

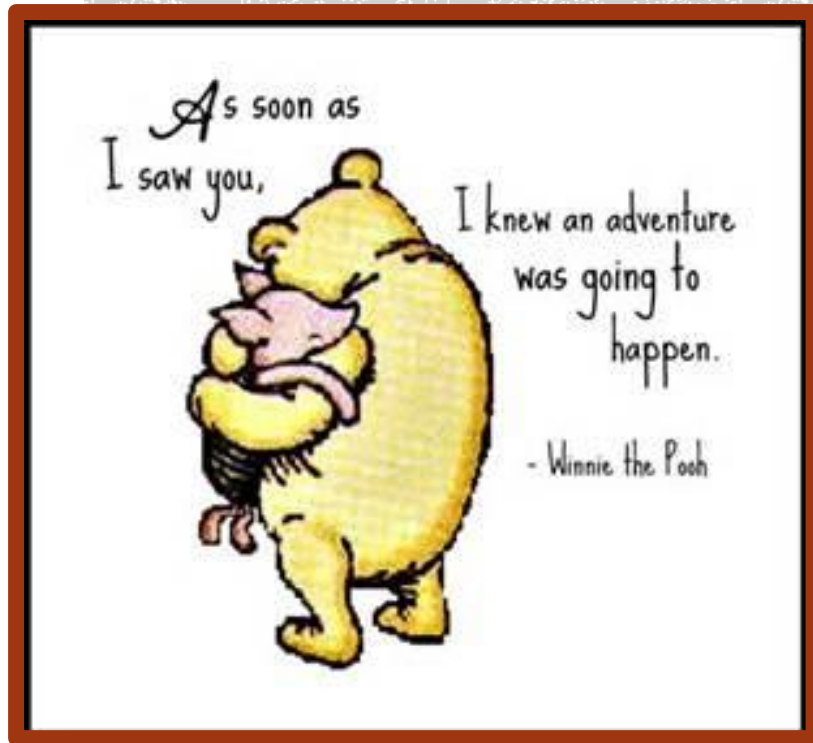
ALABAMA'S EARLY INTERVENTION SYSTEM

101

A STEP AHEAD



EARLY INTERVENTION 101



- **What is Alabama's Early Intervention?**
- **What is AEIS Child Find?**
- **Who is eligible to receive EI services?**
- **What is AEIS's Commitment...8 Core Values**

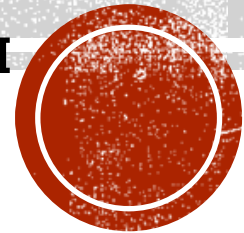
THE FOUNDATION IS IMPORTANT!

**Individuals with
Disabilities Education Act
– Part C**

**AL Department of
Rehabilitation Services –
Lead Agency**

**Over 50 EI Programs across
all 67 counties serving over
7700 infants, toddlers and
their families.**

**Seven Local District EI
Coordinating Councils**



AN URGENT NEED!

Reduce Special
Education Costs

Enhance Capacity of
Families

Enhance Development of
Infants & Toddlers



Keep Families
Together

Utilize Evidence Based
Practices

Minimize Likelihood for
Institutionalization





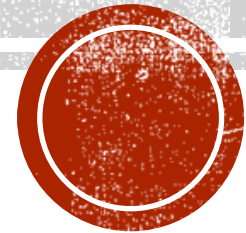
**WHAT IS
ALABAMA'S EARLY
INTERVENTION?**

- ✓ **Coordinated, family-focused system of resources, supports and services for eligible infants and toddlers birth through 2 years who have developmental delays or a diagnosis that would put them at risk for developmental delays**
- ✓ **Supported by federal, state and private funding sources**
- ✓ **System of service delivery that is voluntary on behalf of the family even if the child is eligible for early intervention**

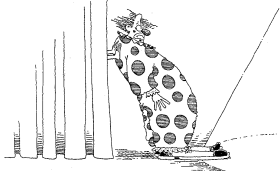
EARLY INTERVENTION

Referral & Eligibility

Timelines, IFSP, Transition



Without your
help ...



