

Welcome to Infant & Toddler Connection of Fairfax-Falls Church



**12015 Route 50, Suite 200
Fairfax, VA 22033
(703) 246-7121**

<https://www.fairfaxcounty.gov/office-for-children/infant-and-toddler-connection>



Welcome Book

Infant & Toddler Connection of Fairfax-Falls Church

Digital: English



Español



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Infant & Toddler Connection of Fairfax-Falls Church

Department of Neighborhood and Community Services

Providing IDEA Part C Early Intervention Services

Dear Family,

I would like to take this opportunity to welcome your family to our program. We understand that you have concerns about your child's development. We want you to understand that our staff will listen to your concerns and answer any questions that you may have regarding your child and our services.

This book contains valuable information about our program. It tells you who we are, what we do, and how we do it. It also contains important information about your rights.

Your service coordinator will be your primary contact with the program and will make sure that you understand the program, receive the services to which you are entitled, and that the services are provided in a timely fashion. In other words, please contact your service coordinator whenever you have a concern, change in family circumstance, or experience an anxious moment regarding your child or services.

We also have Regional Family Support Liaisons at each office to assist parents with resources and amazing opportunities for you to make connections with other families, build your support network and provide a safe, comfortable environment for your children to play.

For further information about our services, visit <https://www.fairfaxcounty.gov/office-for-children/infant-and-toddler-connection>. For more information about the federal program (Part C), visit <https://www.infantva.online>.

Sincerely,

Adriana Gallego Gomez

Director

Infant Toddler Connection of Fairfax-Falls Church

703-246-7121

Locations & Contact Information

Main line: (703) 246- 7121

Service Coordinator's Name: _____

Phone Number: _____

Team 1 – GHGC Office

8350 Richmond Highway
Suite 515
Alexandria, VA 22309
Phone: (703) 704-5026
Fax: (703) 653-1788

Team 4 – Chantilly Office

12015 Route 50
Suite 200
Fairfax, Virginia 22033
Phone: (703) 246-5308
Fax: (703) 653-1786

Team 2 – Annandale Office

Heritage Center, East Wing, Floor 2
7611 Little River Turnpike
Annandale, VA 22003
Phone: (703) 538-4778
Fax: (703) 653-1787

Team 5 – Northern Fairfax Office

12015 Route 50, Suite 200
Fairfax, VA 22033
Phone: (703) 449-6148
Fax: (703) 653-1385

Team 3 – Northern Fairfax Office

12015 Route 50
Fairfax, VA 22033
Phone: (703) 533-5418
Fax: (703) 653-1385

McNair NCS – Community Room

McNair Upper Elementary School
2410 Fox Mill Rd, Door #10
Herndon, VA 20171
Phone: (703) 533-5418

Family Support Liaison

Mia Batson: (703) 223-1392

Family Support Liaison

Melisa Rodrigues: (571) 546-5119

Billing

Doctors Choice/Infant & Toddler Connection
2301 Research Blvd Suite 100
Rockville, MD 20850

Contact person: Ruth Goodling
Phone: (301) 670-4250 Ext. 220
Email: rgoodling@doctorschoicemd.com



The Early Intervention Process

ITC focuses on helping families enhance their child's development in three areas:

- ◆ Developing positive social relationships
- ◆ Acquiring new skills and knowledge
- ◆ Using appropriate behaviors to get his/her needs met

Parents will have the opportunity to collaborate with ITC staff in determining their child's abilities in these areas.



1

Initial Visit

- ◆ A **Service Coordinator** meets with you and your child to explain the ITC program, the Individualized Family Service Plan (IFSP) and the Notice of Child and Family Safeguards (family rights).
- ◆ Permission forms are signed, and the financial forms are reviewed.

2

Eligibility

- ◆ After the initial visit, your Service Coordinator will share the information gathered with the Eligibility Committee. You will be notified whether your child meets the ITC eligibility criteria:
 - 25% delay in at least one area of development
 - Atypical development
 - A diagnosed physical or mental condition that has a high probability of resulting in a developmental delay

3

Assessment for Service Planning / IFSP Development (2.5 hours)

- ◆ Your Service Coordinator and two interventionists will meet with you and your child to determine your child's unique strengths and needs.
- ◆ An IFSP will then be developed to include functional outcomes that will support your child's growth within his/her natural environment.

(See the "Assessment Day- Reminder Note to Parents" insert for more details)

4

Provision of Services / Ongoing Assessment

- ◆ A **Primary Provider** will work with you and your child on the IFSP outcomes using a **Coaching Interaction Style**.
- ◆ Your child's outcomes and progress will be reviewed periodically. At least once per year, an assessment will take place to measure your child's progress in all areas of development.

Your Service Coordinator will work with you to ensure a successful transition to other services or programs as necessary.

Early Intervention Team

Service Coordinator

Your **Service Coordinator** will:

- Gather and share information to assist your family in making decisions for your child
- Coordinate the initiation and monitor the provision of ITC services*
- Identify community resources based on your family's needs
- Assist in planning for changes in services and transition
- Help understand your rights, safeguards and responsibilities as a parent/guardian

Primary Provider

The interventionist who offers direct services to support you and other caregivers. This is the therapist that provides your family/caregiver with strategies and techniques to help your child make progress towards their developmental goals. In addition, the Primary Provider receives coaching support from a team of experts in various areas of development and uses a *Coaching Interaction Style* in your child's natural environment.

Coaching Interaction Style

A partnership established between the ITC Providers and families/caregivers to develop abilities to interact with the child in ways that support his/ her development. Coaching is used during natural family routines to:

- Incorporate interests
- Identify and practice strategies
- Reflect on interaction styles
- Promote problem solving
- Receive supportive feedback

What is Coaching?

Coaching is an evidence-based adult learning strategy used for talking with parents and other care providers to recognize what they are already doing that works to support child learning and development as well as building upon existing or new ideas.**

The Infant-Toddler Connection of Fairfax-Falls Church provides clinical training opportunities for undergraduate, graduate level and post-graduate students and medical residents. This includes observations of and participation in early intervention services. All students and medical residents are directly supervised by a member of the IFSP team.

* A complete list of services is referenced in the "Strengthening Partnerships Guide"--Page 10.
** Rush, D., & Shelden, M. (2005). Evidence-based definition of coaching practices.

Please Cancel My Visit



When *anyone* in the home is sick, call your Provider or Service Coordinator as soon as possible.

Provider(s): _____

Provider's Phone Number: _____

Service Coordinator: _____

Service Coordinator's Phone Number: _____

Sessions may be rescheduled based on family and provider availability.

Frequent "No Shows" may result in review of services.

Inclement Weather Policy

- ITC will make every effort to accommodate your family's needs during inclement weather events
- Your Service Coordinator or provider will contact you directly if changes need to be made to scheduled appointments due to inclement weather

If Fairfax County Government is OPEN, ITC offices **REMAIN OPEN** for administrative purposes and for center-based assessments.

If Fairfax County Government is CLOSED, you will be contacted to offer an alternative option for your visit or assessment, or to reschedule your appointment.



COMMONWEALTH OF VIRGINIA



**Notice of Child and Family
Rights and Safeguards
Including
Facts About Family Cost Share**



**Infant & Toddler
Connection of Virginia**

Virginia's Part C Early Intervention System

September 2023

NOTICE OF CHILD AND FAMILY RIGHTS AND SAFEGUARDS

Introduction

The Individuals with Disabilities Education Act (IDEA) is a federal law which includes provisions for early intervention services for eligible infants and toddlers (ages 0-36 months) with disabilities and their families. These provisions form Part C of IDEA and are articulated in federal regulations (34 CFR Part 303) and in State law (Virginia Code § 2.2-5300 et seq.).

In Virginia, the Part C system is called the Infant & Toddler Connection of Virginia. The system is designed to maximize family involvement and ensure parental consent in each step of the early intervention process, beginning with determination of eligibility and continuing through service delivery and transition.

The Infant & Toddler Connection of Virginia includes rights and safeguards to protect parents and children. Parents must be informed about these rights and safeguards in the Infant & Toddler Connection of Virginia so that they can have a leadership role in the services provided to their family. Notice of Child and Family Rights and Safeguards is an official notice of the rights and safeguards of children and families as defined under federal Part C regulations.

Information about child and family rights and safeguards are provided to families through local lead agencies, which are responsible for Part C early intervention services at the community level. Specifically, this information

is provided by local agencies and providers that participate in Infant & Toddler Connection of Virginia, (referenced herein as "local participating agencies/providers").

☞ Service coordinators working with families can suggest additional materials to help families understand their rights and safeguards under Part C. They can also suggest ways that you and other family members can be partners with professionals to help meet the developmental needs of your child.

Within the Infant & Toddler Connection of Virginia Part C Early Intervention System, you, as a parent, have the following rights and safeguards:

- The opportunity for a multidisciplinary evaluation for eligibility determination and, if eligible, assessment and the development of an Individualized Family Service Plan (IFSP) within forty-five (45) calendar days from referral;
- If eligible under Part C, the opportunity to receive appropriate early intervention services¹ for your child and family as addressed in an IFSP;
- The opportunity to receive evaluation for eligibility determination, assessment, IFSP development, service coordination, and procedural safeguards at no cost. You may, however, be charged for other early intervention services based on your ability to pay as determined using ability to pay mechanisms outlined in the Facts About Family Cost Share section of this document. Inability to pay will not prevent your child or your family from receiving early intervention services;

¹ In Virginia, "appropriate early intervention services" are determined through the IFSP process. The IFSP must include a statement of the specific early intervention services necessary to meet the unique needs of the child and the family to achieve the outcomes identified in the IFSP. Federal

regulations define early intervention services as services that "are designed to meet the developmental needs of an infant or toddler eligible under Part C and the needs of the family to assist appropriately in the infant's or toddler's development."

- The right to accept or refuse evaluations for eligibility determination, assessments, and services;
- The right to be invited to and participate in all meetings in which a decision is expected to be made regarding a proposal to change the identification, evaluation, or placement of your child, or the provision of services to your child or family;
- The right to receive written timely notice before a change is proposed or refused in the identification, evaluation, or placement of your child, or in the provision of services to your child or family;
- The opportunity to receive each early intervention service in natural environments to the extent appropriate to meet your child’s developmental needs;
- The right to maintenance of the confidentiality of personally-identifiable information;
- The right to obtain an initial copy of your child’s early intervention record at no cost;
- The right to receive a copy of each evaluation for eligibility determination, assessment, and IFSP as soon as possible after each IFSP meeting and at no cost;
- The right to review and, if appropriate, correct records;
- The right to request mediation and/or impartial due process procedures to resolve parent/provider disagreements; and
- The opportunity to file an administrative complaint.

In addition to the rights and safeguards noted above, you are entitled to be notified of specific procedural safeguards under Part C. These rights are described below.

A. Written Prior Notice

Written prior notice must be given to you within a reasonable time (five [5] calendar days) before a local participating agency/provider proposes or refuses to initiate or change the identification, evaluation, or placement of your child, or the provision of appropriate early intervention services to your child and your family. The notice must be sufficiently detailed to inform you about:

1. The action that is being proposed or refused;
2. The reasons for taking the action;
3. All procedural safeguards that are available under Part C; and
4. The state’s mediation, complaint and due process hearing procedures, including a description of how to file a complaint and the timelines for those procedures.

The notice must be:

1. Written in language understandable to the general public and provided in your native language unless clearly not feasible to do so;
2. If your native language or other mode of communication is not a written language, the local participating agency/provider shall take steps to insure that:
 - The notice is translated orally or by other means to you in your native language or other mode of communication;
 - You understand the notice;
 - There is written evidence that the requirements of this section have been met; and
 - If you are deaf, blind, unable to read, or have no written language, the mode of communication must be that normally used by you (such as sign language, Braille, or oral communication).

B. Parental Consent

Consent means that:

1. You are fully informed of all information about the activity(s) for which consent is sought. This information is provided in your native language or other appropriate mode of communication, unless clearly not feasible to do so;

☞ Native Language, where used with reference to persons of limited English proficiency, means the language or mode of communication normally used by the parent of the child. When conducting evaluations and assessments, native language means the language normally used by your child if that is developmentally appropriate for your child.

2. You understand and agree in writing to the carrying out of the activity(s) for which your consent is sought, and the consent describes the activity(s) and lists the early intervention records (if any) that will be released and to whom; and
3. You understand that the granting of consent is voluntary on your part and may be revoked at any time. If you revoke consent, that revocation does not apply to an action that took place before consent was revoked.

Your written consent must be obtained before the all evaluations to determine eligibility and assessments of your child and family are conducted and before early intervention services are provided. If you do not give consent, no action will be taken to coerce (force) you. The local participating agency/provider will make reasonable efforts to ensure you:

1. Are fully aware of the nature of the evaluation to determine eligibility and assessments, or early intervention services that would be available; and
2. Understand that your child will not be able to receive the evaluation to determine

eligibility, assessment, or early intervention service unless consent is given.

In addition, as the parent of a child eligible under Part C, you may determine whether your child or other family members will accept or decline any early intervention service(s) under this program. You may also decline such a service after first accepting it without jeopardizing other early intervention services under this program.

Your written consent is required before your private insurance, if you have that, can be used to pay for services. More specific information about your rights and responsibilities regarding payment for early intervention services are provided in the Facts About Family Cost Share section of this document.

Finally, you have the right to written notice of and written consent to the exchange of any personally-identifiable information collected, used, or maintained under Part C, consistent with Federal and State law.

C. Records

☞ The following definitions are used in this section: (1) "Destruction/destroy" means physical destruction or removal of personal identifiers from information so the record is no longer personally identifiable; (2) "Early intervention record(s)" or "record(s)" means all records that are required to be collected, maintained or used under Part C; and (3) "Participating agency" means any individual, agency, entity or institution that collects, maintains, or uses personally-identifiable information to implement the requirements in Part C.

