multidisciplinary team and is completed annually to re-determine eligibility. Written parental consent with prior written notice is required before the evaluation for eligibility can begin.

In an ED Team evaluation, providers from a variety of disciplines evaluate the child in all domains and interview the family at the same time. One team member may provide direct interaction with the family/child, while the other team member may observe and record findings.

The term **assessment** refers to the ongoing performance of activities to determine the unique strengths and needs of a child or family. As mentioned earlier, Indiana requires all ED Teams to use the AEPS to assess a child's developmental status across the five domains as part of the initial and annual determination of eligibility. However, this more formal assessment is not required every quarter or six months. Instead, the providers should be performing regular ongoing assessments of the child and his/her progress toward the IFSP outcomes and documenting this in their IFSP progress reports and clinical notes. All direct service providers can use the state approved tool (AEPS) when assessing children on an ongoing basis

and in planning and implementing intervention strategies as the AEPS is curriculum based. However, some providers may choose to use tools more appropriate to the individualized needs of the child.

Assessments help the family and other members of the IFSP team learn more about the child's strengths and needs and what s/he is ready to learn. To get the best results, assessment information should be gathered during observations of the child at home, in playgroups, or in community settings where the child is comfortable and more easily interacts with his/her environment.

Additional information on evaluation and assessment can be found in the Practice Manual.

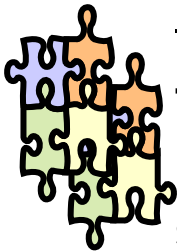
Summary

Module Four moved along the pathway to early intervention services and focused on evaluation and assessment to determine eligibility and enrollment into First Steps. Future modules focus on IFSP development, ongoing service coordination, and transition.

In order to complete this module and advance to the next one, you need to complete the Application Station exercises, which begin on the next page. Discuss any questions or concerns that you have at this time with your Service Coordinator Supervisor or SPOE Supervisor.

Reference List

- Indiana Administrative Code. Title 470 Division of Family Resources. Article 3.1, First Steps Early Intervention System. Indiana Register.
- Pretti-Frontczak, Kristi, Ph.D. (2006). *Supporting document for use of the AEPS® to determine eligibility for Indiana Part C teams*. Unpublished Manuscript, Kent State University.



The Application Station... Connecting all the puzzle pieces

Service Coordination Module 4 Assignments

SC Name: _____

Cluster: _____

Email: _____

Number pages faxed including cover page: ____ (Submit all documents at once.)

Complete the following assignments. Once you have completed **all** of the assignments for this module, please sign and date the forms and have your supervisor sign the forms. Then, **save** all of the completed documents because you will be submitting them to UTS at the end of Module 7, which is the last module of the training.

1. Read the two family scenarios, which can be found on page 18, and identify the family needs. Document if these are needs that can be met by First Step services or local services within your community. Identify the community services if they are known. Document your findings on page 19 and **submit** the completed form.

2. Schedule a time to meet with the ED Team scheduler and discuss the ED Team process with the team you will contact the most. Document your findings from the meeting on the form provided on page 20. **Submit** the completed form. Here are questions for you to consider in your discussion:

- How are new referrals/assessments processed and scheduled?
- How quickly are evaluation/assessment reports faxed to the service coordinator?
- For questions pertaining to the reports, whom should the service coordinator contact?
- Any other pertinent information?

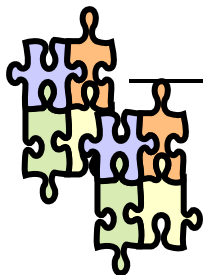
3. Schedule a time to attend two (2) ED Team evaluations or assessments. Document your observations on the forms that can be found on pages 21 and 22. You will want to make copies so that you can document both meetings. **Submit** these forms.

Service Coordinator signature: _____

Service Coordinator Supervisor signature: _____

Date _____

UTS/ProKids Office Only: Date received _____ Initials _____

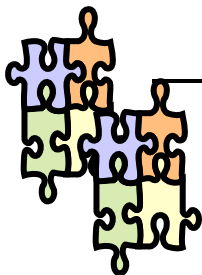


Scenario One

Ali Davis was born at 27 weeks gestation and is the first child for Ron and Kathy Davis. During her four month NICU hospitalization, Ali was diagnosed with bleeding on the brain which required a shunt placement. Her lungs were underdeveloped causing respiratory failure, and she has failed three vision and hearing screenings. Kathy has always worked full-time but has decided to stay home to take care of Ali. The physicians are uncertain about Ali's future and what her developmental skills will be. The social worker at the hospital gave Kathy information about First Steps. Kathy and Ron contacted First Steps and met with their service coordinator. During this meeting they shared frustration and feelings of being overwhelmed with their medical bills. Their private insurance has a large deductible, and it will only cover 70% of their medical expense. Ron has also been informed that his company is down sizing, and he is going to have to take a 5% pay cut. How can First Steps assist the Davis Family and what resources outside of First Steps are available in your community to assist this family?

Scenario Two

Joshua is a two year old boy who lives with his parents and his three year old sister, Sadie. Joshua's mother, Carrie, heard about a developmental screening at their local elementary school. She decided to take Joshua and Sadie to the screening because she is concerned about Joshua's speech. He currently is not using any words, and his parents are worried about his hearing. At the screening it was recommended that Carrie contact First Steps, as Joshua did not score well on the screening. First Steps met with Carrie and discussed completing further evaluations. How can First Steps assist this family and what resources outside of First Steps are available in your community to assist this family?



Module 4
Service Coordination Application Station
Scenario Responses

SC Name: _____

Cluster: _____

Phone No.: _____

E-mail: _____

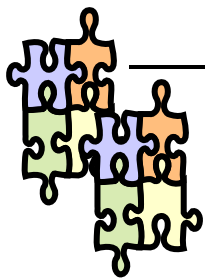
Scenario One: Record your responses to the Ali Davis scenario here.

Scenario Two: Record your responses to the Joshua scenario here.

Service Coordinator signature: _____

Service Coordinator Supervisor Initials: _____

Date _____



Module 4
Service Coordination Application Station
ED Team Evaluation Observation

SC Name: _____

Cluster Letter: _____

Phone# : (____) _____

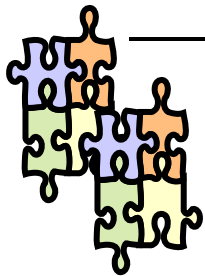
Email Address: _____

Date of Observation: _____

ED Team member Name:

ED Team Member Signature:

1. Describe the process observed (try to identify how the Ed team interacted with family, what questions/concerns did the family have, did the Ed team explain eligibility to the family?).



Module 4
Service Coordination Application Station
ED Team Evaluation Observation

SC Name: _____

Cluster: _____

2. List your impressions, comments, and observations regarding the session.

Service Coordinator signature: _____

Service Coordinator Supervisor initials: _____

Date _____

Page 2 of 2