Glossary

The following definitions are included in the Infant Toddler Program Glossary:

**Ages and Stages Questionnaire (ASQ-3) and Ages and Stages Questionnaires: Social-Emotional (ASQ:SE)**

Questionnaires used through Developmental Milestones to monitor infant or toddler development. The questionnaires are sent at identified intervals to the parent/guardian to screen their child’s growth and development. ASQ-3 questionnaires are provided to parents of children between the ages of two through 36 months of age. Intervals are determined based on the needs of the child and are adjusted for prematurity. The ASQ:SE questionnaires are distributed for completion at 12 and 20 months of age, but can be requested more frequently.

**Anchor Assessments**

Approved list of comprehensive assessments used in Idaho to assist with completing the Outcomes Rating Scale in the Child Outcomes Summary Form. The following anchor assessments are approved for use in Idaho:

- Hawaii Early Learning Profile (HELP) Checklist.
- Ounce Scale.
- Work Sampling System ®.
- High/Scope Child Observation Record for Infants and Toddlers (COR).
- Brigance ® Diagnostic Inventory of Early Development – II.
- Bayley Scales of Infant and Toddler Development ®, 3rd edition (Bayley III ®) - Infant Toddler Program only.
- Developmental Assessment of Young Children (DAYC)
- Mullen Scales of Early Development in conjunction with a Social Emotional Assessment, at entry only.

**Assessment**

The ongoing procedures used by qualified personnel to identify the child’s unique strengths and needs and the early intervention services appropriate to meet those needs throughout the period of a child’s eligibility for the Infant Toddler Program. The assessment of the child must include the following:

- Review of the results of the child’s evaluation to determine initial and continuing eligibility in the Infant Toddler Program.
- Personal observations of the child.
• The identification of the child’s needs in each of the following areas of development: cognitive, physical (including vision and hearing), communication, social/ emotional, and adaptive skills.

“At Risk”

An individual under the age of three who would be at risk of experiencing a substantial developmental delay if early intervention services were not provided to that individual. Refer to the At-Risk Criteria for Monitoring document in the Child Find section.

• **Medical/Biological Risk** – Refers to children who do not have an identified disability or delay, but who have a history of prenatal, perinatal, or early developmental events; and because of biological circumstances, such as a very low birth weight, prematurity, or genetic pre-disposition have a higher than normal chance of developmental problems.

• **Environmental Risk** – Refers to children who regardless of biological risk are vulnerable because of environmental conditions. They and their families are identified here not to judge the family’s life situation, but because early identification and support services can positively affect the child’s development and family’s health.

**Case Manager (CM)**

A Department of Health and Welfare employee or Department contractor who assists the family in writing a plan of service and monitoring the services outlined in the plan. For children enrolled in the Infant Toddler Program, the service coordinator acts in the case manager role for Medicaid, and writes an Individualized Family Service Plan.

**Child Find (CF)**

Activities that are used to identify, locate, monitor and screen infants and toddlers with developmental and/or special health care needs. The Child Find system is coordinated with all major efforts of other state agencies. Several Child Find activities can be accessed by the community and include:

• Outreach and public awareness.

• Monitoring children “at risk” for a Developmental Delay or those with a medical condition which may negatively impact the child’s development.

• Developmental screenings.

• Referrals for multidisciplinary evaluations.

• Data collection and tracking.

**Child Find Developmental Milestones Coordinator (CFC)**

A qualified staff person designated to oversee the screening and developmental monitoring functions of Idaho Infant Toddler Child Find activities for all regions of the State of Idaho.

**Child Outcomes**

Child Outcomes must be measured to focus on the results of Idaho’s early service system. They are as follows:

• Children have positive social/ emotional skills (including social relationships).
  • Such as responding to others, expressing emotions, turn-taking, using appropriate social greetings, play skills or having friendships with same-age peers, etc.
• Children acquire and use knowledge and skills (including early language/communication).
  • Such as expressing thoughts and ideas, listening to and enjoying stories and books, or learning new ways to do things, etc.