1. Examination of Records

In accordance with the Confidentiality of Information procedures outlined in the next section of this pamphlet, you must be given the opportunity to inspect and review records relating to evaluations for eligibility

determination, assessments, development and implementation of IFSPs, provision of early intervention services, individual complaints concerning your child, and any other portion of the Part C program involving records about your child and your family.

Each local participating agency/provider must give you the opportunity to inspect and review any records relating to your child, which are collected, maintained or used by the agency or provider under Part C from the point in time when your child is referred for early intervention services until the later of when the participating agency is no longer required to maintain or no longer maintains the information under applicable Federal and State laws. The local participating agency/provider must comply with a request without unnecessary delay and before any meeting regarding an IFSP or hearing relating to identification, evaluation, placement, or provision of services for your child and family and, in no case, more than ten (10) calendar days after the request has been made.

The opportunity to inspect and review records includes:

- a. A response from the local participating agency/provider to reasonable requests for explanations and interpretations of the record;
- b. The right to request that the local participating agency/ provider provide copies of the records containing the information if failure to provide those copies would effectively prevent you from exercising the right to inspect and review the records; and
- c. Having someone who is representing you inspect and review the record.

A local participating agency/provider may presume that you have the authority to inspect and review records relating to your child unless the agency or provider has been provided documentation that you do not have the authority under applicable Virginia law.

Each local participating agency/provider shall keep a written record of parties obtaining access to records collected, obtained, or used under Part C (except access by parents and authorized representatives and employees of such agency or provider), including the name of the party, the date access was given, and the purpose for which the party is authorized to use the child's record.

If any record includes information on more than one child, you may inspect and review only the information relating to your child, or to be informed of that specific information.

Each local participating agency/provider shall provide you, upon request, a list of the types and locations of records collected, maintained, or used by the agency or provider. A local participating agency/ provider may charge a fee for copies of records which are made for parents under Part C if the fee does not effectively prevent you from exercising your right to inspect and review those records. However, an initial copy of the record must be made available at no cost to you and the local participating agency/provider may not charge a fee to search for or to retrieve information under Part C. You also must be provided, at no cost to you, a copy of each evaluation, assessment of your child, family assessment and IFSP as soon as possible after each IFSP meeting.

If you believe that information in records collected, maintained, or used under Part C is inaccurate or misleading, or violates the privacy or other rights of your child or family, you may request the local participating agency/provider that maintains the information to amend the information.

- a. Such agency or provider must decide whether to amend the information in accordance with the request within a reasonable period of time after it receives the request.
- b. If such agency or provider refuses to amend the information as you request, you

must be informed of the refusal and be advised of the right to a hearing.

The local participating agency/provider, on request, must provide an opportunity for a hearing to challenge information in education records to ensure that it is not inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child or family. You may request a due process hearing under Part C procedures or hearing procedures that are consistent with the Family Educational Rights and Privacy Act (FERPA) regulations at 34 CFR 99.22.

- a. If, as a result of the hearing, such agency or provider decides that the information is inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child, it must amend the information accordingly and must inform you in writing.
- b. If, as a result of the hearing, such agency or provider decides that the information is not inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child, you must be informed of your right to place in the records of your child, a statement commenting on the information, and setting forth any reasons for disagreeing with the decision of the agency or provider.

Any explanation placed in the records of your child under this section must:

- a. Be maintained by the local participating agency/provider as part of the records of your child as long as the record or contested portion (that part of the record with which you disagree) is maintained by such agency or provider; and
- b. If the records of your child or the contested portion are disclosed by such agency or provider to any party, the explanation must also be disclosed to the party.

2. Confidentiality of Information

Parental consent must be obtained before personally-identifiable information is:

- a. Disclosed to anyone other than officials of the agency/provider collecting, maintaining or using information under Part C, unless authorized to do so under Part C (34 CFR 303.414) and FERPA (34 CFR 99.30); or
- b. Used for any purpose other than meeting a requirement under Part C.

Information from your child's early intervention record cannot be released to any party except local participating agencies/providers* without your consent unless the agency or provider is authorized to do so under FERPA. If you refuse to provide consent, the local participating agency/provider may implement procedures, like explaining to you how your failure to consent affects the ability of your child to receive services under Part C, as long as those procedures do not override your right to refuse to consent.

*Participating agencies/providers that may access your child's early intervention record include the Department of Behavioral Health and Developmental Services, the State Lead Agency for early intervention in Virginia; local lead agencies; and service providers involved in early intervention services for your child and family.

The following safeguards must be in place to ensure confidentiality of records:

- Each local participating agency/provider must protect the confidentiality of personally-identifiable information at collection, maintenance, storage, disclosure, and destruction stages;
- One official of each local participating agency/provider is responsible for ensuring the confidentiality of any personally-identifiable information;
- All persons collecting or using personally-identifiable information must receive training or instruction regarding Virginia's

Part C policies, procedures and practices which comply with IDEA and FERPA;

- Each local participating agency/provider must maintain, for public inspection, a current listing of the names and positions of those employees within the agency who have access to personally-identifiable information;
- The local participating agency/provider must inform parents when personally-identifiable information collected, maintained, or used under Part C is no longer needed to provide services to the child; and the information must be destroyed, at the request of the parents. (Permanent records of your child's name, date of birth, your address and phone number, names of service coordinator(s) and other early intervention service providers, the year and age of your child's exit from the program, and any programs your child entered upon exit from the early intervention program may be maintained.)

D. Resolving Disputes

If you disagree with a local participating agency/provider on the identification, evaluation, placement of your child, or provision of appropriate early intervention services to your child or family, you may request a timely administrative resolution of your concerns.

Virginia offers three (3) methods for resolving disputes, all of which are available at no cost to families: mediation, impartial due process hearings, and administrative complaints. The following is an overview of these three options. For information on how to file a request for mediation and/or an impartial due process hearing or to file an administrative complaint, see Contact Information on page 10.

1. Mediation

Mediation is voluntary and must be freely agreed to by both parties. Any party may request mediation although neither parents nor

providers are required to use it. Mediation provides an opportunity for parents and providers to resolve their disagreements (e.g., individual child complaints) in a non-adversarial, informal manner. Mediation must be completed in fifteen (15) calendar days following receipt by the State Lead Agency of a request for mediation and may not be used to deny or delay your rights to an impartial due process hearing or to deny any of your other rights under Part C.

About Mediators and Hearing Officers...

Mediators used in mediation (and hearing officers used in due process hearings, as described in the next section), must be "impartial." Impartial means that the person appointed to serve as a mediator (or hearing officer of the due process proceeding)—

(1) Is not an employee of any agency or program involved in providing early intervention services, other services, or care of the child; and

(2) Does not have a personal or professional interest that would conflict with his or her objectivity in implementing the process.

A person who otherwise qualifies under this section is not an employee of an agency or program solely because the person is paid by the agency or program to implement the disagreement resolution process.

The State Lead Agency will contact both parties (i.e., you and the provider) to review the complaint and the mediation process, and to schedule a time and location for the mediation. The mediation will be scheduled in a timely manner and held in a location that is convenient to both parties. A qualified and impartial mediator who is trained in effective mediation techniques will meet with both parties to help them find a solution to the complaint in an informal, non-adversarial atmosphere. The State Lead Agency maintains a list of qualified mediators who are

knowledgeable of the laws and regulations relating to the provision of early intervention services for infants and toddlers with disabilities and their families.

If the disagreement is resolved through mediation, the parties must complete a legally binding agreement that describes the resolution and that states that all discussions that occurred during the mediation process must be confidential and may not be used as evidence in any subsequent due process hearings or civil proceedings. The agreement must be signed by you and a representative of the state lead agency who has the authority to bind the agency. Mediation does not preclude you from requesting an impartial due process hearing at any time. If mediation is unsuccessful, you may want to request a due process hearing.

2. Impartial Due Process Hearings

An impartial due process hearing is a formal procedure conducted by an impartial hearing officer and is the second alternative for families seeking to resolve a dispute. Parents seeking an impartial due process hearing must submit their request in writing directly to the State Lead Agency. The impartial due process hearing must be completed, and a written decision made, within thirty (30) calendar days of the receipt of the request. (Mediation, if attempted, must occur within the same 30 days.)

Hearing officers are appointed to conduct due process hearings. Hearing officers must:

- a. Have knowledge about the provisions of Part C and the needs of, and services available for, eligible children and their families; and
- b. Perform the following duties:
 - Listen to the presentation of relevant views about the complaint/ disagreement, examine all information relevant to the issues, and seek to reach a timely resolution of the disagreement;

- Provide a record of the proceedings at the cost of the state, including a written decision (hearing only).

Under Part C, you are given the rights listed below in any impartial due process hearing carried out under this section.

- a. To be accompanied and advised by a lawyer (at your expense) and by individuals with special knowledge or training about early intervention services for children eligible under Part C (at your expense);
- b. To present evidence and confront, cross examine, and to compel the attendance of witnesses;
- c. To prohibit the introduction of any evidence at the hearing that has not been disclosed to you at least five calendar days before the proceeding;
- d. To obtain a written or electronic verbatim (word by word) transcription of the hearing at no cost to you; and
- e. To obtain written findings of fact and decisions at no cost to you.

The impartial due process hearing described in this section must be carried out at a time and place that is reasonably convenient to you.

No later than thirty (30) calendar days after the State Lead Agency receives your disagreement (complaint), the impartial due process hearing required under this section must be completed and a written decision must be mailed to each of the parties. The hearing officer may grant specific extensions of time beyond the 30 days at the request of either party. Any party not satisfied with the findings and decision of the impartial due process hearing has the right to bring a civil action in state or federal court. During the pendency (time period) of any proceeding involving a due process complaint, unless the local participating agency/provider and you otherwise agree, your child and family will continue to receive the appropriate early intervention services in the setting identified in the IFSP for which you provided consent.

If the disagreement (complaint) between you and the provider involves an application for initial services, your child and family must be provided those services that are not in dispute.

3. Administrative Complaints

An individual or organization including those from another state may file a written signed complaint that any local participating agency/provider is violating a requirement of the Part C program. Infant & Toddler Connection of Virginia widely disseminates the State's complaint procedures to parents and other interested individuals, including parent training centers, protection and advocacy agencies, and other appropriate entities. The complaint must include:

- a. A statement that a requirement of Part C has been violated;
- b. A statement of the facts on which the complaint is based;
- c. The signature and contact information of the person filing the complaint; and
- d. If the complaint alleges violations with respect to a specific child, then the name and address of the residence of the child; the name of the provider serving the child; a description of the nature of the problem, including facts related to the problem; and a proposed resolution of the problem to the extent known and available at the time the complaint is filed.

Administrative complaints must be filed and received by the State Lead Agency within one (1) year of the alleged violation. The individual or organization filing an administrative complaint must forward a copy of the complaint to the local participating agency/provider serving the child at the same time the complaint is filed with the State Lead Agency.

Once the State Lead Agency has received the complaint, it has sixty (60) calendar days (unless exceptional circumstances exist) to:

- a. Investigate the complaint, including conducting an independent, on-site investigation, if necessary;
- b. Provide the individual or organization filing the complaint the opportunity to submit additional information, either orally or in writing, about the complaint;
- c. Provide the local participating agency/provider an opportunity to respond to the complaint, including the opportunity to propose a resolution to the complaint and the opportunity to engage in mediation;
- d. Make an independent determination as to whether or not a violation has occurred after reviewing all relevant information; and
- e. Issue a written decision to the complainant that addresses each allegation in the complaint and that contains the facts and conclusions as well as the reasons for the final decision.

If the final decision indicates that appropriate services were/are not being provided, the State Lead Agency must address:

- a. The failure to provide appropriate services, including corrective actions appropriate to address the needs of your child who is the subject of the complaint and your family (such as compensatory services or monetary reimbursement); and
- b. Appropriate future provision of services for all infants and toddlers with disabilities and their families.

The State Lead Agency must include procedures for effective implementation of the decision, if needed, including technical assistance activities, negotiations, and corrective actions to achieve compliance.

No part of any complaint that is also currently being addressed in an impartial due process hearing can be dealt with as an administrative complaint within this process until the conclusion of the hearing. Complaints that

have already been decided in an impartial due process hearing involving the same parties cannot be considered under this procedure. The State must notify the complainant that the hearing decision is binding. However, the State Lead Agency must address complaints that are filed related to implementation of an impartial due process hearing decision.

Individual Right to Appeal (For Medicaid Recipients Only)

State and Federal laws require that written notification be provided to individuals when the Department of Medical Assistance or any of its contractors takes an action that affects the individual's receipt of services. Appeals must be requested in writing and postmarked within 30 days of receipt of the notice of the adverse action. Please see section G of this document for detailed information about the Individual Right to Appeal.

Medicaid appeals do not affect a parent's right to request any of the Part C dispute resolution options. A Medicaid appeal is separate from the Part C dispute resolution process.

E. Surrogate Parents

The rights of children eligible under Part C are protected even if:

1. No parent can be identified;
2. The local participating agency/provider, after reasonable efforts, cannot locate a parent; or
3. The child is a ward of Virginia under the laws of the Commonwealth. Legal custody of the child and all parental rights and responsibilities for the care and custody of the child have been terminated by Court order or permanent entrustment agreement pursuant to applicable law.

An individual is assigned to act as a "surrogate" for the parent according to the procedures that follow. The procedures include a method for determining whether a child needs a surrogate parent and making a

reasonable effort to assign a surrogate to the child within 30 calendar days after determining that the child needs a surrogate parent. The following criteria are employed when selecting surrogates:

1. Surrogate parents are selected at the local level in the manner allowable under Virginia law; and
2. A person selected as a surrogate parent:
 - Has no personal or professional interest that conflicts with the interest of the child he or she represents;
 - Has knowledge and skills that ensure adequate representation of the child; and
 - Is not an employee of any state agency or a person or an employee of any other public agency or provider that provides early intervention services, education, care or other services to the child or to any family member of the child. A person who otherwise qualifies to be a surrogate parent under this section is not an employee solely because he or she is paid by a local participating agency/ provider to serve as a surrogate parent.

