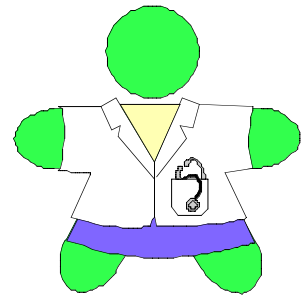
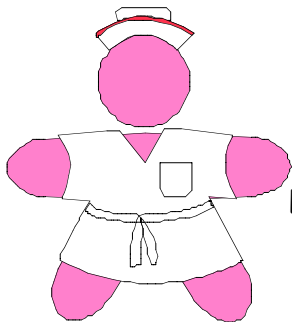


Physicians, Health Care Providers & Early Intervention

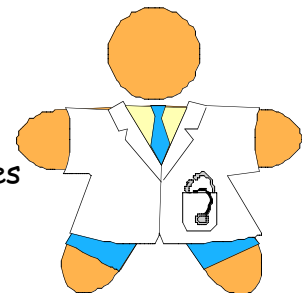


Introduction to Early Intervention Services in Kansas

The hard copy version of this packet contains the article “Pediatricians and early intervention: Everything you need to know but are too busy to ask” by Richard Solomon in *Infants and Young Children*, 7(3), pp. 38-50, copyright 1995 by Aspen Publishers, Inc.



Compiled by Vera Lynne Stroup-Rentier, M.Ed. &
David P. Lindeman, Ph.D.
March 2002
Kansas Inservice Training System
Kansas University Center on Developmental Disabilities
2601 Gabriel, Parsons, KS 67357
620-421-6550 ext. 1618
kskits.org



Physicians, Health Care Providers and Early Intervention: Everything you need to know but are too busy to ask

Why do you need to know about early intervention?

Research shows that children's growth and development are most rapid in the early years of life. The earlier in a child's life that problems or potential risks are identified, the greater the chance of eliminating or minimizing existing problems or preventing future problems through early intervention. Physicians are key to early identification and referral. Their routine contacts with children and families can be the gateway for the provision of early intervention services.

Early intervention programs have been proven effective. Early intervention is important because:

- ◆ It increases the child's potential and readiness for school;
- ◆ It decreases the need for costly special education program later;
- ◆ It provides support to parents to meet the needs of their child; and
- ◆ It minimizes the likelihood of institutionalization, again saving costs.

Early intervention coordinates existing resources rather than adding new ones. Interagency coordination reduces the fragmentation and duplication of services resulting in more effective use of existing resources. Early intervention works with existing medical/health programs to provide additional resources to support the child and family.

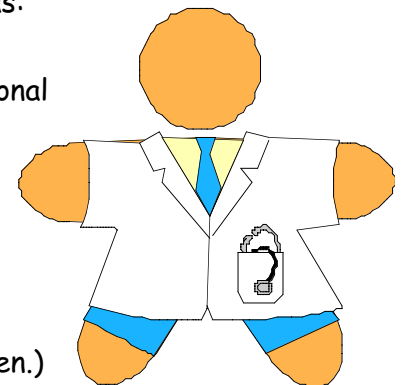
Who can receive early intervention services?

Early intervention is for children from birth to three years of age, who have developmental disabilities. Children in Kansas are eligible for early intervention services if they:

- 1) Have an established risk for, or a high probability of developing a delay. For example:
 - Chromosomal disorders (e.g., Down Syndrome);
 - Congenital and acquired syndromes and conditions such as spina bifida, muscular dystrophy, cerebral palsy;
 - Sensory impairments such as hearing or vision impairment;
 - Inborn errors of metabolism;
 - Disorders secondary to exposure to teratogenic substances including fetal alcohol syndrome;
 - Severe attachment disorders;
 - A combination of risk factors that taken together makes developmental delay highly probable.

or

- 2) Currently exhibit a delay in one or more of the developmental areas:
 - Cognitive
 - Social or Emotional
 - Communicative
 - Physical
 - Adaptive



What services are available?