• Children use appropriate behaviors to meet their needs.
  • Such as getting from place to place, using tools like forks or crayons, and feeding or dressing, etc.

**Collaboration**

Working together toward a common goal.

**Community-Based**

The Idaho Infant Toddler Program supports the provision of early intervention services in community settings so that children with disabilities or delays grow up in settings with their typical peers. Families are supported in choices for their children based on family values, lifestyles, and individual needs.

**DaSY**

An early childhood data system developed by the Center for Individuals with Disabilities Education Act (IDEA).

**Deductible**

That amount the insured must pay on covered benefits before the insurance company will pay during a benefit period.

**Department of Health and Welfare (DHW)**

Idaho Code, Title 16, Chapter 1, names the Department of Health and Welfare as the “lead agency” responsible for the coordination of the Infant Toddler Program and sets forth its authority and responsibilities.

**Developmental Delay**

A condition that meets eligibility criteria for early intervention services evidenced in children with or without an established diagnosis who by assessment measurements have fallen significantly behind developmental norms, two (2) standard deviations in one (1) of the five (5) functional areas, or one and a half (1 ½) standard deviations in two (2) or more of the five (5) functional areas. The five (5) functional areas include:

• Cognitive development
• Physical development (including vision and hearing)
• Communication
• Social/emotional development
• Adaptive skills

**Developmental Milestones**

The monitoring component of child find that helps parents better understand and meet the developmental, social-emotional, and health and education needs of their child.
Documentation

Includes evidence that actions of implementation procedures have been carried out. Unless otherwise indicated, acceptable methods of documentation in a child’s permanent record include physician orders and notes, copies of required forms and letters, staffing notes, evaluation narrative reports or protocols, nursing notes, or Continuing Service Reports (CSRs).

Early Childhood Coordinating Council (EC3)

Federal and the state law established an interagency coordinating council to assure a coordinated approach to the financing and delivery of services for early intervention programs. The Governor appoints members for a three-year term according to membership requirements. The Early Childhood Council (ECC) was renamed by Executive Order No. 2006-12, which combined with Idaho Code, sets forth their duties and responsibilities in advising and assisting the lead agency and other agencies serving young children.

Early Intervention Services (EIS)

- These are services designed to meet the developmental needs of each child and the needs of the family related to enhancing the child’s development.
- Are selected in collaboration with the parent.
- Are provided under public supervision by qualified personnel, in conformity with an IFSP and at no cost to the family unless subject to a sliding fee schedule.
- Meet State of Idaho standards.

Early Intervention Services Provider

An entity (whether public, private or nonprofit) or an individual that provides early intervention services under IDEA, Part C.

Early Periodic Screening Diagnosis and Treatment (EPSDT)

Early Periodic Screening Diagnosis and Treatment is a federally mandated, preventive health care program for eligible individuals under the age of 21.

Eligibility Criteria

The minimum level or standard to determine who will be served by the Infant Toddler Program. Infants and toddlers who have a Developmental Delay or an Established Condition that is highly likely to result in delay are eligible for early intervention services.

Emergency Contact

An identified person(s) to contact when a sudden, urgent usually unexpected occurrence or occasion that requires immediate action.

Empowerment

Interaction of professions with families in such a way that families maintain or acquire a sense of control over their family lives and attribute positive changes that result from early intervention to their own strengths, abilities, and actions.
Enabling

Creating opportunities and means for families to display their present abilities and competencies and to acquire new ones that are necessary to meet the needs of their children and themselves.

Established Condition

A condition that meets eligibility criteria and is evidenced in children with a diagnosed physical or mental condition, which has a high probability of resulting in Developmental Delay.

Evaluation

Procedures used by qualified personnel to determine a child’s initial and continuing eligibility in the Infant Toddler Program. Evaluations include determining the status of the child in each of the developmental areas listed in the definition of Developmental Delay.