The public agency that has been assigned care of the child must be consulted when determining the need for and, if needed, selecting a surrogate parent for a child who is a ward of Virginia or in foster care. In the case of a child who is a ward of Virginia, the judge overseeing the child's case may appoint a surrogate parent who meets requirements listed above.

A surrogate parent may represent the child in all matters relating to:

1. The evaluation for eligibility determination and assessment of the child;
2. Development and implementation of the child's IFSP, including annual evaluations and periodic reviews;

3. The ongoing provision of early intervention services to the child; and
4. Any other rights established under Part C.

F. Contact Information

The State Lead Agency for the Infant & Toddler Connection of Virginia Part C Early Intervention System is the Department of Behavioral Health and Developmental Services (DBHDS). To file an individual child complaint, or to file an administrative complaint, or to find out more about complaint procedures in Virginia, including resolution of disputes through mediation and/or impartial due process hearings contact the State Lead Agency at:

DBHDS
 Infant & Toddler Connection of Virginia
 1220 Bank Street, 9th Floor
 P.O. Box 1797
 Richmond, VA 23218-1797

Direct phone # - (804) 786-3710
 Fax - (804) 371-7959 or
 (804) 771-5877 (TDD/TTY)

or

If you prefer to make a toll free call, you may call 1-800-234-1448 to reach the Central Directory. Your name and contact information will be shared with the Infant & Toddler Connection of Virginia Office and a staff member will contact you.

G. Individual Right to Appeal (For Medicaid Recipients Only)

The Code of Federal Regulations at 42 CFR §431 *et seq.*, and the Virginia Administrative Code at 12VAC30-110-10 through 370, require that written notification be provided to individuals when DMAS or any of its contractors takes an action that adversely affects the individual’s receipt of services. Most adverse actions may be appealed by the Medicaid client or by an authorized

representative on behalf of the client. Adverse actions include partial approvals, denials, reductions in service, suspensions, and terminations. Also, failure to act on a request for services within required timeframes may be appealed.

Appealable actions include disagreement about:

- your child’s eligibility for Part C services;
- the development of an Individualized Family Service Plan within 45-calendar days from the date of referral to the Part C early intervention system,
- the provision of early intervention services including the services listed on an Individualized Family Service Plan (IFSP); and
- the frequency and length of these services.

For individuals who do not understand English, a translation of appeal rights that can be understood by the individual will be provided upon request.

If an appeal is filed before the effective date of a suspension, reduction, or termination, the level and scope of services previously received may continue during the appeal process. However, if the agency’s action is upheld by the hearing officer, the client will be expected to repay DMAS for all services received during the appeal period. For this reason, the client may choose not to receive continued services. The provider will be notified by DMAS to reinstate services if continuation of services is applicable. If coverage is continued or reinstated due to an appeal, the provider may not suspend, reduce or terminate services until a decision is rendered by the hearing officer.

Appeals must be requested in writing and postmarked within 30 days of receipt of the notice of adverse action. The client or his authorized representative may write a letter or complete an Appeal Request Form. Forms are available from your Service Coordinator, on the internet at www.dmas.virginia.gov, at the Infant & Toddler Connection of Virginia’s website at www.infantva.org, from the Part C Procedural Safeguard Specialist at (804)786-3710, or by calling (804) 371-8488.

When completing the request for an appeal, be specific about what you want reviewed, and include a copy of the notice about the action that you disagree with.

Medicaid appeals do not affect a parent's right to request any of the Part C dispute resolution options. A Medicaid appeal is separate from the Part C dispute resolution process.

The appeal request must be signed and mailed or faxed to the:

Appeals Division
Department of Medical Assistance
Services
600 E. Broad Street, 11th floor
Richmond, Virginia 23219
FAX: (804) 371-8491

More information about the appeals process is available on the internet at www.dmas.virginia.gov, at www.infantva.org, or from your Part C Procedural Safeguard Specialist at (804)786-3710.

H. Glossary

Assessment – The ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility under Part C to identify—

- (1) The child's unique strengths and needs and the services appropriate to meet those needs; and
- (2) The resources, priorities and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their infant or toddler with a disability.

Disclosure – To permit access to or the release, transfer, or other communication of personally-identifiable information contained in education records by any means, including oral, written, or electronic means, to any party except the party identified as the party that provided or created the record.

Evaluation – The procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility under Part C, consistent with the definition of "infants

and toddlers with disabilities" in 34 CFR 303.21.

Family – Defined according to each family's definition of itself.

Family Assessment – Family assessments must be family-directed and designed to determine the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of the child.

IFSP – Individualized Family Service Plan (IFSP), a written plan for providing early intervention services to eligible children/families that:

- (1) Is developed jointly by the family and appropriate, qualified personnel providing early intervention services;
- (2) Is based on the multidisciplinary evaluation for eligibility determination and assessment of the child and the assessment of the strengths and needs of the child's family, as determined by the family and as required in 34 CFR 303.321; and
- (3) Includes services necessary to meet the unique needs of the child and family, and the other components listed under 34 CFR 303.344.

Mediation – A voluntary process freely agreed to by parents and providers to attempt to resolve Part C disagreements. Neither party is required to participate in the mediation process, and both parties must approve any agreement reached. Mediation may not be used to deny or delay your right to an impartial hearing or any of your other rights under Part C.

Multidisciplinary – The involvement of two or more disciplines or professions. With respect to evaluation for eligibility determination and assessment activities in 34 CFR 303.321, the term "multidisciplinary" may include one individual who is qualified in more than one discipline or profession. With respect to the IFSP Team in 34 CFR 303.340, the multidisciplinary team must include the parent, the service coordinator and at least one other individual from a discipline or profession other than service coordinator.

Natural Environment – Settings that are natural or typical for your child's same-aged peers who do not have a disability.

Parent – Includes:

- (1) a biological, adoptive or foster parent of a child;
- (2) a guardian (but not the State if the child is a ward of the State);

- (3) a person acting in the place of a biological or adoptive parent (such as a grandparent or stepparent) with whom the child lives, or a person who is legally responsible for the child's welfare;

- (4) a surrogate parent who has been assigned in accordance with Part C regulations 34 CFR 303.422

FACTS ABOUT FAMILY COST SHARE

This document outlines family and provider responsibilities regarding payment for early intervention services through the Infant & Toddler Connection of Virginia.

The cost of early intervention services:

- **Services at no cost:** Some early intervention services are at no cost to the family. These services include:
 - Activities to identify children who may be eligible for Part C services (Child Find);
 - Eligibility determination and assessment to determine if a child is eligible for services and to identify strengths and needs in order to plan appropriate supports and services;
 - Activities and communication by the service coordinator assigned to the child/family (service coordination);
 - Development, review and evaluation of the Individualized Family Service Plan; and
 - All activities related to child/family rights including the administrative complaint process and mediation (e.g., implementation of procedural safeguards).
 All other early intervention services are subject to family fees.
- **Charges for services:** Charges are assessed to families whose children receive early intervention services in Virginia. Charges are generally established as the unit cost of providing the service and are made in accordance with federal Part C regulations and the Virginia Code.
- **Early Intervention rate:** The amount paid for services depends on the type of service provider. The following rates reflect the maximum amount of the charge that will be covered by Medicaid, other public funding, and/or family fees.

	Category 1: Physical therapist or assistant, Occupational therapist or assistant, Speech-language pathologist, Nurse	Category 2: Educators, Counselors, EI Assistants, Social workers, Psychologists, Music therapists, etc.*
Individual, natural environment	\$42.19 per 15 minutes	\$30.94 per 15 minutes
Group, natural environment	\$28.27 per 15 minutes	\$20.73 per 15 minutes

* Category 2 also includes Orientation and Mobility Specialists, Certified Therapeutic Recreation Specialists, Family and Consumer Science Professionals, Family Therapists, Certified Nursing Aides, and Licensed Practical Nurses

Family Fees:

- **Ability to pay:** Amount the family is able to contribute toward the full cost of early intervention services, based on family size, income and expenses, and as documented on the Family Cost Share Agreement Form and/or the Fee Appeal Form.
- **Inability to Pay:** Family's inability to pay any dollar amount at all toward the cost of early intervention services. An inability to pay is determined and documented through the policies (including the fee appeal process) described in this booklet and results in the family receiving all early intervention services at no cost to the family.
- **Sliding Fee Scale:** A fee scale based upon taxable income and family size used to determine a maximum monthly cap that

the family is responsible for paying. There is a copy of the sliding fee scale on the last page of this document.

- A family may pay a fee that is less than or equal to the monthly cap, as determined by the sliding fee scale, based upon accrued charges, co-pays, co-insurance and/or deductibles that result from services received.
- The maximum monthly payment established for the family will be the same regardless of
 - whether one or more children receive services;
 - the number of services received; and
 - the number of agencies from which services are received.
- **Appeal Procedures:** A fee appeal procedure is available if the amount of the maximum monthly cap determined by the sliding fee scale creates a financial hardship for families. In addition, families may file an administrative complaint, request mediation and/or initiate an impartial hearing if they are unable to resolve their differences regarding family fees locally.
- **Not Disclosing Financial Information:** Families may choose not to provide financial information and pay the full charge for services.

Assurances:

- Families will not be charged fees for services that their child is otherwise entitled to receive at no cost.
- Services will not be delayed or denied because of an inability to pay for the services. If the family meets the definition of inability to pay, their child must receive early intervention services at no cost.
- Families will not be charged any more than the actual cost of the service and amounts received from other payment sources, like insurance, will be factored in.

- Families with public or private insurance will not be charged more than families who do not have insurance.

Using Private Insurance or TRICARE to pay for early intervention services:

Many private insurance plans and TRICARE cover some early intervention services for which fees are charged. Such services include Physical therapy, Occupational therapy, Speech - language pathology, and Assistive technology services and devices.

- Families may choose to use their insurance to cover early intervention services or they may choose not to use their insurance.
- Possible costs associated with using private insurance to pay for services include co-payments, co-insurance, premiums, deductibles, or long-term costs such as loss of benefits because of annual or lifetime coverage caps.
- Virginia has built in several safeguards to reduce the financial loss for families using their private insurance to pay for early intervention services. The Virginia General Assembly mandated that private insurance companies (which are not self-funded) provide up to \$5,000 of coverage for early intervention services each year without affecting the lifetime insurance coverage or risking loss of coverage.
- Families may use the sliding fee scale to establish a monthly cap on the amount they must pay toward their co-pays, co-insurance and deductible (though the cap does not apply to co-pays, co-insurance and deductibles if the family has a flexible spending account that automatically pays).

For families with a health care flexible spending account:

- Families are responsible for the full amount of any insurance co-pays, co-insurance and deductibles for early intervention services if the family has a health care flexible spending account *that automatically pays the family or the provider for these costs.* This is necessary due to tax implications for

families and potential insurance reimbursement rate reductions.

- When there is a flexible spending account that automatically pays the family or the provider for out-of-pocket expenses (e.g., co-payments, co-insurance, deductibles, etc.), then the monthly cap documented on the Family Cost Share Agreement Form will apply only to those services not covered by the health insurance plan, until all of the money in the flexible spending account has been used. Once all of the money in the flexible spending account has been used, the monthly cap will cover all services listed on the child's IFSP.
- The above policies do not apply if the flexible spending account works on a reimbursement basis (for example, the family has to submit paperwork to get money from their flexible spending account) or if the family has a flexible spending account debit card to pay for expenses like co-pays, co-insurance and deductibles.
- Families may want to see if they have a choice in how they set up their flexible spending account. Some flexible spending accounts give the option to automatically pay certain expenses but not others or the option to seek reimbursement for medical expenses or use a debit card to pay providers from the account rather than having the payment made automatically to the family or the provider.

Using Medicaid/FAMIS to pay for early intervention services:

- Families cannot be required to apply for or enroll in Medicaid/FAMIS in order to access early intervention services through the Infant & Toddler Connection of Virginia.
- Parent consent is required in order to bill Medicaid/FAMIS if the child is not already enrolled in Medicaid/FAMIS. If the parent does not provide consent for use of Medicaid in this situation, then all IFSP services must still be made available to the child and family.

- Parent consent is required in order for the local system to release a child's personally identifiable information to the Department of Medical Assistance Services for billing purposes. Parents may withdraw this consent at any time.
- In Virginia, using Medicaid/FAMIS to pay for early intervention services will not:
 - Decrease available lifetime coverage or other insured benefit for the child or parent under the Medicaid/FAMIS program;
 - Result in parents paying for services that would otherwise be paid for by Medicaid/FAMIS;
 - Result in any increase in premiums or cancellation of public benefits or insurance for the child or parents; or
 - Risk the loss of eligibility for the child or the child's parents for home and community-based waivers based on total health-related costs.
- The only potential cost to parents from using their Medicaid/FAMIS for early intervention services would be the required use of their private insurance, if they have that and if they have consented to use of that private insurance, prior to billing Medicaid for services other than those that must be provided at no cost.

Provider Responsibilities:

Providers have responsibilities concerning payment for early intervention services in Virginia. Providers shall:

- Inform families about their responsibility for payments for early intervention services;
- Inform families about the payment policies and procedures of the agency that is providing services for which they are financially responsible;
- Not deny families Early Intervention Services due to an inability to pay;
- Inform families what services must be provided at no cost to them;
- Inform families of the charges for each service their child receives;

- Inform families that a family may choose to pay full charges if they do not wish to provide financial information;
 - Inform families that they may choose whether or not to use their private insurance or TRICARE to pay for early intervention services;
 - Inform families that choose to use their insurance to cover early intervention services about the family's responsibilities related to co-pay, co-insurance and/or deductible amounts (including the availability of a sliding fee scale to determine a monthly cap for these costs as discussed below);
 - Inform families that they may access Virginia's Sliding Fee Scale regardless of whether or not they use their insurance to pay for services to determine a monthly cap, which is the maximum amount they will be required to pay each month (otherwise referred to as their ability to pay). The monthly cap does not apply to co-pays, co-insurance or deductibles if the family has a flexible spending account that automatically pays the family or provider for these costs;
 - Notify families prior to any change in fees they will be charged;
 - Inform families that a family may appeal if the amount of their financial responsibility based on the sliding fee scale creates a financial hardship for them; and
 - Inform families that they may file an administrative complaint, request mediation and/or initiate an impartial hearing at any time.
- Paying full charges if they choose not to provide financial information in order to access the sliding fee scale;
 - Their co-pays, co-insurance and deductibles if they use insurance to help pay for services. If the co-pays, co-insurance and deductibles create a financial hardship, the family can provide financial information to determine a monthly cap (though the cap does not apply to co-pays, co-insurance and deductibles if the family has a flexible spending account that automatically pays for these costs);
 - Providing financial information in order for a monthly cap to be determined by the sliding fee scale;
 - Initiating the fee appeal process if the sliding fee scale creates a financial hardship for them;
 - Informing their service coordinator when there are changes in their financial situation; and
 - Participating in an annual financial agreement re-evaluation to determine family fee responsibility.

