

ATTACHMENT C

EARLY INTERVENTION ADMINISTRATION WORK PLAN

October 1, 2021 - September 30, 2026

The mission of the statewide Early Intervention Program (EIP) is to identify and evaluate as early as possible those infants and toddlers whose healthy development is compromised and provide appropriate intervention to improve child and family development.

Local governments are responsible for administering the EIP, subject to regulations of the Commissioner of Health, Subpart 69-4 of subchapter H of Chapter II of Title 10 (Health) of the Official Compilation of Codes, Rules and Regulations of the State of New York. Administrative funds are provided to all municipalities to offset costs incurred in the implementation of the EIP, exclusive of due process costs. This funding is contingent upon a municipality's compliance with the following work plan developed by the Department:

Work Plan Responsibilities of Municipalities for 2021-2026

Public Awareness and Child Find

Municipalities will ensure that primary referral sources are aware of their responsibilities; that required provisions related to initial service coordination are implemented; and that procedures to complete evaluations, determine eligibility, and report eligibility determinations are implemented according to all regulatory requirements.

To accomplish this, municipalities will:

- Establish and maintain a single point of entry for referral of children who are at risk for developmental delays or potentially eligible children to the EIP and have a process in place for immediate referral of children suspected of having a developmental delay to the Early Intervention Official/Designee (EIO/D) if public health officers are designated to receive referrals. An increase in referrals of children at risk for delays is anticipated due in part to changes in Public Health Law (PHL) that became effective October 1, 2019 related to elevated venous blood lead levels.
- Disseminate public awareness materials and materials related to the EIP and Child Health Plus (including standardized referral forms to be used by primary referral sources, e.g., hospitals, pediatricians, day care providers, etc.) and promote local awareness of the EIP. Public awareness materials will be responsive to the cultural backgrounds of the families who reside in the municipality.
- Educate health care providers and primary referral sources about the importance of developmental screening, the availability of the EIP, and the requirement to refer children under the age of three years suspected of or at risk

for developmental disability to the EIO/D in the municipality that the child resides.

- Establish a working relationship with child protection agencies regarding the Child Abuse Prevention and Treatment Act (CAPTA) and address referral and screening requirements for children under three years of age who are subjects of substantiated cases of abuse and neglect.
- Make other reasonable efforts to identify and locate children within the municipality who are potentially eligible for the EIP.
- Promote a local process to engage children in the primary health care system, including:
 - Coordinating efforts to locate and recover at-risk children who have been disengaged from the primary health care system and reengage those children in primary care where they will receive periodic developmental surveillance and screening;
 - Establishing linkages to other county health/community programs that currently have the responsibility to track at-risk children, and ensure that these children are followed and receive periodic developmental surveillance through those programs; and,
 - Conducting follow-up activities with infants who have been referred by a hospital or have failed the initial newborn hearing screening and have not had a second infant hearing screening or diagnostic audiological evaluation as applicable.
- Ensure that any direct developmental screening conducted by the municipality is only conducted as a last resort, is not duplicative, and is provided only to at-risk children who have been identified as outside the primary health care system who cannot be reengaged in that system successfully. Documentation should identify these children as at risk of developing a disability or developmental delay. At-risk children are entitled to a multidisciplinary evaluation, municipalities cannot "prescreen" or "rescreen" them (e.g., complete a developmental screening such as the ASQ or other type of screening) to determine whether an evaluation should be completed or what type should be administered.
- Ensure that parents are fully informed of and understand their rights and entitlements under the EIP, including providing *Early Intervention Steps: A Parent's Basic Guide to the Early Intervention Program* to parents by mail or other suitable means within seven business days. This publication is available in 18 languages (including English) and is found at: <https://www.health.ny.gov/publications/0532/>. Communications must be in the family's dominant language unless it is clearly not feasible to do so.
- Ensure that the municipality appropriately designates in writing a qualified initial service coordinator (SC) (State-approved service providers) for each referred child, promptly notifies the parent in writing, and that the initial SC performs required activities, including:
 - Arranging a contact with the parent within five business days of receipt of referral from the EIO/D in a time, place and manner reasonably convenient for the parent;
 - Assisting the parent in identifying and applying for Medicaid or other public benefit programs (such as Child Health Plus or SSI) for which the family may be eligible;
 - Informing parents of potentially eligible children of their rights under the EIP;
 - Collecting information necessary to establish third-party coverage for eligible children, including Medicaid, Child Health Plus, and commercial insurance;