Evidenced Based Practices (EBP)

The provision of therapy that is proven to be effective in treating the condition of the individual. To be considered evidenced based, three components must be present:

- Research based
- Expert driven
- Consumer informed

Family-Centered Care

Federal law requires states to deliver early intervention services through the IFSP. The IFSP enables families and professionals to work together as a team to reach goals for the eligible child. This requirement sets forth a family-centered philosophy for the delivery of early intervention services that supports, rather than supplants, the care giving role of the family, builds on strengths rather than weaknesses, respects families’ beliefs, values, and choices, and encourages and enables hopes and aspirations.

Family Concerns

Areas that family members identify as needs, issues, or challenges they want to address as part of the IFSP process.

Family Educational Rights and Privacy Act (FERPA)

A federal law that protects the privacy of student education records and gives parents certain rights with respect to their children’s education records. The law applies to all schools and other programs that receive funds under an applicable program of the U.S. Department of Education.

Family Priorities

A family’s desires and choices for how early intervention will be involved in family life.

Family Resources

The strengths, abilities, and formal/informal supports that can be mobilized to meet family concerns, needs, or Outcomes.
**Family Strengths**

Characteristics family members identify as contributing to the growth and development of the child and family. Among the areas of family life that many families identify as strengths are coping strategies, nurturing relationships, communication, religious or personal beliefs, family competence, and family/community interconnectedness.

**Federal Law**

The Individuals with Disabilities Education Act (IDEA) was originally enacted by Congress in 1975 (revised in December 2004), and is the nation's special education law which ensures children with disabilities have the opportunity to receive a free appropriate public education in the least restrictive environment. Two of the provisions related to early childhood education include:

IDEA Part B: education of preschool and school-aged children. Part B includes funding, evaluations for services, eligibility determinations, Individualized Education Programs (IEPs), educational placements, and procedural safeguards.

IDEA Part C: early intervention and other services for infants and toddlers with disabilities and their families (from birth to age 3). Part C and the Infants and Toddlers with Disabilities Program provides funds to assist Idaho in establishing a statewide, comprehensive system of early intervention services for infants and toddlers with disabilities and their families. The legislation specifies components that must be included in the statewide system. Throughout the document, this law will be referred to as IDEA Part C.

**211 Idaho CareLine (Idaho Infant Toddler Program’s Central Directory)**

A statewide, toll free telephone service established for providing information and referral for early intervention services. Callers are connected to appropriate resources serving their geographic area. Information is provided about prenatal care, health services, and child care for all children through the 211 Idaho CareLine. Written information is available upon request. The 211 Idaho CareLine is available to the general public and can be accessed by dialing 2-1-1 or 1-800-926-2588.

**Idaho Early Learning eGuidelines**

A resource designed to assist in guiding young children's development and learning. The guidelines provide high-quality, research-based early learning standards, and are designed to reflect the perspectives, values, and recommended practices of a diverse range of people, institutions, and communities throughout Idaho.

**Idaho Medicaid**

A public insurance program administered by the Department of Health and Welfare to help eligible persons improve their health, find new health problems early, and manage current health problems. Idaho Medicaid offers three different benefit plans to meet the varying needs of eligible persons. The plans are as follows:

- Medicaid Basic Plan
- Medicaid Enhanced Plan
- Medicare-Medicaid Coordinated Plans

**Idaho Sound Beginnings (ISB)**

Idaho Sound Beginnings is a public health screening program with federal support from the Centers for Disease Control and the Division of Maternal and Child Health. The program is located within the Infant Toddler Program in the Idaho Department of Health and Welfare.
Idaho Special Education Manual (ISEM)

The Idaho Special Education Manual is designed to help understand the provisions of the Individuals with Disabilities Education Act (IDEA) and meet the guidelines contained within the law for Part B. These policies and procedures must be approved by the State Department of Education (SDE) consistent with state and federal laws, rules, regulations, and legal requirements.