...I couldn't go on.

REFERRAL

- **Child Find – system for locating potentially eligible infants/toddlers.**
- **1-800-543-3098**
- **Anyone can make a referral.**
- **Highest referral sources: medical community, families, childcare.**
- **Identified through family or professional concerns.**
- **Suspected delay or diagnosed condition.**





Alabama's Early Intervention System Child Find Referral Form

To make a referral by phone: 1-800-543-3098
Mail to: ADRS/EI, 602 S. Lawrence St., Montgomery, AL 36104 or Fax to: Child Find Fax # (334) 293-7393
or email to both: margaret.pouncey@rehab.alabama.gov and tonya.gandy@rehab.alabama.gov
for more information visit: www.rehab.alabama.gov/ei
Please print clearly and complete all blanks -no stamps or labels

INFANT/TODDLER INFORMATION

1. SSN# (if available): _____ 2. Date of Birth: _____ 3. Sex: F M
4. Last Name: _____ First Name: _____ MI/Name: _____
5. Is your child of Hispanic or Latino origin? Y N 6. Child's Primary Race: _____
* If Primary Race is Two or More Races: Hispanic/Latino American Indian/Alaska Native Asian
(Mark appropriate boxes) Black/African American Hawaiian/Pacific Islander White
7. Home Language: _____ 8. Medicaid: Y N Medicaid # _____
9. Private Insurance: Y N 10. CHIP/All Kids Y N

CHILD RELATION INFORMATION

11. First Name: _____ Last Name: _____ MI: _____
12. Relation Type: _____ 13. Is this Primary relation? Y N 14. Is address same as child? Y N
15. Mailing Address: _____
City/State/Zip: _____ 16. County: _____
17. Physical Address (if different from above): _____
City/State/Zip: _____ 18. County: _____
19. Primary contact #: () _____ 20. Alternate contact #: () _____
Alternate contact #: () _____ Work Phone #: () _____ Ext #: _____
Primary Contact Email address: _____

REFERRAL SOURCE INFORMATION

21. Person making referral: _____ 22. Referral Source: _____
23. County: _____ 24. Phone: _____ 25. Fax: _____
26. Reason for referral: _____
27. How family became aware of Child Find: _____ Additional Information: _____
Refer to Service Coordinator/Caseload ID # (leave blank if unknown): _____
Date Mailed/Faxed to Child Find: _____ Sender's Name/Phone #: _____

PHYSICIAN USE ONLY

28. I certify that the child named above has a confirmed diagnosis of _____
29. Printed Name of Physician: _____ 30. Phone #: _____
31. Signature of Physician: _____ Today's date: _____

STATE OFFICE USE ONLY

New Case ID#: _____ SS# or T#: _____
Referral taken by: _____ Date taken: _____ Received by: phone email fax Processed by: _____ Official referral/entry date: _____
 ATTACHMENT: _____ Signed release of information

- Comment
- Fill & Sign
- More Tools

CHILD FIND

LET'S TAKE A LOOK AT THE EI REFERRAL FORM

Store and share files in the Document Cloud

[Learn More](#)



ELIGIBILITY

Under the age of three years

25% or greater delay in one or more of the five developmental areas:

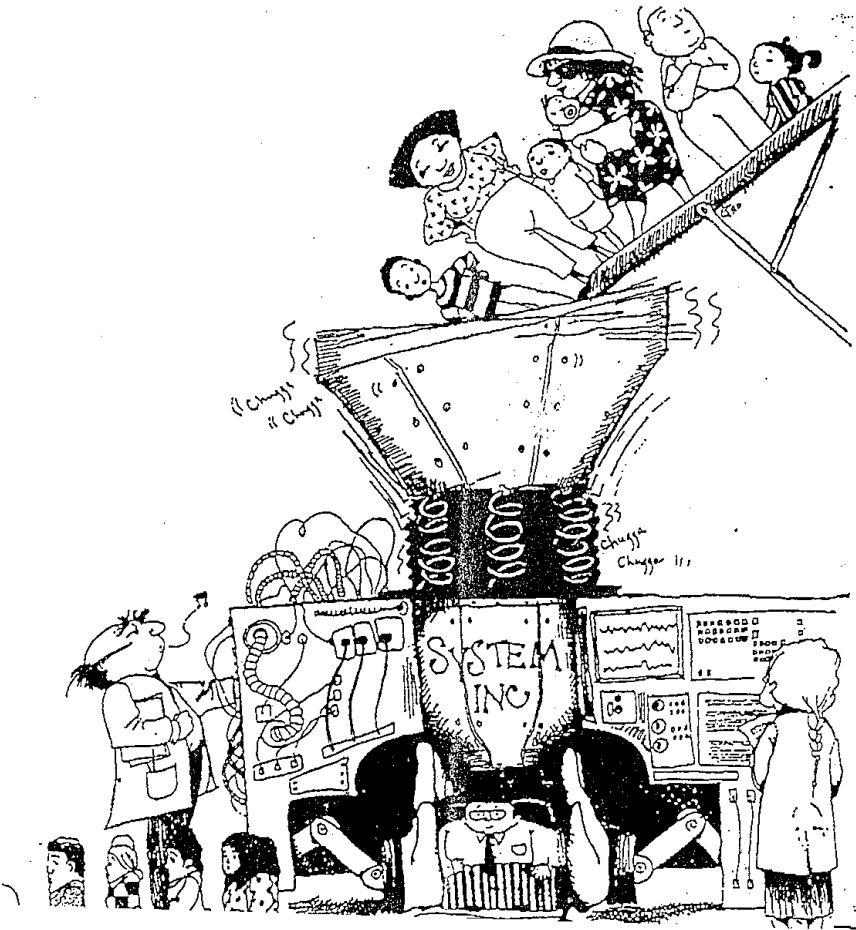
- **Physical**
- **Communication**
- **Adaptive**
- **Cognitive**
- **Social emotional**