- Assisting parents in gaining access to a multidisciplinary evaluation for their child for the purpose of determining eligibility according to regulatory requirements, including providing parents with all options for evaluation and objectively reviewing with parents evaluation options to allow them to make an informed choice regarding the evaluator's specialties, availability, and location; and
 - In consultation with the evaluator and with parent consent, notify regional offices of the Office of People with Developmental Disabilities (OPWDD) if a child is found to be potentially eligible for services under that agency.
- Ensure that the parent and municipality receive the evaluation report in a timely manner prior to the initial Individualized Family Service Plan (IFSP) so the IFSP meeting can be held within 45 days of the child's referral.
 - Ensure families are fully informed about the availability of other supports and services (such as Health Homes, the comprehensive Home and Community Based Services (HCBS) waiver, the Children and Youth with Special Health Care Needs (CYSHCN) Program, etc.) that may be needed by the child and family.
 - Ensure that only eligible children receive individualized family service plan (IFSP) services.

Family-Centered Services

Municipalities will ensure that the development and implementation of the IFSP is timely, meets all regulatory requirements, and that parents are involved in the planning and evaluation of service delivery.

To accomplish this, municipalities will:

- Ensure that the EIO/D provides for adequate time before the meeting date so that the family and other participants will be able to attend.
- Ensure that the EIO/D sends timely written notice (two or more days before the meeting) of all IFSP meetings to required participants.
- Ensure that the EIO/D and all other required members participate in IFSP meetings, including six-month reviews. IFSP reviews can be conducted by an in-person meeting or other means agreed to by the parent that may include a telephone or video conference call or record review and written correspondence.
- Ensure that initial IFSPs are completed in a timely manner so that the IFSPs are in compliance with the 45-day timeline from date of referral and that it is documented in the child's record and in the EI data system (NYEIS or its successor system, the EI-Hub, as applicable) no later than 15 days after IFSP approval.
- Ensure that the development of IFSPs meets all regulatory requirements for every eligible child, including that IFSP meetings are held within the required time frames and that it is documented in the child's record and in the EI data system (NYEIS/EI-Hub) if the timeline is not met.

- Ensure that services discussed by the IFSP team and agreed upon between the parent and EIO/D are clearly stated, in writing, in IFSPs authorized by the municipality.
- Ensure that due process rights of mediation, impartial hearing, and system complaints, as outlined in *Early Intervention Steps: A Parent's Basic Guide to the Early Intervention Program*, are provided to the parent whenever there is a dispute regarding services.

The municipality is responsible for:

- Notifying the community dispute resolution center of the parent /guardian request:
 - Being an active participant in the resolution of a dispute, including being available for attendance during mediations and impartial hearings; and,
 - Cooperating with the system complaint process including the development of an acceptable corrective action plan which ensures continued compliance with statute and regulation.
- Ensure that parents understand that they may accept or decline any early intervention service without jeopardizing other early intervention services.
 - Secure written parental permission for the confidential exchange of information among parents, evaluators, service providers, service coordinators, and/or other individuals according to federal and State law and regulation.
 - Ensure that families are included in all aspects of the early intervention process and have the services needed to maximize their involvement.

Child and Family Outcomes

Municipalities will support and facilitate the collection of child and family outcomes and will actively participate in the State Systemic Improvement Plan (SSIP) to improve the delivery of family-centered early intervention services, and, as a result, improve family outcomes.