(Services are provided at no cost to eligible children.)

- ★ Audiology
- ★ Health Services
- ★ Vision Services
- ★ Transportation and Related Costs
- ★ Assistive Technology Services and Devices
- ★ Nursing Services
- ★ Physical Therapy
- ★ Occupational Therapy
- ★ Social Work Services
- ★ Nutrition Services
- ★ Special Instruction
- ★ Psychological Services
- ★ Family Training, Counseling and Home Visits
- ★ Speech-Language Pathology
- ★ Family Service Coordination
- ★ Medical Services: Diagnostic and Evaluation



An Introduction to Early Intervention Services in Kansas

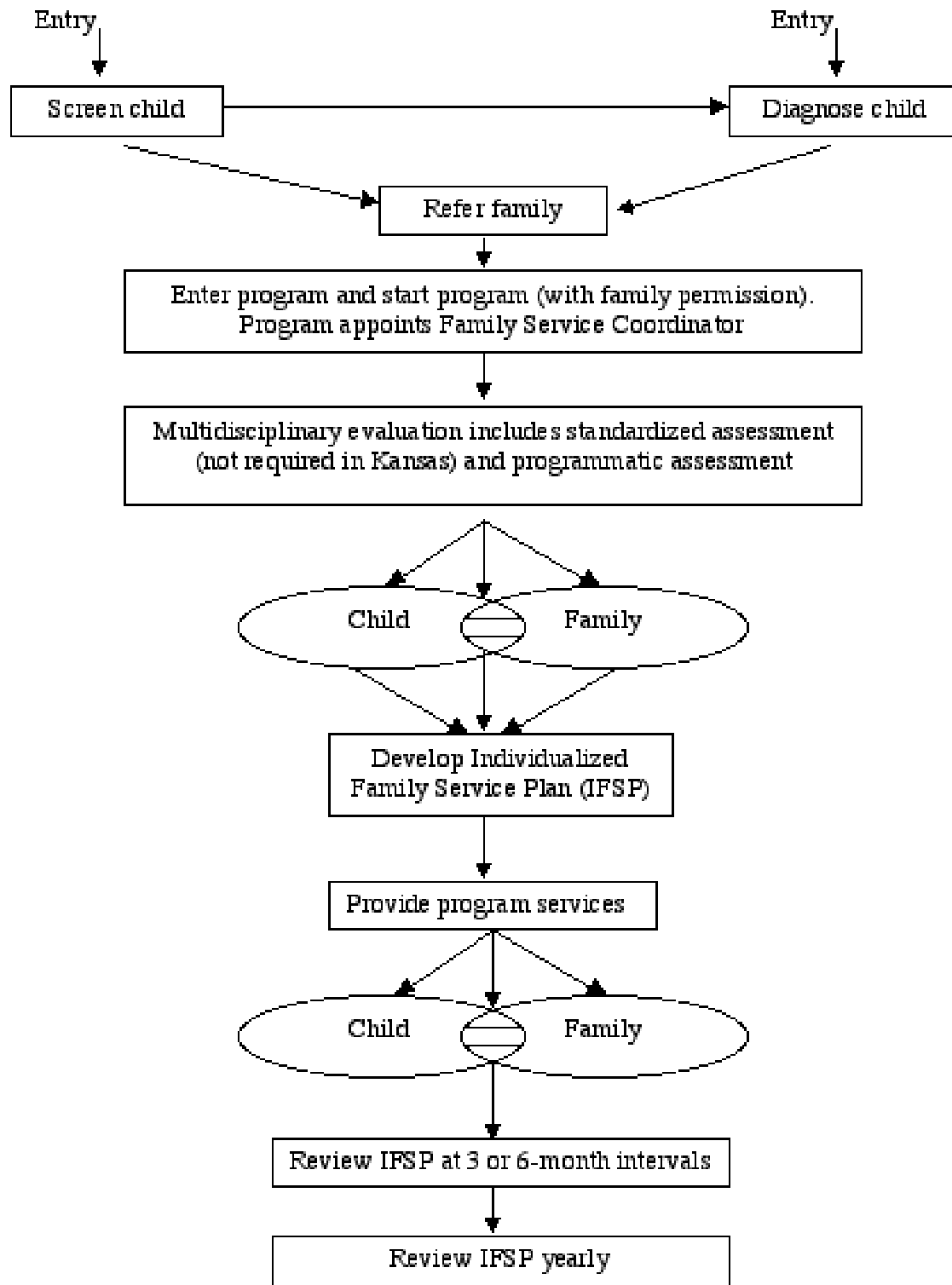
Infant-Toddler Services (ITS) are a comprehensive, statewide system of community-based, family-centered early intervention services for young children with disabilities, ages 0-3, and their families. Services are provided through the implementation of Part C of the Individuals with Disabilities Education Act (IDEA) at no cost to families.