Documented diagnosed condition that is likely to result in a developmental delay

- **Down Syndrome**
- **Prematurity**
- **Vision**
- **Hearing**



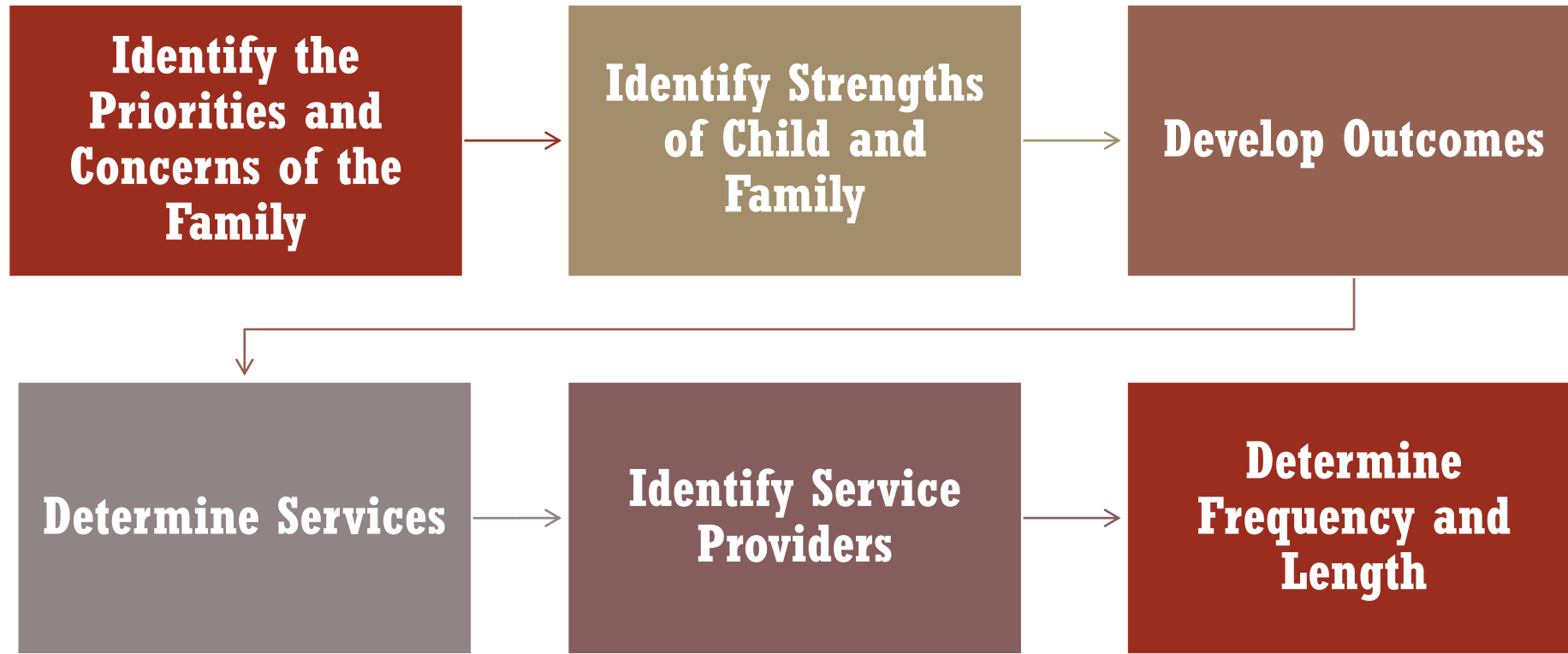
Evaluation and Assessment



- ★ **Determines eligibility**
- ★ **Determines service needs**
- ★ **Conducted in 5 domains:**
 - * **Cognitive**
 - * **Physical (+ vision & hearing)**
 - * **Communication**
 - * **Adaptive Behavior**
 - * **Social Emotional**
- ★ **Conducted by 2 qualified professionals of different disciplines & meeting EI Personnel Standards.**
- ★ **Using 2 different procedures**
- ★ **Conducted within 45 calendar days of referral date**



DEVELOPMENT OF THE INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP)



EI PROCESS TIMELINES

- **Child Find & Referral**
- **Evaluation & Assessment**
- **Voluntary Family Assessment**
- **Individualized Family Service Plan**
- **Outcome development**
 - **Frequency & length**
 - **Who & where**
- **Services**
- **Reviews**
- **Transition Plan**

All within 45 days

Within 30 days

6 Month, Annual, Additional

During the 27 month





***8 CORE VALUES
OF EARLY
INTERVENTION
IN ALABAMA***

Family-Centered

Developmentally Appropriate

Individualized

Natural Environments

Train/Equip Families/Caregivers

Collaborative

Based on the Routines of the Family

Evidence-Based Practices

1. FAMILY CENTERED PRACTICES

Support	Support families in their role as parent/caregivers.
Empower	Empower families to make a developmental difference for their child in their daily routines.
Strengthen	Strengthen child, parent and family functioning
Build	Build family capacity

2. DEVELOPMENTALLY APPROPRIATE

Meeting your child where they are developmentally and implementing practices that facilitate learning and development

Assist with understanding typical development and how your child is likely to develop based on factors of medical diagnosis or delay

Coaching, training and frequent practice is offered and required for families while providing services and in-between services with consideration for the *projected developmental track* of an individual child



3. INDIVIDUALIZED

IFSP should include individualized outcomes based on the needs and priorities of the child & family



Services and supports should be individualized to meet the needs of the child/family outcomes