For child outcomes, municipalities will:

- Ensure that a sufficient number of children found eligible are enrolled in the Child Outcome Summary (COS) process. Children enrolled in the COS process should be younger than thirty months of age at the time of the first IFSP.
- Ensure that a COS form is completed at the child's first IFSP meeting and again at the time of the IFSP meeting closest to exiting the EIP.
- Ensure that the inclusion of the child in the COS process is indicated in the EI data system (on the child's home page in NYEIS or in the child/family outcomes COSF entry/exit area in the EI/EI Hub).
- Ensure that completed forms are sent in a timely manner to be included in the calculation of the Annual Performance Report (APR) indicator for child outcomes.

For family outcomes and the SSIP, municipalities will:

- Ensure that the contact information, including names of parents and caregivers and children, street address, towns, state and zip code, is kept current in the EIP data system, and that the language spoken by the family is indicated.
- Participate in the statewide quality improvement and will work with the Department, with Early Intervention Official/Manager/Designee representation and other stakeholders/team members as applicable to implement evidence-based strategies to increase family-centered service delivery through the early intervention program.
- Participate in Department-sponsored training as requested.

Service Delivery and Natural Environments

Municipalities will be responsible to ensure that services are individualized and delivered in accordance with the IFSP in environments appropriate to the unique needs of the child, and in a timely fashion.

To accomplish this, municipalities will:

- Assist the Department with provider outreach activities to ensure that all models of early intervention service delivery (home/community-based individual/collateral visits, office/facility-based individual/collateral visits, parent-child groups, group early intervention services, family/caregiver support groups) are continuously available.
- Make reasonable continuous efforts to ensure all service early intervention services [Section 69-4.1(2)] are available, as needed by eligible children and their families.
- Ensure that the projected dates for initiation of services specified in IFSPs, including any amendments, are as soon as possible but no later than 30 days after the parent provides written consent for the services. If the parent and other members of the IFSP team determine IFSP services must be appropriately initiated more than 30 days after the written parental consent is obtained, the services must be delivered no later than 30 days after the projected date of initiation of those services in the IFSP. Services specified in IFSPs must be provided continuously for the entire period that the IFSP is in effect.
- Ensure that all services use an individualized approach for both children and their families, including consideration and respect for cultural, ethnic, and other individual and family characteristics and lifestyles.
- Ensure that services are provided in home and community-based settings to the maximum extent appropriate for the needs of the eligible child and, if services are not provided in natural environments, an explanation is provided in the IFSP. Natural environments include settings that are natural or normal for the child's age peers who do not have disabilities, including the home, a relative's home when childcare is provided by the relative, a child care setting, or other community settings in which children without

disabilities participate.

- Ensure that procedures are in place to change a service provider and to provide appropriate notification to the parent and other providers delivering IFSP services. The procedure implemented does not require an IFSP amendment for a change in the provider of record and any process implemented must not delay service provision.

Delivery of Transportation and Respite Services

Municipalities will be responsible to ensure that respite and transportation services are individualized and that these services are delivered in accordance with the IFSP and delivered in a timely fashion.

To accomplish this, municipalities will:

- Ensure that procedures are in place to ensure that respite services are available and that respite services are authorized in accordance with established criteria in Early Intervention Program regulations at 10 NYCRR section 69-4.18 and guidance when requested by the family.
- Ensure that procedures are in place to ensure that transportation services are available when needed by the family, in accordance with applicable Early Intervention Program regulations at 10 NYCRR section 69-4.19 and guidance .

Transition

Municipalities will ensure that a transition plan is created for all children, with the family, and is included in the child's record/IFSP; that transition steps occur within the required timelines; that gaps in services do not occur for children who are potentially eligible for services under section 4410 of the Education Law; and that referrals to other appropriate early childhood programs are made.

To accomplish this, municipalities will:

- Ensure that children thought to be potentially eligible for services under Section 4410 of the Education Law can smoothly transition from the EIP to the Preschool Special Education Program.
- Ensure that a transition plan to other childhood and support services is developed and implemented for children determined not eligible by the Committee on Preschool Special Education (CPSE) and that parents are assisted to access such services.
- Ensure that children determined not eligible by the CPSE are discharged from the EIP by the day before their third birthday.

