

Evaluation Procedures for Eligibility Determination

A multidisciplinary evaluation is conducted to determine the child's eligibility for the Infant Toddler Program. It is also used to identify the services required to address developmental needs.

The multidisciplinary team, which considers the multidisciplinary evaluation of the child and subsequent recommendations, family information, parent recommendations, observational information, and professional judgment, determine whether the child meets the criteria for Developmental Delay or Established Condition.

The Service Coordinator facilitates evaluation procedures according to the diagnostic needs of the child.

The following categorical definitions are used to determine the child's eligibility for the Infant Toddler Program:

- Developmental Delay
- Established Condition

In addition to the categorical definitions of Developmental Delay and Established Condition used to determine a child's eligibility, Informed Clinical Opinion makes use of qualitative and quantitative information to assist in forming a determination of eligibility regarding difficult-to-measure aspects of current developmental status and the potential need for early intervention.

Service Coordinator Responsibilities

The Service Coordinator Responsibilities for facilitating evaluation procedures for a child are discussed in the following subsections.

Developmental Delay

The Service Coordinator performs the following when a child is suspected of having a Developmental Delay:

- Schedules evaluations at a time and place convenient for the family.
- Assures each evaluation is individualized and based on concerns documented on the referral.
- Assures there is review of pertinent records related to the child's current medical status and health history. Families are encouraged to assure their child meets compliance with current immunization schedules.
- Assures that evaluations are conducted by qualified personnel.
- Assures evaluations are conducted to determine the child's level of functioning, as needed, in each of the following developmental areas:
 - Cognitive
 - Physical (including hearing, vision, and motor)
 - Communication
 - Social/emotional
 - Adaptive development

- Assures a minimum of qualified personnel from two (2) different disciplines to conduct evaluations.

MDT evaluation may include one individual who is qualified in more than one discipline or profession.

- Assures that verification of measurable delay is obtained through a process that uses professional judgment and at least three (3) of the following procedures:
 - Informed Clinical Opinion to include observational assessment.
 - Standardized development test(s).
 - Developmental inventory.
 - Behavioral checklist.
 - Adaptive behavior measure.
 - Parent interview.

- Assures the evaluations are completed and the Individualized Family Service Plan (IFSP) is created within forty-five (45) days of referral.

The date of the referral counts as the first day of the 45 day timeline.

Established Condition

The Service Coordinator performs the following when a child with an established condition is referred to the Infant Toddler Program:

- Gathers information that certifies the Established Condition. The need for a developmental evaluation is determined at this time.

The Established Condition must be verified through the following:

- Documentation of the Established Condition by qualified personnel.
 - Use of professional judgment by qualified personnel.
 - Client history.
 - Health assessment.
 - Parent input.
- Using professional judgment, considers the following as a guideline to determine if a child with an Established Condition needs early intervention services, and if so, which services are needed:
 - Family situation,
 - Parent recommendations,
 - Range of data sources, and
 - Observation information.
 - Assures review of pertinent records related to the child's current medical status and health history.

Families are encouraged to assure their child meets compliance with current immunization schedules.

- Convenes and conducts the multidisciplinary team meeting to consider the assessment of the child's functional abilities in the five (5) developmental skill areas to determine appropriate recommendations for early intervention services.

Informed Clinical Opinion

Informed Clinical Opinion makes use of qualitative and quantitative information to assist in forming a determination of eligibility regarding difficult-to-measure aspects of current developmental status and the potential need for early intervention. Appropriate training, previous experience conducting evaluation, sensitivity to cultural needs, and the ability to elicit and include family perceptions are all important elements of Informed Clinical Opinion. In using Informed Clinical Opinion, the individual evaluator and the multidisciplinary team seek to answer the question, "What are the child's abilities and needs within their natural environment?"

Informed Clinical Opinion is an integral function for implementation of Part C. It is a safeguard against eligibility based solely on isolated information or test scores alone. It can be used to make recommendations as to initial placement and continuity of services under Part C and as a foundation for planning services to meet the child's and family's needs.

The use of Informed Clinical Opinion seeks to add information regarding a child's abilities and needs within their natural environment. To develop qualitative and quantitative information, any or all of the following may be used to augment psychometric and diagnostic data or when there are no standardized measures appropriate for a given age or developmental area:

- Clinical interviews with parents.
- Evaluation/observation of a child.
- Observation of parent-child interaction.
- Information from teachers or child care providers.
- Neurodevelopmental or other physical examinations.

The following are required to document Informed Clinical Opinion:

- Evaluation reports reflecting a child's development and the professional recommendation related to the need for early intervention services.
- Staffing note(s) indicating that the multidisciplinary team process was used to determine a child's eligibility for services based upon all sources of information available including a child's history, development; and a family's concerns, priorities, and resources.
- Multidisciplinary team staffing notes or continuing service reports listing the procedures undertaken to support the recommendation and a statement that eligibility was based on the Informed Clinical Opinion of the multidisciplinary team.

A team review must be completed every six months for children whose eligibility is based solely on Informed Clinical Opinion. This review should be completed at routine multidisciplinary team meetings.

Refer to ITP Eligibility Criteria for additional information regarding Developmental Delay, Established Condition, and Informed Clinical Opinion.

Refer to ITP Eligibility Checklist Summary to assist with eligibility determination and documentation.

This checklist should not be used in isolation when determining
Infant Toddler Program eligibility.