If you have questions about your fees and services, please contact:

If you have questions about fees and would like to contact the state office, please call:

1-(804) 786-3710

If you would like to speak with the state family representative, please call:

1-(888) 604-2677 ext 3

Family Responsibilities:

Families have responsibilities concerning payment for early intervention services in Virginia. Families are responsible for:

- Requesting assistance from their service coordinator in answering questions or providing explanations of any information they do not understand regarding charges and fees;



Infant & Toddler Connection of Virginia

Family Cost Share Fee Scale

Taxable Income		Monthly Family Cost Participation by Family Size			
		3 or fewer	4	5	6 or more
\$0	\$45,000	\$0	\$0	\$0	\$0
\$45,001	\$55,000	\$0	\$0	\$0	\$0
\$55,001	\$65,000	\$66	\$50	\$40	\$26
\$65,001	\$75,000	\$90	\$68	\$54	\$36
\$75,001	\$85,000	\$120	\$90	\$72	\$48
\$85,001	\$95,000	\$152	\$114	\$91	\$61
\$95,001	\$105,000	\$190	\$143	\$114	\$76
\$105,001	\$125,000	\$276	\$207	\$166	\$110
\$125,001	\$145,000	\$378	\$284	\$227	\$151
\$145,001	\$165,000	\$496	\$372	\$298	\$198
\$165,001	\$185,000	\$630	\$473	\$378	\$252
\$185,001	\$215,000	\$818	\$614	\$491	\$327
\$215,001	\$245,000	\$1,030	\$773	\$618	\$412
\$245,001	\$285,000	\$1,312	\$984	\$787	\$525
\$285,001	\$325,000	\$1,756	\$1,317	\$1,054	\$702
\$325,001	\$365,000	\$2,118	\$1,589	\$1,271	\$847
\$365,001	or more	\$2,430	\$1,823	\$1,458	\$972

Note: The family cost share fee scale establishes a monthly cap, which is the maximum amount that a family will be required to pay per month for early intervention services regardless of charge(s), number of different types of services, or frequency or length of services. If accrued charges, co-pays, co-insurance or deductibles are less than the monthly cap, the family would be required to pay the lesser amount for that month.



Infant & Toddler Connection of Fairfax-Falls Church

Department of Neighborhood and Community Services
Providing IDEA Part C Early Intervention Services

BILLING PROCEDURES

The Infant & Toddler Connection of Fairfax-Falls Church (ITC) is a participating provider for all the major health insurance companies in our area. Your family will be billed the amount your insurance company says you owe, but **only up to your monthly cost share cap.** The monthly cost share cap sets the maximum amount that ITC could bill your family for services. The cap is determined using a sliding scale based on the size of your family and your taxable income.

Some families have a monthly cap of zero, based on their income. If this is your family's situation, ITC will bill your insurance company (with your permission), but you will not receive a bill for ITC services.

Other families have a monthly cap higher than zero, based on their income. If this is your situation, your service coordinator will ensure that you know what your monthly cap is before services begin. With your permission, your insurance company will be billed for most services. If the ITC services your child receives are covered by your insurance, you will be responsible for any co-pays, co-insurance, or deductibles for that month, up to your monthly cap. If the ITC services your child receives are not covered by your insurance, you will be responsible for the cost of the services up to your monthly cap. In either case, you will receive a bill each month from Doctor's Choice, the billing company ITC works with. You will probably find it helpful to call your insurance company before completing the IFSP to ask how the insurance company will handle "early intervention services provided in the home".

Please note that ITC does not submit billing claims for developmental services since this service is traditionally not considered a medical service by commercial medical insurance. If you would like to seek reimbursement for this service from your insurance, you can ask the billing company for an invoice that you can submit directly to your insurance company.

Since these billing procedures were established, a significant number of ITC families have been surprised to discover that their ITC services are not covered by their insurance. Based on this experience, ITC strongly encourages every family to establish a monthly cost share cap before services begin. While it is possible to establish a cap at any time, state regulations do not allow for retroactive reductions in the amounts families owe.

These procedures were established by the Infant & Toddler Connection of Virginia in the hope that all families would have access to ITC services regardless of the family's financial situation. Please consult your service coordinator if you have questions about the procedures or have any concerns related to your ability to pay for services.

12015 Route 50, Suite 200
Fairfax, Virginia 22030-1806

Phone: 703-246-7121, TTY 703-324-4495, Fax: 703-653-1385

<https://www.fairfaxcounty.gov/office-for-children/infant-and-toddler-connection>

Infant & Toddler Connection of Fairfax - Falls Church

WHAT PARENTS SHOULD KNOW ABOUT INSURANCE BILLING FOR ITC SERVICES

BEFORE/AFTER YOUR ASSESSMENT FOR SERVICE PLANNING (ASP)

Many parents prefer to find this information out before the Assessment for Service Planning (ASP) meeting is held and the Individualized Family Service Plan (IFSP) is developed. If the insurance company requests diagnosis codes or Current Procedural Terminology (CPT) codes, this information is documented at the ASP and can be provided for you after the ASP.

****Please review your insurance coverage before you call the insurance company with the information below to understand your coverage and rights****

<p>1. Call your insurance company customer service department and ask if they cover Early Intervention Services which may also be called Physical, Occupational, Speech therapy or Developmental Services (habilitative services).</p>	
<p>2. If yes, then ask:</p>	
<ul style="list-style-type: none"> ◆ Is a referral or pre-authorization required? ◆ When do I need to get re-authorization and ongoing referrals? How often? ◆ Who must ask for this, ITC or the Parent? 	
<ul style="list-style-type: none"> ◆ How many visits are covered? Is this an annual limit or a lifetime limit? ◆ Does your insurance cover telepractice at the same rate as in person? 	
<ul style="list-style-type: none"> ◆ What is my co-pay, deductible or co-insurance amount? 	
<ul style="list-style-type: none"> ◆ CPT Codes: OT (97530) PT (97110) Speech (92507) Family Counseling and Support (96170, 96171) <i>Please note ITC does not bill for Dev. Services to commercial medical insurance.</i> 	
<ul style="list-style-type: none"> ◆ Diagnosis Codes 	
<ul style="list-style-type: none"> ◆ Are there any exclusions in my policy? 	
<p>3. Determine if ITC is in-network/out of network:</p> <ul style="list-style-type: none"> ◆ ITC's Taxpayer ID – 540787833 ◆ NPI – 1952334450 	<p>Please provide the insurance company with the NPI number that is bolded to the left.</p>



Service Charges

Infant & Toddler Connection of Fairfax-Falls Church

Type of Service	Cost/Length of Service*
Occupational Therapy	\$168.76 per hour
Physical Therapy	\$168.76 per hour
Speech Language Pathology	\$168.76 per hour
Family Counseling and Support	\$123.76 per hour**
Nutrition	\$123.76 per hour**
Developmental Services (Education, BBB, and Vision)	\$123.76 per hour**
Intervention Groups	\$30.00 per hour per therapist
Assistive Technology Devices	At cost
Family Counseling and Support Group for Parents	No charge to families (babysitting also provided free of charge during group meetings)
Foundations for Feeding in Infants & Toddlers	No charge to families (babysitting also provided free of charge during group meetings)
Service Coordination	No charge to families
Assessment for Service Planning	No charge to families
Screening, Evaluations, IFSP Development & Reviews	No charge to families

***No family will pay more than the monthly cap on their
Family Cost Share Agreement.**

****Services not usually covered by insurance companies**

Strengthening Partnerships:

A Guide to Family Rights & Safeguards in the



**Infant & Toddler
Connection of Virginia**

Part C Early Intervention System

2016



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The Arc of Virginia
2025 East Main Street, Suite 107
Richmond, VA 23223

T 804.649.8481
F 804.649.3585

www.thearcofva.org

Dear Parent,

The Arc of Virginia staff is dedicated to providing support to the families receiving early intervention services. We are an organization composed of families who have received these services, and we understand first-hand the questions and concerns that you may be having as you navigate services and supports.

This book was written to help families understand the early intervention system and the rights and safeguards (or protections) that have been put in place to ensure that families are involved in decisions that are being made concerning their child's early intervention services. These safeguards are included in Notice of Child and Family Rights & Safeguards Including Facts About Family Cost Share. You will receive a copy and explanation of these rights and safeguards throughout your time in the early intervention system.

As parents of children with developmental delays we may be members of many teams throughout our children's lives such as the early intervention Individualized Family Service Plan (IFSP) team. Although early intervention staff will explain the IFSP team purpose to you, you may still be wondering what part you play with the "professionals" gathered with you.

The most important thing to remember is that you are at the table speaking on behalf of your child and family and that you are the expert on this topic! Early intervention staff are there to coach and support you to interact with your child in ways to support their development. Because you spend the most time with your child you have more opportunities during natural routines and activities to interact with your child, develop strategies and practice them with your child.

The Arc of Virginia is a statewide organization for children with developmental delays, people with developmental disabilities and their families. Our New Path program was developed to provide focused support to families receiving early intervention services and facilitate family advocacy in the early intervention system. We have an e-newsletter that provides families with updates on early intervention and other related services, including family advocacy opportunities. Our staff is here to answer questions, provide support and give families the tools they need to become involved.

Please visit our website www.thearcofva.org/newpath for more information. You can also find us on Facebook at www.facebook.com/newpathei or www.facebook.com/thearcofva Please do not hesitate to contact us if you have a question or would like to learn more. You can reach me directly 804-649-8481 ext. 104 or lcantrell@thearcofva.org.

Sincerely,
Lucy Cantrell
Director of Information and Referral





PURPOSE OF THIS GUIDE

Early intervention in Virginia is a coordinated system of community services for infants and toddlers (birth through age two, meaning until the child's third birthday) who have disabilities or developmental delays and their families. Through this system, called Infant & Toddler Connection of Virginia, agencies, parents, and service providers work together to give children and their families services to meet the children's developmental needs.

Parents of infants and toddlers who are eligible for early intervention services have an important and special role to play in their child's services. Parents:

- Provide information;
- Give permission;
- Participate in meetings; and
- Decide what services to accept.

To assist families in their roles in the early intervention system, this guide explains the major steps in becoming involved in the Infant & Toddler Connection of Virginia and the safeguards, or rules that are put in place to protect families' rights. It discusses how you can work with the people who provide early intervention services.

People who provide early intervention services might use technical language to describe the work they do with infants and toddlers and families. Ask for explanations of unfamiliar words. When technical words are used in this booklet, they will be defined in a box. There also is a glossary starting on page 23 of this booklet that defines some of these technical words.





BACKGROUND

Since the 1970's, the Commonwealth of Virginia has provided early intervention services for children, birth through two years of age (meaning until the child's third birthday), who are experiencing developmental delays. In 1986, the U.S. Congress provided funds to states to set up a comprehensive system of early intervention services. This system of services is referred to as Part C - Early Intervention for Infants and Toddlers with Disabilities within the federal special education law called the Individuals with Disabilities Education Act (IDEA). In this guide, the term *early intervention system* is used to describe Virginia's policies and practices under the federal Part C program.

In Virginia, there are 40 local lead agencies that plan, with the advice and assistance of a local interagency coordinating council (a group of people with interest in the early intervention system, including parents), how agencies and providers in the community will provide services for families. Each local lead agency has someone you can contact for information and help (see page 24).



**Infant & Toddler
Connection of Virginia**





EARLY INTERVENTION SERVICES

Early intervention services are for infants and toddlers who are not developing as expected or who have a condition that can delay normal development, and their *families*. Services are provided to help children's development and to assist families in meeting the developmental needs of their child. Early intervention service providers work in partnership with families. Family involvement is important at every step along the way.

Family is defined according to each family's definition of itself.

Parent means a biological or adoptive parent of a child, a foster parent, a guardian, a person acting as a parent, (such as a grandparent or stepparent with whom a child lives, or a person who is legally responsible for the child's welfare); or a *surrogate parent*.

A *surrogate parent* is an individual assigned to act for a parent when the child is a ward of the state or a parent cannot be identified or located. If you are serving as a surrogate parent or want more information about safeguards and responsibilities of surrogate parents, contact your local early intervention system listed on page 24 or the Infant & Toddler Connection of Virginia at (800) 234-1448.

Every child and family entering the early intervention system has a service coordinator. Your service coordinator's job is to help your family:

- gather information to make good decisions for your child and family;
- arrange for and keep track of services;
- find out about and receive necessary services;
- find out about advocacy services;
- plan for changes in services (transition); and
- understand your rights, safeguards and responsibilities as a parent and use them when appropriate.





FINDING OUT IF YOUR CHILD IS ELIGIBLE FOR EARLY INTERVENTION

When your child is referred to the Infant & Toddler Connection of Virginia, a service coordinator will begin working with your family to find out if your child is eligible for services. This step is called eligibility determination. You will receive *written prior notice* before the eligibility determination happens.

Written Prior Notice: Before each major step in the early intervention process, your service coordinator must make sure you get a notice in writing. The notice will tell you what step comes next. The notice must be in the language you use unless this is not possible. It must also be clear and easy to understand. If you need any help in understanding the notice, ask your service coordinator for an explanation.