Individualized Education Program (IEP)

A written plan describing the goals set by a team of parents and educators for a child with special needs for the school year, as well as any special supports that are needed to help achieve those goals.

Individualized Family Service Plan (IFSP)

A written plan for providing early intervention services for each child with disabilities eligible for services and their families.

Individualized Family Service Plan (IFSP) Team

The IFSP team is made up of family members and professionals who meet together to identify strengths and needs, develop and carry out outcomes and strategies, and evaluate the effectiveness of the IFSP.

Infant Toddler Program Key Information and Data System (ITP KIDS)

Data system for the Idaho Infant Toddler Program.

Informed Clinical Opinion (ICO)

When professionals make use of qualitative and quantitative information to assist in reaching a determination of eligibility regarding difficult-to-measure aspects of current developmental status and the potential need for early intervention. Appropriate training, previous experience with evaluation, sensitivity to cultural needs, and the ability to elicit and include family perceptions are all important elements of Informed Clinical Opinion. Informed Clinical Opinion is used when determining a child’s eligibility for early intervention services.

Intake

Based on a referral to the Infant Toddler Program, intake is the process in which pertinent program information regarding a child and family is gathered. An Interim Service Coordinator is assigned to a child and family during the intake process. In addition, identified evaluations are completed during the intake process to determine whether a child meets the Infant Toddler eligibility criteria. If a child is eligible, an IFSP is completed for the child and family within forty-five (45) days from the initial referral.

Interagency

The Idaho Infant Toddler Program recognizes that no one agency can meet the diverse needs of children with disabilities and their families. The program is designed to be an “interagency” effort through cooperative planning and coordination of public and private agencies and service providers.

Interagency Agreements

Agreements between agencies that define the responsibilities of parties involved with the Infant Toddler Program by assigning operation and fiscal responsibilities for serving eligible children and their families and include dispute resolution procedures. Interagency agreements are negotiated at the state and regional levels.
**Interim Service Coordinator**

The staff member assigned at the agency where the initial referral for multidisciplinary evaluation is made. The Interim Service Coordinator assists the family to obtain the evaluations to determine eligibility and to develop and coordinate the initial Individualized Family Service Plan (IFSP).

**Life Time Cap**

The maximum amount that insurance is obligated to pay for all medical care during the life of the insured.

**Lead Agency**

The agency designated by the Idaho State Governor that receives funds under Part C to administer the State’s responsibilities under Part C of IDEA.

**Local Educational Agency (LEA)**

The local school district.

**Long Term Interruption in Service**

The Infant Toddler Program defines long term interruption as an interruption to early intervention services for greater than 90 days. This includes circumstances such as staff resignations, staff training, extended illness, maternity leave, extended family vacation or illness.

**Mediation**

A method whereby parents and service providers have an opportunity to discuss their disagreements (e.g., individual child complaints) in a non-adversarial, informal manner. It is a voluntary process that is conducted by a qualified impartial mediator and must be freely agreed to by both parties. Any party may request mediation, although parents/providers are not required to use it.

**Monitoring**

The periodic review of the developmental status of medically, environmentally, and developmentally “at risk” children. Typically this is done through use of an ASQ or ASQ-SE developmental questionnaire.

**Multidisciplinary Evaluation**

The involvement of two (2) or more appropriately qualified disciplines or professions in the provision of coordinated evaluation and assessment activities to determine a child’s initial and continuing eligibility.

**Multidisciplinary Team**

A team of individuals that determine service needs and recommendations for the IFSP. The team consists of the parent(s), two or more separate disciplines or professions that conduct evaluations, the Service Coordinator, and may include service providers.

**Native Language**

The language normally used by the child or parents of the child, or in the case of an individual who is deaf or hard of hearing, blind or visually impaired, or for an individual with no written language, means the mode of
communication that is normally used by the individual. Evaluations should be conducted in the native language of the child, if developmentally appropriate.