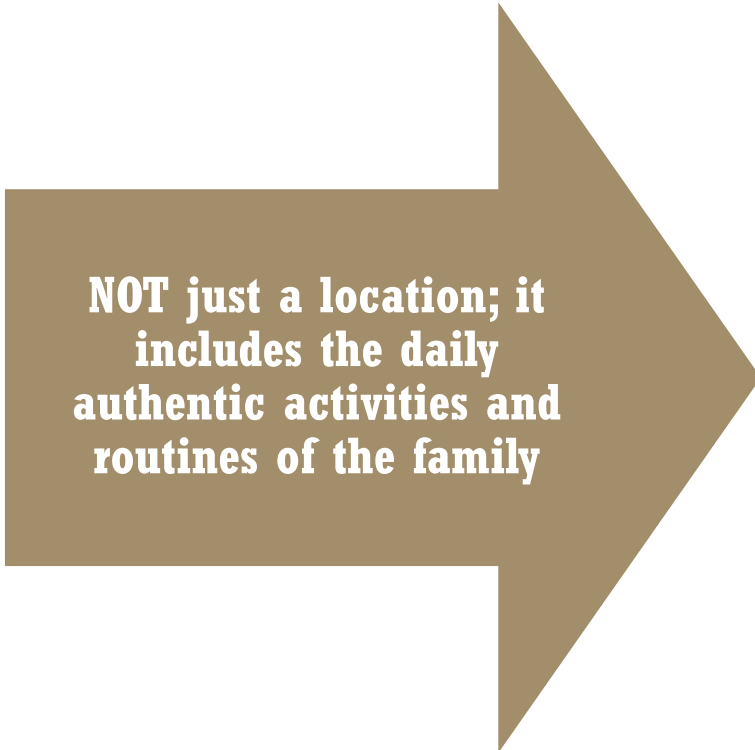


Frequency and length should change, based on the growth and development of the child and progress made towards meeting outcomes


4. NATURAL ENVIRONMENT



Services provided where children and families typically are such as home, childcare, playgrounds, etc. and where support is needed



NOT just a location; it includes the daily authentic activities and routines of the family



5. TRAIN AND EQUIP

Effective and ongoing communication

The *family* is key influencer in their child's development

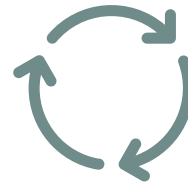
Teaching caregivers skills they need and emphasizing that frequent practice is needed to assure skill development and retention.

Encouragement and motivation

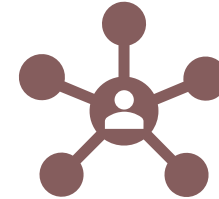
6. COLLABORATIVE



Share responsibility for outcomes



Share information, strategies and interventions



No one can do it alone – must collaborate, communicate and coordinate with other agencies.

7. ROUTINES-BASED

Times of day identified by the family that are considered a concern or priority

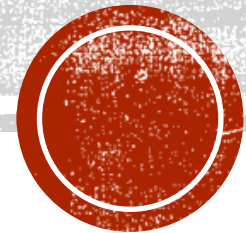
Routines are activities that happen naturally