The notice must be given to you **before** the next step actually takes place. You can show the notice to others (a professional or friend) who can help you decide what is best for your child. All written prior notice will be given using standard state forms. Each time these standard forms are given to you, you will also receive a copy and explanation of Notice of Child and Family Rights and Safeguards Including Facts About Family Cost Share, which is a technical explanation of parents' safeguards with references to federal law.

As the parent, you play an important role in getting ready for eligibility determination. You have the opportunity to:

- Share information about you and your child, including what you know about your child's skills and needs;
- Give your service coordinator permission to gather information about your child from other professionals who know your child or have tested your child;
- Ask questions about the eligibility determination process; and
- Give *informed consent*, permission, for eligibility determination.

Informed Consent: To make good decisions, you need accurate information. Giving your consent means that you understand what is being offered and recommended, and with that understanding, you give your permission. The best time to ask questions is before you give your consent.

To find out if your child is eligible for early intervention services, a *multidisciplinary* team reviews the information you shared about your child, results of any screening or assessment tool used, and information from your doctor and other professionals who know your child (with your permission).





Often this information is enough for the team to decide if your child meets the eligibility criteria for early intervention services (see page 6). Sometimes, the team will need more information and some testing will be done to help the team learn more about your child's development. If information from your child's medical or other records is enough by itself to show that your child meets the eligibility criteria, then no team or further evaluation is needed, and you can move directly to the next step in the process, assessment for service planning.

Multidisciplinary means professionals from at least 2 different disciplines or professions. Under the federal law, one individual who is qualified in more than one discipline or profession meets the definition of *multidisciplinary* for eligibility determination and assessment for service planning.

All parents are a part of eligibility determination because they provide important information to the multidisciplinary team about their child's development. Let your service coordinator know if you also would like to be part of the multidisciplinary team discussion about whether your child is eligible. Otherwise, your service coordinator will call you after the team meets to let you know whether or not your child is eligible for early intervention services.

If the multidisciplinary team decides that your child is eligible for services, you will work together to do an assessment for service planning and develop an individualized family service plan (IFSP). These steps are explained in the next sections.

If the multidisciplinary team decides that your child is not eligible for early intervention services, you can ask your service coordinator to help with referrals to other resources in your community that may be helpful to your child and family. You also are welcome to call the Single Point of Entry for your local area again if you have concerns about your child's development.

If agreement cannot be reached on your child's eligibility, there are ways to help resolve these differences (see page 17).





Criteria for Eligibility for Early Intervention Services in Virginia

In Virginia, your child may qualify three different ways for early intervention services. Information gathered during the eligibility determination process will help identify if your child meets one or more of the eligibility criteria.

- I. Infants and toddlers with at least a 25% developmental delay (chronological age or age adjusted for prematurity) in one or more of the following areas:
 1. **cognitive development** (thinking skills);
 2. **physical development** (including the way muscles work, vision and hearing);
 3. **communication** (understanding what is said or communicating what is wanted)
 4. **social or emotional development** (ability to interact with others and express feelings); or
 5. **adaptive development** (doing things independently like eating and helping to dress self).

AND/OR

- II. Children without a 25% developmental delay who are developing atypically in one of more of the following:
 1. **atypical or questionable sensory-motor responses** (abnormal muscle tone, limitations in joint range of motion, abnormal reflex or postural reactions, poor quality of movement patterns or quality of skill performance, oral-motor skills dysfunction, including feeding difficulties)
 2. **atypical or questionable social-emotional development** (delay or abnormality in achieving expected emotional milestones, persistent failure to initiate or respond to most social interactions, or fearfulness or other distress that does not respond to comforting by caregivers)
 3. **atypical or questionable behaviors** that interfere with the acquisition of developmental skills or
 4. **impairment in social interaction and communication skills along with restricted and repetitive behaviors.**

AND/OR

- III. Children who have a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay. These include, but are not limited to:
 1. seizures/significant encephalopathy (identifies the high risk group with low Apgars and/or asphyxia);
 2. significant central nervous system anomaly;
 3. severe Grade 3 intraventricular hemorrhage with hydrocephalus or Grade 4 intraventricular hemorrhage;
 4. symptomatic congenital infection;
 5. effects of toxic exposure including fetal alcohol syndrome, drug withdrawal and exposure to chronic maternal use of anticonvulsants, antineoplastics, and anticoagulants;
 6. myelodysplasia;
 7. congenital or acquired hearing loss;
 8. visual disabilities;
 9. chromosomal abnormalities, including Down syndrome;
 10. brain or spinal cord trauma, with abnormal neurologic exam at discharge;
 11. inborn errors of metabolism;
 12. microcephaly;
 13. severe attachment disorder;
 14. failure to thrive;
 15. autism spectrum disorder;
 16. endocrine disorders with a high probability of resulting in developmental delay;
 17. hemoglobinopathies with a high probability of resulting in developmental delay;
 18. cleft lip or palate;
 19. periventricular leukomalacia;
 20. neonatal factors that make developmental delay highly probable:
 - gestational age less than or equal to 28 weeks; or
 - NICU stay greater than or equal to 28 days; or
 21. other physical or mental conditions at the multidisciplinary team's discretion.





ASSESSMENT FOR SERVICE PLANNING

You will be given written prior notice before the assessment for service planning takes place. With your signed permission, your service coordinator will arrange for an *assessment* to learn about your child's strengths and needs in all areas of development. This information will help the team figure out what early intervention services are needed to meet your child's and family's needs. The assessment will include how your child:

- thinks and understands events occurring in his day - this is called *cognitive development*;
- sees things, hears sounds and voices and is growing - this is called *physical development*;
- moves - this is called *gross motor or fine motor development*;
- understands what you say or lets you know what she wants - this is called *communication*;
- gets along with other people and expresses his feelings - this is called *social or emotional development*; and
- does ordinary things expected of babies and toddlers like feeding herself, helping to dress himself and kissing and hugging - this is called *adaptive development*.

Assessment is the way that professionals learn about your child's strengths and needs and what services might help meet those needs. With your permission, assessment also includes learning about your family's concerns, priorities (what's most important to you), and resources.

Note: The words *she* and *he* or *her* and *him* are used alternately to refer to children. No matter what gender is used, both boys and girls are equally included.

If your child has already had an assessment, additional assessments may not be needed. Your service coordinator will make sure that any assessment procedures used are sensitive to your family's needs and culture.

During the assessment, your child will be given a fair chance to show what she can do. Your child will be assessed by a group of professionals who represent at least two professions or areas of development or by one professional who is qualified in two professions or areas of development. Professionals may include infant educators, speech therapists, physical therapists, occupational therapists, social workers, nurses, and/or others.





As the child's parent, you are an important part of the team during the assessment. You are welcome to participate in assessments and in any meetings where assessment results are discussed or explained. You can invite anyone to the assessment or meetings who can help you with the discussion about your child and can help you with making decisions. For the assessment, you have an opportunity to:

- give permission before any testing is done;
- give your service coordinator permission to gather information about your child from other professionals who know your child;
- share with the team what you know about your child's skills and needs;
- decide if the assessment will include information about your family's resources, priorities and concerns about your child;
- include information from other people who have tested your child in the last six months;
- get copies and explanations of the test results and other reports; and
- ask questions about the assessment process or the results.

The information learned through the assessment for service planning will be used by the team during the next step, the Individualized Family Service Plan (IFSP) meeting.

INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP) MEETING

The individualized family service plan (IFSP) is a written plan for providing early intervention services. Within 45 calendar days after referral, your team will meet to write an IFSP. At the IFSP meeting, members of the IFSP team, which includes you, work together to develop a plan for the next year.

You are an important member of the team. You can invite other family members or people who you feel can help you make good decisions for your child. Your service coordinator and local service providers will also be members of the team. Your service coordinator will set up the meeting at a time and place that is convenient and comfortable for you. You will also receive this information in writing.

At the IFSP meeting, you and the rest of the team will discuss your child's strengths and needs, what you consider most important for your child and family, and goals and *outcomes*. This is a good starting point for deciding what services are needed to help your child develop. All team members,





including you, share ideas about what activities and services will help your child and family. Together you will decide what goes in the IFSP.

Outcomes are statements of the major changes you and the rest of the team hope to see for your child and family.

The IFSP lists what you and the early intervention providers will be working on and includes:

- the name of your service coordinator;
- your child's current skills and levels of development;
- if you agree, a statement of your family's resources (supports that you and your child have, including people, activities and programs/organizations), priorities, and concerns related to your child's development;
- outcomes the team hopes to see for your child and family;
- what early intervention services and supports will be provided;
- where services will be provided;
- the natural environment, to the extent appropriate, in which services will be provided, including the home and settings that are natural or typical for children who are your child's age;
- how often services will be provided, when they will begin and how long they will last;
- other services needed by your family but that the early intervention system does not make available;
- payment arrangements, if any;
- a transition plan for when your child is getting ready to leave early intervention services; and
- your signed permission to begin services.

You will be asked to sign the IFSP to show that you agree with the plan and want your child and family to get the services that it describes. You can choose to accept all, some, or none of the services. Nothing will be done without your permission. You can ask for the IFSP to be reviewed at any time. If there is ever a time when you and the rest of the team cannot reach agreement on what services should be in the IFSP, refer to page 17.





AVAILABLE EARLY INTERVENTION SERVICES

Many kinds of early intervention services are available to meet the needs of the many different kinds of children and their families. Services can include:

- assistive technology devices and services
- audiology
- developmental services
- family training, counseling and home visits
- health services
- medical services (for diagnosis or assessment only)
- nursing services
- nutrition services
- occupational therapy
- physical therapy
- psychological services
- service coordination
- sign language and cued language services
- social work services
- speech language pathology
- transportation and related costs
- vision services

Some families receive only a few services. Others receive more. It depends





on your child and family's needs. Regardless of the type and number of services you receive, early intervention providers coach and support you to interact with your child in ways to support their development during everyday routines and activities.

PAYING FOR EARLY INTERVENTION SERVICES

Some services must be available at no cost to parents. These are eligibility determination, assessment, service coordination, IFSP development, and safeguards.

You may be charged for other early intervention services based on your ability to pay as determined using the steps described in the Facts About Family Cost Share section of Notice of Child and Family Rights and Safeguards Including Facts About Family Cost Share. You received a copy of this document, and it was explained to you when you received written prior notice before eligibility determination. You will be offered an additional copy and receive an explanation of this document at every IFSP review and annual IFSP meeting.

Some of the costs of services are supported by federal, state, and local funds. Local early intervention service providers also rely upon payment from individual health insurance (with your permission) and Medicaid, as well as fees based on parent income to fund services. However, you will not be denied services because you cannot pay for them. If you have some questions about how services for your child might be funded, you should discuss this with your service coordinator.

IFSP REVIEWS

You, your service coordinator, and service providers will review the IFSP over time to make any changes needed.

Six-Month IFSP Review

Ongoing assessment of your child's development and progress is built into early intervention services. Your child's IFSP will be reviewed every six months or more often if necessary. You, your service coordinator and, if appropriate, other service providers will review the IFSP. At the IFSP review, you and the others present will discuss your child's progress.





You can request a review of IFSP outcomes and services at any time. If your child is not making the expected progress, or if you believe that services need to be adjusted (increased, decreased, or ended), an IFSP review can be held to discuss your concerns.

Written prior notice is required before changes to services: Anytime early intervention providers want to make a change or refuse to make a change in the services listed on your IFSP, they must give you a notice in writing. Changes might include adding a new service, ending a service, or a change in how often you will receive a service. The change may have been suggested by you or by a provider(s). The notice must tell you what you can do if you disagree with the proposed change.

Any possible change will be discussed with you at an IFSP meeting first, and the written notice must be given to you **before** the change is discussed at an IFSP meeting. You can take time to think about the change and decide if you agree with it. You can also show the notice to others (a professional or friend) who can help you decide what is best for your child.

Annual IFSP

At least once a year, your team meets to discuss your child's progress and update the IFSP. Your service coordinator arranges this team meeting at a time and place that is convenient for you. Before an annual meeting, your service coordinator will let you know about the meeting in writing and give you an explanation of your safeguards in writing. As a part of the team, you will be asked to join in on the discussions and decision-making as you did for the first IFSP.

At the time of the annual IFSP, a multidisciplinary team will review information from you and from your child’s service providers to check that your child is still eligible for early intervention services.

Things I want to remember:





TRANSITION

By the time they leave early intervention, some children no longer need special assistance. Others still need some more help. This can be provided by community agencies, private providers or by the early childhood special education system in the public schools.

You should be informed about Virginia's system of services for children through age 5 at your first IFSP meeting. Virginia's system of services is designed to transition eligible children into public school services, if you agree, as early as age two (at the start of the school year in which your child is 2 by September 30) and by age 3.

Your local school system provides early childhood special education for children with delays and disabilities under what is called *Part B of the Individuals with Disabilities Education Act (IDEA)*. In Virginia, eligible children who will be two years old by September 30th can begin early childhood special education at the start of the school year. Many two-year-olds move to services through the school system in September of the year they are eligible. Transitions for some two-year-olds may be delayed until later in that school year if the local school system allows that. You decide when your child transitions as a part of the IFSP. Early intervention services continue to be available until the transition occurs or until your child's third birthday.

A transition plan helps you and your child move smoothly from early intervention to whatever comes next for your child. This transition plan is a part of your child's IFSP and must be developed at least 90 days or up to nine months (if all parties agree) prior to your child's third birthday or prior to your child's anticipated date of transition if he/she will transition earlier.

Steps in the transition to special education may include:

- notifying the local school division and the Virginia Department of Education of your child's name and birth date and your name, address, and telephone number as your child gets close to the age of eligibility for special education (at least 90 days before your child's anticipated date of transition), unless you indicate in writing on the IFSP transition page that you do not want the information sent. This notification serves as a referral for special education services;
- transferring information about your child (such as assessment





- information and IFSPs) to the local school system, with your permission;
- having a conference with the local school system at least 90 days or up to nine months (if all parties agree) prior to your child's anticipated date of transition;
 - discussing future services and placements; and
 - preparing you and your child for a change in services and helping her adjust to a new setting.