Administration

Municipalities will strive to continuously improve the administration of the EIP in an effort to enhance the quality of services and payment of services.

To accomplish this, municipalities will:

- Comply with all federal and State laws and regulations regarding submission of data.
- Ensure that proper procedures exist to resolve disputes or complaints and parents are made aware of their rights to due process procedures to resolve such disputes or complaints through mediation and an impartial hearing.
- Ensure that proper procedures exist to maximize third-party reimbursement for services by ensuring that children's social security numbers, Medicaid enrollment status, identification numbers, and/or information of any other insurance or health benefits plan is obtained upon initial referral or as early as possible, and maintained in a confidential manner and that data is timely entered into the Department's EI data system (NYEIS/EI-Hub).
- Provide notification to the Department regarding fiscal audits that will be or have been conducted by the municipality and ensure that the results of fiscal audits are immediately reported to the Department according to regulatory requirements.
- Report immediately to the Department known violation(s) of any applicable statute or regulation.
- Develop and implement activities to oversee and improve the administration of the program, including:
 - Ensuring that Local Early Intervention Coordinating Councils (LEICCs) meet EIP regulatory requirements regarding public notice, composition, activities, and reporting;
 - Involving the LEICC in assessing local service delivery capacity and identifying gaps in available qualified personnel and unmet service needs;
 - Developing mechanisms to support parents of young children with a developmental delay to participate in collaborative planning and policy development efforts with the municipality and state;
 - Participating in training to support local administration of the EIP (e.g., Family-Directed Assessment or other topics designated by the Department).
 - Ensuring that the municipality maintains early intervention records consistent with the early intervention records guidance document issued by the Department;
 - Ensuring that municipal policies are consistent with federal provisions of Part C of the Individuals with Disabilities Education Act (IDEA), including CFR Part 303 and State law and regulation;
 - Using the EIP data system provided by the Department to enter valid and reliable data into all required data fields in a timely fashion;
 - Identifying and reporting to the Department eligible foster or homeless children through the EI data system (NYEIS/EI-Hub);
 - Routinely transmitting data, including electronic data transfers, in a method and to a location defined by the Department as detailed in Attachment D: Payment and Reporting Schedule, Project Specific Reporting Requirements;

- Providing data and other information mandated by specific legislation or otherwise required by the Department for administrative purposes; and
 - Conducting ongoing data validation, including providing timely corrections when invalid data is identified by the Department.
- Implement proper procedures to protect the confidentiality of early intervention records and personally identifiable information of children and their families within the municipality and by service providers according to Health Insurance Portability and Accountability Act (HIPAA), Federal Family Educational Rights and Privacy Act (FERPA), EIP regulations, and applicable federal requirements.
- Participate in the monitoring and quality assurance activities of the municipality as a local administrator of the EIP and as a provider of EI Services, including:
 - Providing data, completing surveys, and conducting other activities that provide information about local program performance needed for federal or State monitoring and quality assurance initiatives and reports;
 - Providing access to documents and personnel for municipal monitoring, audits, including monitoring of the municipality as local administrator of the EIP and as a service provider, and investigations, or other reviews conducted by the State or its agents;
- Participate in monitoring and quality assurance activities to support the State's monitoring of EI Providers, including:
 - Providing access to documents and personnel to support State monitoring of EI providers (individual and agency providers) as required; and
 - Participating in State monitoring reviews of early intervention providers, as resources allow.
- Ensure that procedures are in place in accordance with EIP regulations for children in care, including:
 - Establishing agreements with local social services districts to identify children in need of a surrogate parent and ensuring prompt designation of a qualified surrogate parent; and
 - Ensuring that information about children in care, including the IFSP, is transmitted to the municipality of residence.
- Utilize the New York Early Intervention Data System (NYEIS/EI-Hub), in the manner prescribed by the Department and the Bureau of Early Intervention and consistent with terms of the applicable Data System Terms of Use/User Agreement .