**Natural Environments (NE)**

Settings that are natural or normal for the child’s age peers who have no disability. To the maximum extent appropriate, early intervention services must be provided in natural environments, including the home and community settings in which children without disabilities participate. Services should be incorporated into the child’s and family’s typical daily routines and activities. The provision of early intervention services for any infant or toddler with a disability occurs in a setting other than a natural environment that is most appropriate, as determined by the parent and the IFSP team, only when early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment.

**Office of Special Education Programs (OSEP)**

The Office of Special Education Programs is dedicated to improving results for infants, toddlers, children and youth with disabilities ages birth through 21 by providing leadership and financial support to assist states and local districts. The Individuals with Disabilities Education Act (IDEA) authorizes formula grants to states, and discretionary grants to institutions of higher education and other non-profit organizations to support research, demonstrations, technical assistance and dissemination, technology and personnel development and parent-training and information centers.

**Outcomes**

Statements of changes a family wants to see for their child or themselves. Outcomes are identified and stated in the words of the family.

**Parent**

A “parent” is defined as follows: a biological or adoptive parent, foster parent, authorized guardian, individual acting as a parent for the child (including a grandparent or stepparent with whom the child lives), or a surrogate parent who has been appointed in accordance with federal law. The term does not include the state if the child is a ward of the State. (Authority: 20 U.S.C. 1477).

**Parent Consent**

Written approval (parent/guardian’s signature) made by a parent/guardian who is fully informed of all the information relevant to the activity for which consent is sought, in the parent’s native language or mode of communication. The parent/guardian understands consent is voluntary and may be revoked at any time and that they may refuse consent for some activities without jeopardizing other activities.

**Partnership**

The pooling of resources that can be used toward a joint interest.

**Personally Identifiable Information (PII)**

Information that can be used to distinguish a person’s identity. This information includes the name of the child, the child’s parent(s) or other family member, the address of the child, a personal identifier (such as the child’s or parents’ social security numbers), or a list of personal characteristics or other information that would make it possible to identify the child with reasonable certainty.
**Phenylketonuria (PKU)**

Phenylketonuria is an autosomal recessive genetic disorder characterized by a deficiency in the enzyme phenylalanine hydroxylase (PAH). This enzyme is necessary to metabolize the amino acid phenylalanine to the amino acid tyrosine. When PAH is deficient, phenylalanine accumulates and is converted into phenylpyruvate (also known as phenylketone), which is detected in the urine. PAH is found on chromosome number 12.

Left untreated, this condition can cause problems with brain development, leading to progressive mental retardation and seizures. However, PKU is one of the few genetic diseases that can be controlled by diet. A diet low in phenylalanine and high in tyrosine can be a very effective treatment. There is no cure. Damage done is irreversible so early detection is crucial.

**Prior Written Notice (PWN)**

Prior Written Notice is intended to inform parents/guardians of actions being considered or rejected for their child a “reasonable time” before the action is carried out. This assists them in their decision-making role about services for their child and their family. The Notice must include:

- the action proposed or refused,
- the reason(s) for the action, and
- a copy of the Idaho Infant Toddler Program Child and Family Safeguards brochure.

“Reasonable time” is defined as an appropriate amount of time so that families have an opportunity to consider a proposed action for their child and be involved in an informed, decision-making process.

**Procedural Safeguards**

Administrative activities that participating agencies and other early intervention service providers perform. These activities assure that parents/guardians of children receiving early intervention services are fully informed about service actions being proposed, refused, or carried out in relation to the needs of their child.

**Program Graduation**

Graduation from the Infant Toddler Program occurs when direct services are no longer indicated for a child following re-evaluation by qualified service provider(s) and the child’s team.

**Qualified Personnel**

A person who has met state approved or recognized certification, licensing, registration or other comparable requirements that apply to the area in which the person is providing early intervention services.

**Re-evaluation**

Documentation of a child’s present level of functioning through use of a valid and reliable instrument. The test must be administered by a qualified service provider and must address the child’s area of need that was previously evaluated.