During the transition from early intervention to early childhood special education services, your service coordinator can go to meetings with you.

If your child is not eligible for special education, but still needs some services or supports, your service coordinator will, with your approval, attempt to schedule a transition meeting with others in the community to discuss next steps for your child and family. Your service coordinator can help you plan for and find other services in your community, as available. These might include Head Start, nursery schools, or other education or family support programs that can help meet your needs. Your IFSP will document these efforts.

As your child leaves early intervention services, it is a good idea to make sure you have a complete copy of your child's records. The records will help you document the progress your child has made and may be useful as you plan for future services and support. Review your child's early intervention records to decide what information you would like passed along to special education or your next service providers. If you disagree with something in your child's records, you can ask to have them changed. See page 16 for information on how to do this.

CONFIDENTIALITY

The early intervention services your family and child receive and the reasons you need these services are personal and private. Although you share personal information about your child or your particular family situation with your service providers, your privacy is protected through the confidentiality requirements in the early intervention system.

Confidentiality extends to written records and conversations people may have with you or about your child and family.





Early intervention providers collect information to keep careful track of what services are provided to your family and how well your child is doing. Keeping information confidential is not only a federal and state requirement, but also an important part of gaining your trust.

"My little boy's disability is one that a lot of people don't know about. It was so nice to have help with finding out who in my area could help us. But I always knew they wouldn't talk to anyone about us without our permission." —A Virginia Parent

There are extensive requirements telling early intervention providers how to handle confidential records. These include:

- **Record storage:** All records that contain personally identifiable information are kept where only certain people can see them. These authorized people include individuals who have a legitimate reason to look at your early intervention records. They include your service coordinator, the professionals working with you and your family, and the administrators of the agencies responsible for providing you with services.
- **Authorization to see files:** No one can give out information or tell what is in your child's record without your permission except under very limited circumstances allowed under federal law.
- **Disclosure record:** The local early intervention system has a list of all the files kept on your child and family. There is also a list of everyone who has looked at any of your child's records. You can see this "*disclosure record*" if you ask.
- **Parent permission:** Except under very limited circumstances allowed under federal law, confidential information in the files cannot be shown or given to anyone without your written permission. A copy of your written permission telling what information can be shared and who can get it must be kept in the file.





- **Disposal of records:** Your early intervention system will provide notification of when they no longer need the information in your child's records. Often the early intervention system will destroy the record at that point, and they are required to do so if you request it. However, the provider may maintain permanent records of your child's name, date of birth, your contact information (address, phone number), the names of your child's service coordinator and other early intervention providers, and information about when your child exited the early intervention program and any programs he transitioned to upon exit.

Periodically, during your time in Infant & Toddler Connection of Virginia, you will receive a copy and explanation of Notice of Child and Family Safeguards Including Facts About Family Cost Share which explains in detail all of the safeguards under Part C, including those related to confidentiality.

REVIEWING YOUR CHILD'S RECORDS

Looking at your child's and family's early intervention records helps you know about your child and your child's services. The more you know, the more effective you will be as a member of the team making decisions about your child. Knowing what is in the records helps you make the best decisions for your child. It is helpful to check to make sure that what is in your child's records is accurate.

You can ask your service coordinator to make arrangements for you to look through the records. Early intervention providers must let you see the records within a reasonable time (within 10 calendar days of your request) and before any meeting about your child. You can ask for explanations of anything you see in the records. You can also arrange for someone representing you or your child to look at the records.

You can ask for copies of the information in the records. One copy of the record must be made available to you at no cost. After that, you may be asked to pay for the actual cost of making the copies, but not for the time it takes to find and copy them. If you cannot afford to pay for the copies, you can still receive copies of your child's records.

If you see something in the records that you believe is not accurate, you can ask that it be changed or removed. Ask your service coordinator for help with this and about the local procedure to request a change in the records.





If service providers do not make the change you request, you can ask for a hearing. If the hearing officer determines that the record does not have to be changed, you can place your own explanation of the information into the file. Your explanation must be kept with the file and included every time the information you object to is given out so that the person who receives it will know about your concern.

RESOLVING DISAGREEMENTS

Early intervention works best when families and professionals work together. This means sharing information, being honest about ideas and feelings, listening carefully, asking questions, and treating everyone with courtesy and respect.

Even the best of friends sometimes disagrees. The same is true for families and service providers. In most cases, families and professionals can discuss their disagreements and reach a compromise that everyone can accept.

You and the people providing early intervention services are a team and have the same goal. You all want your child to get a good start in life. Service providers want you to be satisfied with what the team is doing on behalf of your child and family. Everyone on your team should listen to your ideas and concerns and answer your questions. It is easier to come to agreement when everyone tries to understand each other's view of the situation.

If you have differences, you will probably be able to settle those differences more easily if you:

- are specific about what is bothering you and give examples;
- know what effect the disagreement has on you and your child;
- are clear about how you want the situation to be different; and
- explain what you want others to do to make things better.

Sometimes, even when people mean well and try hard, talking it over does not work. There are three formal ways in the early intervention system to resolve disagreements. These are called complaints, mediation and impartial due





process hearings. A general description of these three procedures is provided below. A complete description is included in [Notice of Child and Family Rights and Safeguards Including Facts About Family Cost Share](#).

Filing a Complaint

Anyone can file a complaint if they believe any agency or person providing early intervention services has violated the early intervention requirements. Complaints must be made in writing, signed and must include your contact information; the specific facts on which the complaint is based, including the Part C requirement that is alleged to have been violated; the name of your child and the service provider; and a proposed solution to the problem if you have one. Complaints must be filed within one year.

As the parent of a child receiving early intervention services, you can also file a written complaint when you disagree with anything related to the services your child and family are getting. For example, you might want to file a complaint if your local early intervention system is not:

- doing something the team agreed to—like conducting an assessment or providing a service;
- meeting important deadlines—like determining eligibility and developing an IFSP in 45 days; or
- letting you look at your child's early intervention records.

Include in your written complaint specifically what action or decision you disagree with and why you object. Send a copy of your complaint to the agency or provider serving your child at the same time you send the complaint to:

Department of Behavioral Health and Developmental Services
Office of Early Intervention
P.O. 1797
Richmond, VA 23218

Call the Department at (804)786-3710 if you have questions.

Once your complaint is received, the state agency responsible for early intervention will investigate. You will be given the opportunity to submit





additional information, either verbally or in writing, about your complaint. You will be notified of the results of the investigation within 60 calendar days. Any issues that are currently being addressed in a due process hearing will not be investigated as a state complaint.

Using Mediation

Many disagreements between families and professionals can be worked out with the help of a mediator. *Mediation* is a process that makes it possible for a specially trained person, who doesn't have a financial or other interest in the case, to help you and the early intervention system reach an agreement.

In mediation, no one wins or loses. Successful mediation builds on the partnership you have with providers and keeps it strong. The result of mediation is that you and providers write down and sign what you each agree to do to solve the problem. Mediation occurs at a time and place convenient for both you and individuals representing the early intervention system.

You can begin mediation and file a request for an impartial hearing at the same time or you can begin mediation without requesting an impartial hearing. Mediation is voluntary. This means that if you do not think it will work, you do not have to do it.

The mediation process must be completed within 15 calendar days of the Infant & Toddler Connection of Virginia's state office receipt of notice that both parties agree to mediation. Mediation cannot extend the timelines for a due process hearing (30 calendar days).

Requesting a Due Process Hearing

Hearings are the most formal way to resolve disputes. You can request a hearing if you disagree with a decision or action that affects your child's identification, eligibility determination, placement or the services you and your child receive.

Hearings are conducted by impartial hearing officers who know the early intervention law, regulations, policies and practices. A hearing is a formal proceeding where evidence can be presented and witnesses can be called to testify. You can bring a lawyer with you or anyone else you think can help you present your case and best represent your child's interests.

A hearing follows a number of rules, including strict timelines. The main





rules for hearings are:

- hearing officers must be completely impartial—which means that they cannot have a personal or professional interest that would conflict with their objectivity in the outcome of the hearing or be an employee of any agency or entity providing early intervention services or care to your child;
- hearings must be held when and where it is reasonably convenient for you to attend;
- evidence presented must be shown to you at least five days before the hearing;
- the hearing must be recorded. The record can be a tape or a written transcript, and you can ask for a free copy;
- the hearing officer must make a decision and mail the written decision to each party no more than 30 calendar days after the request for a hearing is filed; and
- during the hearing process, your child and family must continue to receive the early intervention services currently in your IFSP unless you and the early intervention system agree otherwise. If the hearing involves a request for initial services and your child has been determined eligible, your child must receive those services already agreed to by you and the early intervention system.

Your written request for a hearing should say specifically what action or decision you disagree with and what you want changed. Send your request for an impartial hearing to:

Department of Behavioral Health and Developmental Services
Office of Early Intervention
P.O. 1797
Richmond, VA 23218

Call them at (804)786-3710 if you have questions.

After the hearing is completed, the hearing officer makes a decision based on





the facts and evidence presented. If you are not satisfied with the hearing officer's decision, you may file civil action with any state or federal court.

Filing a Medicaid Appeal (For Medicaid recipients only)

When the Infant & Toddler Connection of Virginia plans to take an action that adversely affects your child's services, you will receive a Notice of Action letter that explains how you can file an appeal with the Department of Medical Assistance Services, the state Medicaid agency in Virginia. Both the Notice of Action letter and the Notice of Child and Family Rights and Safeguards Including Facts About Family Cost Share explain what actions can be appealed, how to file an appeal and where to get more information.

If you have a disagreement with your early intervention service providers, deciding upon which options to take can be complicated. If you have questions, discuss your options with your service coordinator, who has the responsibility to make sure that you understand your options. You can also call The Arc of Virginia at 1-888-604-2677, the Virginia Office for Protection and Advocacy at (800) 552-3962 or the Parent Educational Advocacy Training Center at (703) 923-0010 or toll-free (800) 869-6782 to discuss options.





Things I want to remember:

A large empty rectangular box for writing.





GLOSSARY

Assessment—the ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility under Part C to identify: (a) the child's unique strengths and needs and the services appropriate to meet those needs; and (b) the resources, priorities and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their child.

Developmental delay—see page 6 of this guide

Eligibility—see page 6 in this guide

Eligibility Determination – the process by which a multidisciplinary team determines whether or not a child meets the Infant & Toddler Connection of Virginia eligibility criteria

Family—defined according to each family's definition of itself

IFSP or individualized family service plan— a written plan for providing early intervention services to eligible children/families

Mediation—a voluntary process freely agreed to by parents and providers to attempt to resolve Part C disagreements.

Multidisciplinary— the involvement of two or more qualified professionals from different disciplines or professions (or, in the case of eligibility determination and assessment for service planning, one individual who is qualified in two or more disciplines of professions)

Natural Environment—settings that are natural or normal for children who are your child's age

Personally identifiable information— information that would make it possible to identify your child with reasonable certainty, such as your child's and other family members' names, social security numbers, address, or a list of personal characteristics

Surrogate parent—an individual who is assigned to act for a parent when the child is a ward of the state or a parent cannot be identified or located

Transition—the entry or exit of children and families to and from early intervention services. See page 13 in this guide





Single Points of Entry for Accessing Early Intervention Services

Across Virginia, there are 40 local early intervention systems. Their contact information and areas served are listed below. Phone numbers may change. If you are not able to contact the local early intervention system through the number listed below, contact (804) 786-3710 to obtain the current phone number.

Infant & Toddler Connection of:	Counties/Cities Served	Phone Number
Alexandria	City of Alexandria	(703) 746-3387 (703) 746-3350
Alleghany Highlands	Alleghany County; Cities of Clifton Forge and Covington	(540) 863-1620
Arlington	Arlington County	(703) 228-1630
Augusta-Highland	Counties of Augusta and Highland	(540) 245-5133
the Blue Ridge	Counties of Albemarle, Fluvanna, Greene, Louisa, and Nelson; City of Charlottesville	(434) 970-1391
Central Virginia	Counties of Amherst, Appomattox, Bedford and Campbell; Cities of Bedford and Lynchburg	(434) 444-5904
Chesapeake	City of Chesapeake	(757) 547-8929
Chesterfield	Chesterfield County	(804) 768-7205
Crater District	Counties of Dinwiddie, Greensville, Prince George, Surry, and Sussex; Cities of Colonial Heights, Emporia, Hopewell, and Peters	(804) 863-1689 ext. 3160
Cumberland Mountain	Counties of Buchanan, Russell, and Tazewell	(276) 964-6702
Danville - Pittsylvania	Pittsylvania County; City of Danville	(434) 799-0456 ext. 3141
DILENOWISCO	Counties of Dickenson, Lee, Scott and Wise; City of Norton	(276) 431-3521
the Eastern Shore	Counties of Accomack and Northampton	(800) 568-9269
Fairfax - Falls Church	Fairfax County; Cities of Fairfax & Falls Church	(703) 246-7121
Goochland - Powhatan	Counties of Goochland and Powhatan	(804) 657-2010
Hampton - Newport News	Cities of Hampton and Newport News	(757) 726-4012
Hanover	Hanover County	(804) 723-2070
Harrisonburg - Rockingham	Rockingham County; City of Harrisonburg	(540) 433-7144 ext. 1
Henrico - Charles City - New Kent	Counties of Henrico, Charles City, and New Kent	(804) 727-8372
the Heartland	Counties of Amelia, Buckingham, Charlotte, Cumberland, Lunenburg, Nottoway, and Prince Edward	(434) 395-2967
the Highlands	Washington County; City of Bristol, Abingdon	(276) 619-2406
Loudoun County	Loudoun County	(703) 777-0561 (571) 258-3095
the Middle Peninsula - Northern Neck	Counties of Essex, Gloucester, King & Queen, King William, Lancaster, Mathews, Middlesex, Northumberland, Richmond, and Westmorland	(804) 758-5250 (800) 305-2229
Mount Rogers	Counties of Bland, Carroll, Grayson, Smyth, and Wythe; City of Galax and Marion	(276) 223-3270
the New River Valley	Counties of Floyd, Giles, Montgomery and Pulaski; City of Radford	(540) 831-7529
Norfolk	City of Norfolk	(757) 441-1186
the Piedmont	Counties of Henry, Franklin, and Patrick; City of Martinsville	(276) 632-7128 ext. 1241
Portsmouth	City of Portsmouth	(757) 393-8321
Prince William	Prince William County; Cities of Manassas, Manassas Park and Quantico	(703) 792-7879
the Rappahannock Area	Counties of Caroline, King George, Spotsylvania, and Stafford; City of Fredericksburg	(540) 372-3561
Rappahannock Rapidan	Counties of Culpeper, Fauquier, Madison, Orange, and Rappahannock	(540) 829-7480
Richmond	City of Richmond	(804) 855-2742
Roanoke Valley	Counties of Botetourt, Roanoke and Craig; Cities of Roanoke and Salem	(540) 283-5050
the Rockbridge Area	Counties of Bath and Rockbridge; Cities of Buena Vista and Lexington	(540) 462-6638
the Shenandoah Valley	Counties of Clark, Frederick, Page, Shenandoah, and Warren; City of Winchester	(540) 635-2452 Ext. 17
Southside	Counties of Brunswick, Mecklenburg, and Halifax; Cities of South Boston and South Hill	(434) 570-1505
Staunton-Waynesboro	Cities of Staunton and Waynesboro	(540) 245-5133
Virginia Beach	City of Virginia Beach	(757) 385-4400
Western Tidewater	Counties of Isle of Wight and Southampton; Cities of Franklin and Suffolk	(757) 562-6806
Williamsburg * James City * York * Poquoson	James City County, Poquoson, Williamsburg, York County	(757) 566-8687