Families have their own unique routines or times of the day



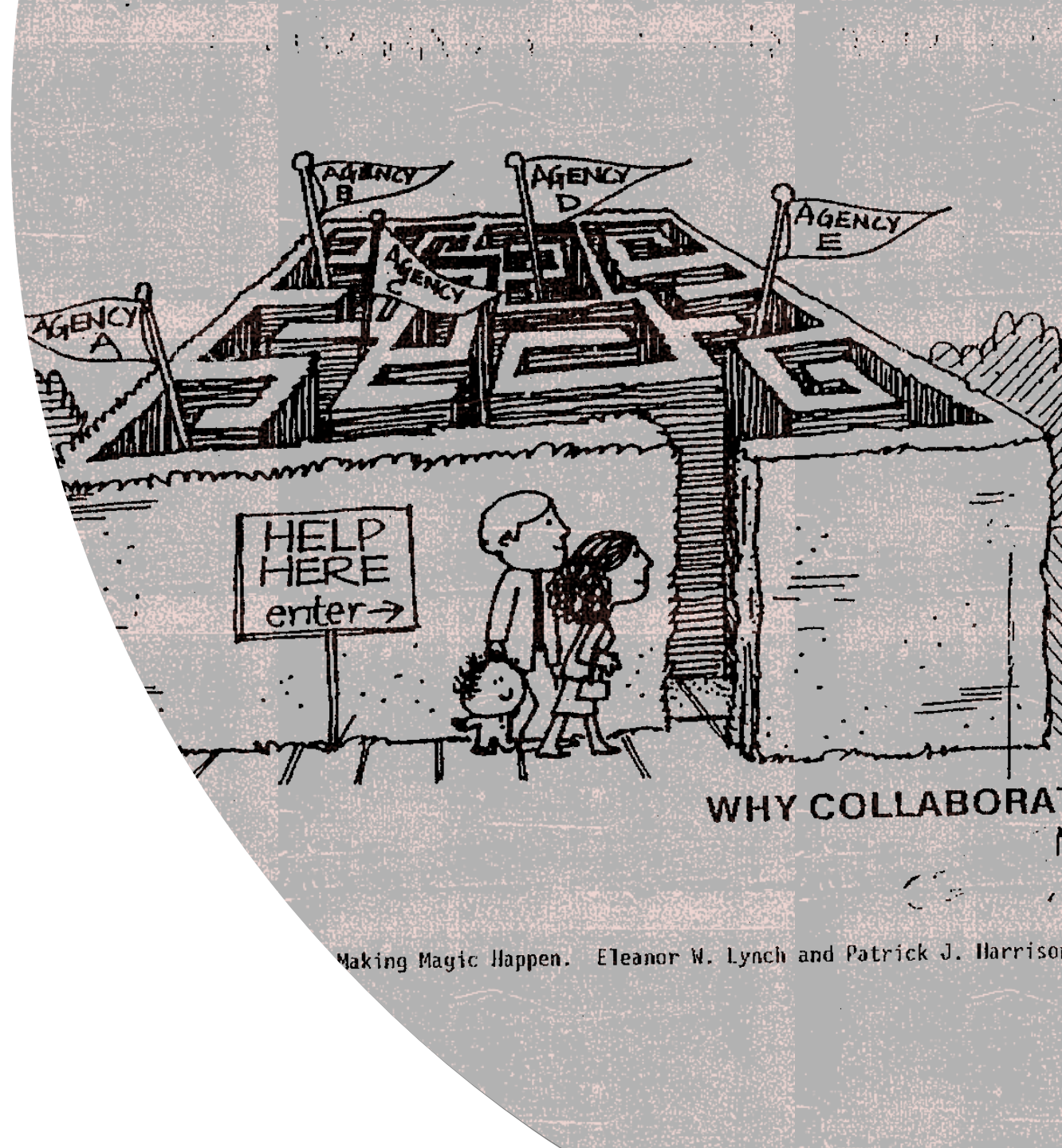
8. EVIDENCE-BASED PRACTICES

- Pulls together the best available research
- Knowledge from professional experts
- Data from children and their caregivers
- To identify and provide services, evaluated and proven to achieve outcomes for children and families



TRANSITION PROCESS

- **Introduced to School System**
- **Educational Needs Discussed**
- **LEA Explains Parental Rights**
- **Discuss Additional Information Needed**
- **Families Ask Questions**
- **Families Decide If They Want to Transition or Opt Out**



WHY COLLABORATE

Making Magic Happen. Eleanor W. Lynch and Patrick J. Harrison

SIMILARITIES AND DIFFERENCES

Part C - EI

- **Part C services are voluntary**
- **Services are provided from birth to the day the child turns 3**
- **Part C requires an Individualized Family Service Plan (IFSP)**
- **IFSP's are reviewed at least every 6 months**
- **Family participation is required**
- **Service coordinator is responsible for coordinating all EI services listed on the IFSP**

Part B – School System

- **Part B services are mandated & assures all services are available through the local education agencies**
- **Services are provided from age 3 to 21**
- **Part B requires an Individualized Education Program (IEP)**
- **IEP's are reviewed annually**
- **Parents participate in the special education process**
- **Under Part B, there is not designated service coordinator**





<http://rehab.alabama.gov/>

Child Find Number: 1-800-543-3092

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