**Regional Early Childhood Committees (RECC’s)**

Established by Idaho Code and renamed by Executive Order No. 2006-12 to Regional Early Childhood Council (RECC), these local interagency committees assist with planning and coordination of the Infant Toddler Program at a regional level. Membership appointments are made by each of the directors of the seven administrative regions of the Department of Health and Welfare.
Screenings

Assessments of a child’s development in the areas of physical development, learning, social/emotional, communication, and self help skills. Screenings should economically and accurately identify infants who require further evaluation. Screenings are conducted by nurses or other qualified personnel such as child developmental specialists or other therapists who have met the state personnel requirements to provide early intervention services.

Section 504

Section 504 of the Rehabilitation Act.

Service Coordination

Service coordination is an active and ongoing process for implementing the Individualized Family Service Plan that promotes and supports a family’s capacities and competence to identify, coordinate, monitor, and evaluate resources and services to meet its needs. It involves:

- Assisting families of eligible children in gaining access to early intervention services and other services in the IFSP;
- Coordinating the provision of early intervention and other services that the child needs or is being provided;
- Facilitating the timely delivery of available services;
- Continuously seeking the appropriate services and situations necessary to benefit the development of each child during the duration of the child’s eligibility.

Service Coordinator (SC)

The individual assigned to or selected by the family to carry out service coordination activities to assist or enable a child or family to receive the rights, procedural safeguards, and services authorized under Idaho’s State Plan for Early Intervention and to oversee the implementation of the IFSP in collaboration with the family.

Short Term Interruption in Service

The Infant Toddler Program defines short term interruption as an interruption to early intervention services for less than 90 days. This includes circumstances such as a child’s or therapist’s brief illness, weather conditions, family emergencies, and holidays.

State Law – Idaho Code – Title 16, Chapter 1

This law sets forth the policy for the state relating to early intervention services for infants and toddlers that comply with the federal law.

State Department of Education (SDE)

The State Department of Education is Idaho’s education system. It is comprised of four divisions: innovation and school choice, school support services, finance and information technology, and student achievement and school accountability.
State Education Agency (SEA)

The agency that receives funds under section 611 and 619 of the Individuals with Disabilities Act (IDEA), as amended, to administer the State’s responsibilities under Part B of the Act.

Strategies

Activities identified by the IFSP team (including parents) to achieve a stated Outcome.

Surrogate Parent

An individual assigned to protect the rights of the child whenever the parents cannot be identified, cannot be located, or the infant is a ward of the state.

Transitional Individualized Education Plan (IEP) Team

The group responsible for determining potential eligibility for Part B services, developing the IEP, and determining the placement of the child who will transition to the local school district for early childhood special education services. Members of the transitional IEP team must include:

- Parent of the child.
- District representative (e.g., building Principal, Special Education Director, District Superintendent, and others who meet criteria specified in the Special Education Manual).
- Special Education Teacher/provider.
- General Education Teacher.
- Individual who can interpret evaluation results and implications.
- Child, whenever appropriate.
- Part C Coordinator or representative. At the request of the parents, the Part C Coordinator or representative is invited to the IEP meeting.
- Other. At the discretion of the parent or the district, other individuals who have knowledge or special expertise regarding the child, including related service personnel, may be included as IEP team members. The determination of having knowledge and special expertise regarding the child shall be made by the parent or district person who invited the individual to be a member of the IEP team.

Transitions

Transitions are points of change or modification in services or personnel for children and families enrolled in the Infant Toddler Program. Periods of transition present an array of challenges and a sense of uncertainty to families, educators, and all service providers. Transition planning is an ongoing interagency process that provides options, information, support, and linkage to new situations and services.

Voluntary

Participation in the Infant Toddler Program is voluntary on the part of the parent/guardian, unless refusal to participate constitutes neglect or abuse as defined in the Child Protective Act, Idaho Code Sec. 16-1601, et seq. The parent/guardian may refuse to consent to some activities without risking the delivery of others.