Section I: Child and Family Information

Child's Name: _____ Date of Birth: _____
 Choose an
 Gender: Male Female Child's County or City of Residence: Fairfax County
 IFSP Date: _____ Initial Annual Date 6 mo. Review Due: _____
 Date(s) Review(s) Completed: _____
 Family's Primary Language and/or Mode of Communication: _____ Child's (if different) _____
 Medicaid Number (optional): _____ CODE ID: _____
 Parent's and/or Other Family Member's Name, Address, Phone And Other Contacts: _____

Service Coordinator's Name, Agency, Address, Phone Number, Email and Fax Number:
 Infant & Toddler Connection of Fairfax-Falls Church, 3750 Blenheim Blvd, Fairfax, VA 22030 Main (703) 246-7121 Fax (703) 653-1385
 Service Coordinator's Name: _____
 Service Coordinator's Phone #: _____
 Service Coordinator's Email: @fairfaxcounty.gov
 Early intervention services are provided to eligible children and their families in compliance with Part C of the federal *Individuals with Disabilities Education Act*.

Section II: Team Assessment

A. Referral Information, Medical History, Health Status:

B. Daily Activities and Routines

Early intervention supports and services are designed to fit into your family's life and take place as part of the daily activities of your child.

- Things your child does every day (or every week)
- Activities your child enjoys
- Activities or times of the day that are difficult or frustrating for you or your child (if any)
- Places you and your child go (or would like to go)
- Things you would like to do as a family, but cannot do because of your child's needs (if any)

Child's Name: _____ DOB: _____ Infant & Toddler
 IFSP Date: _____ CODE ID: _____ Connection of Virginia



C. Family Concerns, Priorities, and Resources:

To best support your child and family, it is helpful to understand what is important to your family. Your family's concerns, priorities, and resources will be used as the basis for developing outcomes and identifying strategies and activities to address the needs of your child and family. You may share as much or as little information as you choose.

Voluntary!
 Your child can still receive services if this section is not completed.
 _____ Parent initial if choosing not to include this information in the IFSP.

MY FAMILY'S CONCERNS

Concerns I have (if any) about my child's health and/or development. Information, resources, and/or supports I need or want for my child and/or family.

MY FAMILY'S PRIORITIES

The most important things for my child and/or family.

MY FAMILY'S RESOURCES

Resources that my child/family has for support, including people, activities, programs/organizations

Child's Name: _____ DOB: _____ Infant & Toddler
 IFSP Date: _____ CODE ID: _____ Connection of Virginia



Section II: Team Assessment

D. Summary of Your Child's Development (Comparisons to same age peers are based on your child's chronological age; the comparisons are not adjusted for prematurity. At the annual IFSP, this section will also document new skills your child has shown since the first IFSP.)

Social/Emotional Skills, including social relationships: This area involves how your child interacts with adults and with other children, including how your child communicates his or her feelings.

Child's Development in Relation to Other Children the Same Age:



Section IV: Outcomes of Early Intervention

Date Outcome Added: _____

Acquisition: Describe skill or behavior desired to be achieved.
 Context or Setting within Everyday Routines and Activities: Identify routines/activity in which behavior occurs.
 Criterion for Achievement Over What Amount of Time: Describe frequency/duration/rate for the new skill/behavior stated over a specific time period.

Outcome (Long-Term Functional Goal) #2 Target Date: _____ Date met, changed or ended: _____

Learning opportunities and activities that build on your child's and family's interests and abilities:

Short-Term Goals	Target Date	Date Met
1.		
2.		
3.		
4.		
5.		
6.		

Interventions (Treatment procedures and/or modalities)

Parent Coaching and Education



Section IV: Outcomes of Early Intervention

Date Outcome Added: _____

Acquisition: Describe skill or behavior desired to be achieved.
 Context or Setting within Everyday Routines and Activities: Identify routines/activity in which behavior occurs.
 Criterion for Achievement Over What Amount of Time: Describe frequency/duration/rate for the new skill/behavior stated over a specific time period.

Outcome (Long-Term Functional Goal) # Target Date: 3 _____ Date met, changed or ended: _____

Learning opportunities and activities that build on your child's and family's interests and abilities:

Short-Term Goals	Target Date	Date Met
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Interventions (Treatment procedures and/or modalities)



Section IV: Outcomes of Early Intervention

Date Outcome Added: _____

Acquisition: Describe skill or behavior desired to be achieved.
 Context or Setting within Everyday Routines and Activities: Identify routines/activity in which behavior occurs.
 Criterion for Achievement Over What Amount of Time: Describe frequency/duration/rate for the new skill/behavior stated over a specific time period.

Outcome (Long-Term Functional Goal) #3 Target Date: _____ Date met, changed or ended: _____

Learning opportunities and activities that build on your child's and family's interests and abilities:

Short-Term Goals	Target Date	Date Met
1.		
2.		
3.		
4.		
5.		
6.		

Interventions (Treatment procedures and/or modalities)



Section V: Services Needed to Achieve Early Intervention Outcomes

ENTITLED SERVICE	FREQUENCY (#x/wk/ month)	LENGTH (# min)	GROUP / INDIVIDUAL (I)	METHODS** (a,b,c,d)	NATURAL ENVIRONMENT/ LOCATION (Must be a natural setting unless justified below)	PAYMENT		
						1. Family Fee	2. Insurance	3. Medicaid
1. Service Coordination	1x/ every 3mos*	15min*	I	Service coordination	Home/Office/ Email/Text/Etc.	4,5,6		
2.		60min	I	A	Home/Comm /Daycare/Etc.			
3.								
4.								
5.								
6.								
7.								
8.								

* This is the minimum frequency and length of direct contact from your service coordinator. The frequency and length of service coordination d will vary since service coordination is an active, ongoing process that changes based on your family's priorities and needs.

** Methods: a = Coaching, including hands-on as appropriate b = Consultation c = Assessment d = Provision of assistive technology device

Justification of why early intervention outcomes can't be achieved satisfactorily in a natural setting and a plan with timelines and supports necessary to return early intervention services to natural settings:

Reason for later projected start date - For each service that is planned to start more than 30 calendar days after the family signs the IFSP, indicate whether the reason is family scheduling preference, team planned a later start date to meet child and family needs, or other:

Section VI: Other Services (Services needed, but not entitled under Part C - including medical services such as well baby checks, follow-up with specialists for medical purposes, etc.)

SERVICE	PROVIDER	LOCATION	STEPS TO BE TAKEN TO ASSIST IN SECURING SERVICES
Pediatrician			Ongoing medical appointment follow-ups



Section VII: Transition Planning

The following information about transition is discussed beginning at the initial IFSP meeting:

- Transition happens when your child leaves early intervention. The planning on this page will help you and your child move smoothly from early intervention to whatever comes next for your child.
- Options after early intervention (examples: community programs like neighborhood nursery schools, Head Start, early childhood special education through the public schools).
- Possible timing of transition
 - When your child reaches age level in all developmental areas and meets no other eligibility requirements for early intervention
 - When your child reaches his/her third birthday, which is the end of eligibility for early intervention
 - When and if your child begins early childhood special education services through the public schools (between age 2 and 3), if you are interested in those services. Children may not be served in early intervention and early childhood special education through the public schools at the same time.

This information was discussed on _____(date) by _____(initials of service coordinator)

Important Dates for Transition Planning:

- target date for notification and referral to determine eligibility if you are interested in early childhood special education services through your local school system (referral must occur at least 90 days before the anticipated date of transition and must occur by April 1 of the year your child turns 2 by Sept. 30 if you want your child to begin school on the first day of the next school year).
- (date of child's 3rd birthday) – date on which your child is no longer eligible to receive early intervention

Transition Plan
 The transition activities completed will depend on your transition plans and family preferences.

Transition Steps/Activities	Target Date	Date Completed	Initials Person Completing
<p>1. Community Options: Help your family explore community program options, which may include early childhood special education services, for your child</p> <p>a. Provide information, including program contact information, about community options following early intervention, as desired by your family. Information provided on the following programs:</p> <p>b. Arrange for visits to programs, as desired by your family. Programs visited: _____</p> <p>c. Other steps/activities (e.g., if you are interested, provide names of other families, with their permission, who have transitioned to programs you are considering): _____</p>			
<p>2. Notification and Referral to the Local School Division and Virginia Department of Education: At least 90 days before the anticipated date of transition and before April 1 of the year your child turns 2 by Sept. 30 if you want your child to begin school on the first day of the next school year –</p> <p>a. Send your child's name, date of birth and your contact information (name, address, phone number) to the _____ school division and Virginia Department of Education no earlier than _____ unless you disagree. Sending this information helps the school system to know who in the community may be eligible for special education services and is a referral to the local school division.</p> <ul style="list-style-type: none"> I do not want my child's name, date of birth and our contact information sent to the local school division and Virginia Department of Education for notification and referral (parent initials and date) I have changed my mind and agree to have this information sent to the local school division and Virginia Department of Education _____ (parent initials and date) <p>b. Date notification and referral sent to the local School Division: _____ to VDOE: _____</p> <p>c. With your consent on a release of information form, send specific information about your child to the local school division (e.g., most recent eligibility determination and assessment reports, IFSP, etc.)</p> <ul style="list-style-type: none"> Your consent obtained on release of information form on _____(date) Date information sent _____ 			



Transition Steps/Activities	Target Date	Date Completed	Initials Person Completing
<p>3. Support to Enroll in Other Programs: Help your family enroll in a community program(s), other than the local school division, that you are interested in for your child, as available.</p> <p>a. Help with getting and filling out paperwork and/or completing other steps necessary to enroll in the desired program:</p> <p>b. If needed, with your consent on a release of information form, refer your child and send specific information about your child to the future service provider or program (e.g., most recent eligibility determination and assessment reports, IFSP, etc.)</p> <ul style="list-style-type: none"> Your consent obtained on release of information form on _____(date) Referral sent to _____(program) on _____(date) Date information sent: _____ <p>c. Other steps/activities: _____</p>			
<p>4. Transition Planning Conference: At least 90 days, and up to 9 months if everyone agrees, before your child's anticipated date of transition –</p> <p>If your child might be eligible for early childhood special education services, plan for a transition conference between you, your service coordinator, and someone from your school division.</p> <p>a. Parental Prior Notice form provided on _____(date)</p> <p>b. You do / do not approve conference.</p> <p>c. If you approve the conference, service coordinator ensures scheduling of conference and participation by required parties:</p> <ul style="list-style-type: none"> Transition conference held on _____(date) The following participated: (You - required), (early intervention - required), (school division - required), (other _____), (other _____) 			
<p>5. Transition Services: Once your transition plans have been determined, help your child and family prepare, as desired by your family, for changes in supports and services so you can move smoothly out of early intervention and, if appropriate, into a new program</p> <p>a. Your child will transition to _____ on _____(projected date)</p> <p>b. Help your child and family get ready to transition out of early intervention and, if appropriate, into a new program/setting by: _____</p>			
<p>6. Exiting Early Intervention: Discharge your child from the local Part C system before his/her 3rd birthday</p> <p>a. Parental Prior Notice form is signed Yes No</p> <p>b. Date of discharge/closure _____</p>			



Parental Consent for Provision of Early Intervention Services:
 Section on Voluntary IFSP Agency Enrollment

Section on Voluntary IFSP Agency Enrollment Information about family cost share under Part C of IDEA (Notice of Child and Family Rights and Safeguards Including Facts about Family Cost Share) along with this IFSP. These rights and payment policies have been explained to me and I understand them. I participated in the development of this IFSP and I give informed consent for the Infant & Toddler Connection of Virginia system and service providers to carry out the activity(ies) listed on this IFSP.

Consent means I have been fully informed of all information about the activity(ies) for which consent is sought, in my native language (unless clearly not feasible to do so) or other mode of communication; that I understand and agree in writing to the carrying out of the activity(ies) for which consent is sought; the consent describes that activity(ies); and the granting of my consent is voluntary and may be revoked in writing at any time.