Thirty-seven local early intervention networks provide an array of sixteen services to eligible children and their families through a variety of public and private resources. The leadership for these networks is primarily in the form of local Interagency Coordinating Councils, which provide direction and work with multiple agencies to insure quality services. These services are designed to meet the special needs of the child and family, are identified through a multi-disciplinary assessment process, and are provided through an Individualized Family Service Plan (IFSP). Family members are important partners in this team approach to the provision of services.

Early intervention services that are available to eligible children and their families include speech, occupational and physical therapies, audiology, special instruction, family training, counseling, assistive technology, social work, vision, psychological, and nutrition services. Additionally, there are specific types of medical, health, nursing and transportation services available. Family service coordination is available to assist families in determining if their child is eligible for services, developing an IFSP, and transitioning children to preschool services when they turn three years of age (Kansas Department of Health and Environment, 2001).

The following brochure reflects the 37 community networks in Kansas. The map indicates a county by county breakdown of where early intervention programs are located in Kansas.

Early Intervention Services: A Diagram



Hutinger, P. L. (1994). Integrated program activities for young children. In L. J. Johnson, R. J. Gallagher, M. J. LaMontagne, J. B. Jordan, J. J. Gallagher, P. L. Hutinger, & M. B. Karnes (Eds.), *Meeting early intervention challenges: Issues from birth to three*. (2nd ed., p. 60). Baltimore: Brookes. Adapted with permission from Brookes Publishing Co., P.O. Box 10624, Baltimore, MD 21285-0624.

Early Intervention Services

Early intervention services are designed to meet the individual needs and interests of the child and family, in order to achieve the outcomes listed in the IFSP. Early intervention services include, but are not limited to:

1. **Assistive technology services and devices** - any item, piece of equipment or product which is used to increase, maintain or improve capabilities of young children with disabilities.
2. **Audiology** - these services include screening, identification, and provision of services for children with hearing loss.
3. **Family training, counseling, and home visits** - services provided by social workers and/or psychologist to assist families in understanding the special needs of their child.
4. **Health services** - services such as, but not limited to, tube feeding, tracheostomy care and consultation by physicians.
5. **Medical services for diagnostic or evaluation purposes** - services provided by a licensed physician to determine a child's developmental status and need for early intervention services.
6. **Nursing services** - services include assessment of health status, provision of nursing care and administration of medications and treatments.
7. **Nutrition services** - services include conducting individual assessments, developing and monitoring appropriate nutrition plans and referrals to appropriate resources.
8. **Occupational therapy** - services to address the child's needs related to adaptive, sensory, motor and postural development to improve their functional ability.
9. **Physical therapy** - services to promote motor functioning including screening, evaluation, assessment, intervention to improve movement dysfunction and related problems.
10. **Psychological services** - services include psychological and developmental testing, interpreting assessment results and assisting families in planning and managing psychological services.
11. **Family service coordination services** - assistance and services provided by a family service coordinator for a child eligible for Part C services.
12. **Social work services** - services include home visiting, social or emotional developmental assessment, and identifying, mobilizing and coordinating community resources and services for the child with disabilities and their family.
13. **Special instruction** - the design of learning environments, activities and curriculum planning to enhance the child's development and meet the outcomes identified on the IFSP.
14. **Speech-language pathology** - identification of and services for children with communicative or oropharyngeal disorders.
15. **Transportation and related costs** - the cost of travel and costs related to travel that are necessary for a child to receive Part C services.
16. **Vision services** - services include, but are not limited to, evaluation and assessment of visual function, referral for medical or other professional services and other training necessary to activate visual motor activities.