I understand that the Infant & Toddler Connection allows parents to choose a specific service provider agency or service provider. The Infant & Toddler Connection will make available the IFSP service(s) needed by my child in a timely manner even if it is not with the provider of my first choice. If I wish to select a specific provider, then my consent to the IFSP service will begin once that provider is available and then services will be provided in a timely manner.

I understand that I may decline a service or services without jeopardizing any other early intervention service(s) my child or family receive through the Infant & Toddler Connection of Virginia system.

I understand that my IFSP will be shared within the local Infant & Toddler Connection of Virginia system, including with providers involved in assessment and/or in the development and/or implementation of this IFSP.

Signature(s) of (check one): Parent(s) Legal Guardian Surrogate Parent _____ Date _____

Other IFSP Participants (Printed name, credentials, signature, date):

- Discipline: Service Coordinator
- Choose an item.
- Discipline: Choose an item.
- Choose an item.
- Discipline: Choose an item.
- Choose an item.
- Discipline: Choose an item.

The following individuals participated electronically or in writing (specify which):

Translator/Interpreter (if used):

The following related documents are attached:

Copies to:

Physician Certification (required in order to bill insurance): I certify and approve that _____ services, as described in the IFSP, are medically necessary for this child.

Signature _____ Credentials _____ Date _____



Section IX: IFSP Review Record

Purpose of Review: _____ Upon Request by: _____ Review Date: _____

Summary (Include rationale for any changes resulting from this review):

Change(s): _____ Projected Start Date For Change: _____

Parental Consent
 I have received a copy of family rights and information about family cost share under Part C of IDEA (Notice of Child and Family Rights and Safeguards Including Facts about Family Cost Share) along with this IFSP Review Record. These rights and payment policies have been explained to me and I understand them. I participated in the development of this IFSP Review and I give informed consent for Infant & Toddler Connection of Virginia system and service providers to carry out any changes listed on this IFSP Review Record.

I understand that the Infant & Toddler Connection allows parents to choose a specific service provider agency or service provider. The Infant & Toddler Connection will make available the IFSP service(s) needed by my child in a timely manner even if it is not with the provider of my first choice. If I wish to select a specific provider, then my consent to the IFSP service will begin once that provider is available and then services will be provided in a timely manner.

Consent means I have been fully informed of all information about the activity(ies) for which consent is sought, in my native language (unless clearly not feasible to do so) or other mode of communication; that I understand and agree in writing to the carrying out of the activity(ies) for which consent is sought; the consent describes that activity(ies); and the granting of my consent is voluntary and may be revoked in writing at any time.

I understand that I may decline a service or services without jeopardizing any other early intervention service(s) my child or family receives through the Infant & Toddler Connection of Virginia system.

I understand that my IFSP will be shared within the local Infant & Toddler Connection system, including with providers involved in assessment and/or development and/or implementation of this IFSP.

Signature(s) of (check one): Parent(s) Legal Guardian Surrogate Parent _____ Date _____



Section IX: IFSP Review Record

Review Date: _____

If services increased on this IFSP review and my child is covered by private insurance:

My insurance should be billed for covered services. Unless my monthly cap is \$0, I agree to continue paying for any applicable co-payments, deductibles and/or non-covered services in the manner indicated in the Charges section on the Family Cost Share Agreement form. I understand I can cancel this consent at any time by giving written notice to my child's service coordinator.

My insurance should no longer be billed for covered services. Unless my monthly cap is \$0, I agree to pay for services in the manner indicated in the Charges section on the Family Cost Share Agreement form. I understand that I must complete and sign a new Family Cost Share Agreement form.

I understand I can contact my service coordinator if I have questions about use of insurance or the payment arrangements on the Family Cost Share Agreement form.

Signature(s) of (check one): Parent(s) Legal Guardian Surrogate Parent _____ Date _____

Other IFSP Participants (printed name, credentials, signature, date):

Designate Service Coordinator _____

Choose an item. Designate Choose an item. _____

Choose an item. Designate Choose an item. _____

Choose an item. Designate Choose an item. _____

Choose an item. Designate Choose an item. _____

The following individuals participated electronically or in writing (specify which):

Physician Certification (required in order to bill insurance): I certify and approve that _____ services, as described in the IFSP, are medically necessary for this child.

Signature _____ Credentials _____ Date _____



Addendum

(Refer to corresponding number in Section V of the IFSP for service details)

#	Service	SERVICE PROVIDER (Name, agency address, phone number)	Current?
1	Service: Coordination	, Infant & Toddler Connection of Fairfax-Falls Church. (email) / (office) / (cell)	
2	Choose an item.		
3	Choose an item.		
4	Choose an item.		
5	Choose an item.		
6			
7			
8			

I was given the opportunity to choose from among provider agencies who work in my local system area and who are in my payor network. I may request to change service providers at any time by contacting my service coordinator.

12 For Services # _____ Signature(s) of (check one): Parent(s) Legal Guardian Surrogate Parent _____ Date _____

For Services # _____ Signature(s) of (check one): Parent(s) Legal Guardian Surrogate Parent _____ Date _____

For Services # _____ Signature(s) of (check one): Parent(s) Legal Guardian Surrogate Parent _____ Date _____



Resources and Helpful Links

Infant & Toddler Connection of Virginia	Describes principles of Early Intervention, services and supports in the State of Virginia. Provides resources for families and links to EI programs within VA and other States. https://www.itcva.online
Infant & Toddler Connection of Fairfax Falls Church	Includes information about Early Intervention services through Fairfax County and helpful links including online referrals and first steps of enrollment to our program. https://www.fairfaxcounty.gov/office-for-children/infant-and-toddler-connection
Zero to Three	Information for parents about the first three years of life. https://www.zerotothree.org/
Fairfax County Government and City of Falls Church Government	Provides information about community resources (libraries, childcare, Early Head Start, Head Start, park and recreational activities). http://www.fairfaxcounty.gov and http://www.fallschurchva.gov/
Fairfax County Coordinated Services 703-222-0880	Provides information, referral, linkage, and advocacy to public and private human services available to Fairfax County residents. Multilingual staff is available to assist callers in different languages. https://www.fairfaxcounty.gov/neighborhood-community-services/coordinated-services-planning
Fairfax County Public Schools Special Education Preschool program	Describes Fairfax County Public Schools Early Childhood Identification and Services and links families to the Parent Resource Center for educational materials and workshops. https://www.fcps.edu/registration/early-childhood-prek/child-find
City of Falls Church Special Education and Student Services	https://www.fccps.org/page/special-education-student-services
Center for Family Involvement	This program works with families to increase their skills as advocates, mentors and leaders so that families, children and young adults with disabilities can lead the lives they want. https://centerforfamilyinvolvementblog.org/
The Arc of Northern Virginia	Provides services and resources for People with Intellectual and Developmental Disabilities and their families. https://thearcofnova.org/ First Steps for Fairfax & Falls Church Families -Starting-Life.pdf: https://thearcofnova.org/wp-content/uploads/sites/6/2018/11/Starting-Life-updated-May-2020.pdf
Parks and Recreation — Parktakes	Offers classes and activities for the community at county-wide recreation centers. Scholarships available for ITC participants. Contact your Service Coordinator for details. http://parktakes.fairfaxcounty.gov/parks/parktakes/
PEATC Parent Educational Advocacy Training Center	Provides technical support and workshops on special education related issues. http://www.peatc.org/
Care Connection for Children	Provides services and resources for children with special health needs. http://www.inova.org/inova-in-the-community/care-connection-for-children/index.jsp
Fairfax County Health Department	http://www.fairfaxcounty.gov/health
Fairfax County Speech and Hearing Clinic	Provides speech and audiology services to children and adults on a sliding fee scale. https://www.fairfaxcounty.gov/health/speech-hearing
Virginia 211	When you dial 2-1-1, a trained professional will listen to your situation and suggests sources of help using one of the largest databases of health and human services in Virginia. www.211virginia.org

Your Service Coordinator can provide you with other information at your request based on your individual needs.

Making the Most of Your Visit

Before the Visits

Prepare: Schedule your visit, in-person or via tele practice, at a time when your child is alert, happy and able to participate in a family routine such as play time or mealtime. Make a list or mental note of important things to share, including how your child responds to the strategies you develop with your provider. If in-person, discuss where you would like to meet. If via tele practice, your provider will discuss with you the best placement of your device to see and hear you and your child.

You know your child best, so your provider needs your input as much as you need theirs. You have valuable information about your child's development, learning style, and interests, as well as your family's routines. Children learn best when practicing and participating in familiar routines with people they know well. You are your child's best teacher.

During the Visit

Share: Tell your provider what happened between visits and if the established plan for today's session is still a priority.

Discuss: Tell your provider about your family routines or activities your child is interested in. When and where would you like your child to practice new skills?

Practice: Develop new strategies with your provider and practice them together with your child.

Clarify: Make sure you understand why certain strategies are being recommended and how you can carry them out. If you are not sure about something, just ask your provider. Your provider wants to make sure you are comfortable with the planned activities and able to implement them after the visit.

Prepare: Discuss ideas and activities for carry-over between visits. You and your provider will develop a plan that consists of activities that will be practiced between your sessions. This joint plan is created by discussing routines that occur naturally during your child's day and developing strategies that support your child's development that you can incorporate into those routines. Discuss routines and activities you would like to address at the next session. Problem solve any issues with when and where you are meeting, including technology issues if via tele practice.

After the Visit

Practice: Try out strategies that you and your provider developed together. Think about how your child responds to these strategies including which strategies work or do not work.

Note: Remember to make a mental note or keep a notebook with a list of questions or observations that arise between visits. Feel free to take videos and share with your provider the successes or challenges that occur in between sessions.

Enjoy: The best teaching and learning occur when you and your child are having fun together.

Celebrate: Acknowledge and enjoy your successes and your child's successes, no matter how big or how small!

Remember: Call your Service Coordinator if you have any concerns or questions that your provider cannot answer.

Early Intervention Participation Commitment

By signing the Individualized Family Service Plan (IFSP), I am showing I understand the following:

Early Intervention is a parent/caregiver-participation based program. It is important for me or my child's caregiver to be present and participate during visits to help with my child's progress. If my child is being seen for visits with a caregiver other than myself, it is important to ensure frequent communication with my direct service provider.

Children learn best through everyday routines and repeated interactions with the people who are a part of their lives. For my child to make progress it is important for me to implement strategies in his/her daily routines.

Early intervention services are in high demand and at times outpace ITC availability. I understand my service provider has reserved appointment times for my family. If I am unable to meet the services and frequencies on my IFSP, my services may be reviewed with me and possibly reduced, or I may no longer stay assigned to my same provider.

Communication with my service coordinator is important. I understand that I am required to have contact with my service coordinator, as appropriate, to review and monitor my child's progress.

Communication with my service provider is important. If I do not respond to communication from my ITC providers, my services may be reviewed and possibly reduced, or I may no longer stay assigned to my current provider.

I will confirm with my child's provider my preferred means of contact and communication. This may include phone, e-mail, or text.

I understand that I may contact my service coordinator or program administrator to discuss concerns about services.



Getting Ready for your Tele practice

Before the Visit

- ◇ Install the Microsoft Teams app on your computer and/or phone.
- ◇ Schedule your tele practice visit at a time when your child is alert, happy and able to participate.
- ◇ Verify prior to your visit that your device is fully charged.
- ◇ Identify the best place in your house for the visit where the child can be observed.
- ◇ Consider your internet connectivity ...

During the visit

- ◇ Discuss with your provider the best placement of your device. Your provider will need to see your child as well as be able to hear and see you. Your provider will let you know if adjustments need to be made.
- ◇ Problem solves any technology issues with provider such as connectivity or device placement.

Troubleshooting

If you are having Connectivity Issues:

- ◇ Log out of Microsoft Teams and log back in again.
- ◇ Check internet speed. To do this, Google “internet speed test.”
- ◇ Restart your internet router and/or computer and make sure you are connected to the network.
- ◇ Move physically closer to the router in your home or consider using network data if available.
- ◇ Power off or turn “Airplane Mode” on for other devices that you are NOT using for the session that may be connected to the internet. They may be hogging your bandwidth.
- ◇ Close all other browsers and apps open on your computer or phone.
- ◇ Try a different browser. Instead of Safari try opening the session through Google Chrome/Edge.
- ◇ You may have poor quality video when others in your household are using the WiFi connection and taking up bandwidth.

When Your Child Transitions...



Your child's Service Coordinator will help you with transition. A transition plan for your child is documented in your child's Individualized Family Service Plan (IFSP). Transition options for your child will be discussed at IFSP meetings and at an individual Transition Planning Conference if you choose to have one.

Your child may transition to other public or private services.

Children often transition to preschool public school special education programs between 2 and 3 years of age. Information about public school programs is available at the following websites:

Fairfax County Public Schools:

<https://www.fcps.edu/academics/early-childhood-education/early-childhood-instruction/early-childhood-special-education>

Falls Church City Schools:

<https://www.fccps.org/page/special-education-student-services>

Other useful transition websites:

The **Fairfax County Government** website: www.fairfaxcounty.gov which includes information such as:

- Early Head Start/Head Start:
<https://www.fairfaxcounty.gov/office-for-children/head-start>
 - Child Care Central/Office for Children:
<https://www.fairfaxcounty.gov/office-for-children/>
 - Speech & Hearing Clinic services:
<https://www.fairfaxcounty.gov/health/speech-hearing>
 - Parks and Recreation:
<https://www.fairfaxcounty.gov/parks/>
 - Library programs:
<https://research.fairfaxcounty.gov/early-literacy/whyreadchildren>
- ◆ **The City of Falls Church website:**
www.fallschurchva.gov

The Infant & Toddler Connection of Virginia has resources for families and links to other state websites:

<https://www.itcva.online>

Your Service Coordinator can provide you with printed information from the websites above at your request.



Fairfax County is committed to nondiscrimination on the basis of disability in all county programs, services and activities. Reasonable accommodations will be provided upon request.

For information, call 703-324-4600 or TTY 711.



Fairfax County
Neighborhood and
Community Services