The following is list of early intervention professionals who may work with a child with disabilities and their family.

Early Intervention Professionals

- **Speech and Language Pathologist**-A professional who screens, diagnoses, and treats communication disorders related to voice, language, fluency, articulation, oral-motor skills, and hearing.
- **Audiologist**-A professional who screens and diagnoses hearing problems, evaluates hearing aid fittings, and may provide services relating to language development and hearing aid use.
- **Early Childhood Special Education Teacher and/or Early Interventionist**-A teacher with training and experience in educating children with special needs.
- **Family Service Coordinator**-The professional who coordinates all the early intervention services from initial referral through the service delivery process and program evaluation.
- **Vision Specialists**-A professional who tests and suggests programs for children who have a visual impairment or are blind.
- **Teacher of the Deaf and Hearing Impaired**-A teacher with special training and experience in educating children who are deaf or hearing impaired.
- **Occupational Therapist**-A therapist who tests and suggests programs for perceptual problems, gross and fine motor difficulties, and suggests methods to teach skills needed for activities of daily living.
- **Physical Therapist**-A therapist who tests and suggests programs for gross and fine motor difficulties, walking problems, and methods to teach activities of daily living.
- **Social Worker**-A professional with training and experience in helping people interact with society, family, co-workers, and in dealing with financial difficulties. This professional also connects people to other specialists.

Adapted with permission from Dunlap, L.L. (Ed.). (1997). *An introduction to early childhood special education*. (p. 5). Boston: Allyn & Bacon.

Early Intervention Acronyms in Kansas

EC	Early Childhood (ages Birth to 8)
ECSE	Early Childhood Special Education
EHS	Early Head Start
EI	Early Intervention (from Birth to age 3)
EIS	Early Intervention Services
EPSDT	Early Periodic Screening, Diagnosis, and Treatment
FAPE	Free, Appropriate, Public Education
FICC	Federal Agency Coordinating Council
IDEA	Individuals with Disabilities Education Act
IEP	Individual Education Program
IFSP	Individualized Family Service Plan
KDHE	Kansas Department of Health and Environment
KITS	Kansas Inservice Training System (KITS)
KSDE	Kansas State Department of Education
LEA	Local Education Agency
LHD	Local Health Department
LICC	Local Interagency Coordinating Council
OSEP	Office of Special Education Programs
OSERS	Office of Special Education and Rehabilitative Services
PL	Public Law
SEA	State Education Agency
SICC	State Interagency Coordinating Council
SRS	Social Rehabilitation Services



Timelines

Community Networks in Kansas are required to adhere to the following Federal and State legislation timelines when providing early intervention services:

Time*	Action
2 Days	Following concerns about developmental delay, a referral to the local community network must occur.
5-7 Days**	Following referral to the local community network, assignment of a service coordinator must be made.
45 Days	Following a referral to the local community network, a child must be evaluated and the IFSP developed if the child is determined eligible.
30 Days	Early intervention services must begin within 30 days from time the parent signs the initial IFSP.
6 Months	The IFSP and services must be reviewed and the IFSP modified accordingly.
12 Months	An annual IFSP must be written and services renewed.

* Based on calendar days

** This is not legislated in Kansas, just a suggested guideline.