City of New York Administration for Children's Services

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	Policy # 2011/04
Subject: Process for Referring Young	Children Involved with the Child Protective System
to the Earl	y Intervention Program
APPROVED BY: John B. Mattingly	PAGE: 1 of 6 (1 Attachment)
DATE: April 6, 2011	IMPLEMENTATION RESPONSIBILITY:
	Children's Services Divisions of Child Protection,
	Family Support Services and Family Permanency
	Services, and Provider Agency Staff

- **PURPOSE:** Young children who have experienced abuse or neglect face multiple challenges to their healthy development. Yet it is well established that early intervention for developmental problems and delays makes a real difference in a child's ability to progress socially, psychologically and physically. This policy provides guidelines to help us ensure that young children who are at risk for or experiencing delays are referred, assessed and engaged in needed services.
- **SCOPE:** These guidelines apply to all Children's Services staff in the Divisions of Child Protection (DCP), Family Support Services (FSS) and Family Permanency Services (FPS) as well as provider agency staff and should be utilized whenever a child aged birth to three:
 - 1. is the subject of an indicated report of abuse or neglect;
 - 2. shows signs of developmental delay; or
 - 3. is believed to be at risk of developmental delay due to social or biological factors.

This policy replaces the previously issued *Access to Early Intervention Program and Child Find Memorandum* dated 2/20/07, and is designed to meet standards articulated under the Child Abuse Prevention and Treatment Act (CAPTA) and the New York State Office of Children and Family Services Local Commissioners Memorandum.¹ This policy is effective immediately.

POLICY: Young children who have experienced abuse or neglect may have a heightened risk of developmental delays caused by maltreatment. A maltreated child's caregiver(s) may also be less likely to follow through with needed developmental services. For these reasons, Child Protective Services personnel are required to refer all children between birth and three years of age who have been the subject of an indicated abuse or neglect report to the Early Intervention Program.

In addition, child protective, preventive services, and foster care agency staff are expected to refer children between birth and three years of age to the Early Intervention Program whenever a child: 1) shows signs of developmental delay or disability; or 2) is believed to be at risk of developmental delay or disability due to social or biological factors.

¹ 04-OCFS-LCM-04 Referral of Young Children in Indicated CPS Cases to Early Intervention Services

To facilitate the referral process, the NYC Department of Health and Mental Hygiene (DOHMH) has established an Early Intervention Program referral hotline dedicated to handling calls from child welfare professionals in New York City. Hotline staff will speak with child protective specialists and foster care and preventive case planners, providing immediate guidance on how to complete the Early Intervention Program referral process.

WHAT IS THE EARLY INTERVENTION PROGRAM?

The Early Intervention Program provides services to infants and children with developmental delays and supports families in meeting their child's and their own needs. It also provides developmental monitoring to at-risk children. The program is administered by the DOHMH. Early Intervention services are voluntary on the part of the parent and the parent may choose whether or not to consent for evaluations and services for his or her child.

It is important to note that within NYC, the Early Intervention Program has two parts or units:

Early Intervention

Early Intervention provides services to children who have a developmental delay or disability as determined by a multidisciplinary evaluation. These services may include speech therapy, physical therapy, special instruction, and other interventions.

Developmental Monitoring

Developmental Monitoring assesses children who are "at-risk" for atypical development at regular intervals by using a standardized questionnaire, the "Ages and Stages Questionnaire" (ASQ), which measures whether or not a child has reached particular developmental milestones.

PROCEDURE: INTERVENTION PROGRAM HOTLINE

There is a new process for referring any child under the age of three who is the subject of an indicated case of abuse or neglect, or is believed to be experiencing a developmental delay, to the Early Intervention Program. Beginning immediately, all referrals to Early Intervention by an ACS, preventive or foster care agency employee <u>must</u> be called into the Early Intervention Program hotline **1-877- 885-5439 (KIDZ)**. This DOHMH hotline will be staffed weekdays between the hours of 9:00AM to 5:00 PM, and referrals must be made during those hours.

All referrals to the hotline will be handled by Developmental Monitoring Specialists. Based on the information provided during the telephone conversation, a Developmental Monitoring Specialist will determine if a child should be routed to either the Developmental Monitoring Unit for ongoing screening or to the Early Intervention Program for a multidisciplinary evaluation. Staff should have the following information on hand when calling the hotline to make a referral:

- Child's Name;
- Date of Birth;
- Child's Address;

- Reason for Referral (including any areas of concern);
- Race and Ethnicity of Child;
- Parent/ Guardian/ Foster Parent Name;
- Parent/ Guardian/ Foster Parent Telephone Number;
- Case Worker Name;
- Case Worker Telephone Number;
- Child's Gestational and Birth Information (with parental consent)²; and
- Citizen/Resident Information.

In addition, the ACS, preventive or foster care agency employee who contacts the hotline will be provided with information from the Developmental Monitoring Specialist for case follow up (the assigned Early Intervention office handling the case and the corresponding telephone number).

The assigned Child Protective Specialist and Supervisor are responsible for completing the referral to the hotline as soon as a case involving a child under the age of three is indicated. In addition, referrals should not be limited to indicated child protective cases. Any child under age three who is suspected to have a developmental delay or disability should be referred to the hotline.

Early Intervention Documentation in CONNECTIONS

If there is an open Family Services Stage that includes any child, under the age of three who was involved in an indicated CPS report, the ACS, preventive or foster care agency employee who makes the referral to the hotline will be required to enter the Early Intervention information into the Early Intervention tab of the Health Services Component of CNNX.

<u>The Early Intervention tab must reflect the date of a referral for Early Intervention</u> <u>screening</u>, assessment, or services, as appropriate³; or for an Advocates preventive services case the Early Intervention information must be entered in the offline progress notes. Additionally the ACS, preventive or foster care agency employee who makes the referral to the hotline will be required to enter the following in a CNNX progress note:

- The name of the Developmental Monitoring Specialist they spoke to at the hotline;
- The date that the call to the hotline was made; and
- Whether the child's case will be going to the Developmental Monitoring Unit for ongoing screening or to Early Intervention for a multidisciplinary evaluation.

For additional information on entering Early Intervention information in CNNX please refer to Appendix A.

² Birth information may include the mother's DOB, primary home language, child's doctor, hospital of birth, birth location, child's birth weight, gestational age, etc. This information is helpful to share with EI to ensure that the child is appropriately routed to either the Developmental Monitoring Unit for a screening or to the EI program for evaluations, particularly for children who may have been born premature.

³ As stated in CONNECTIONS Build 18.9 Procedures (CNNX Build 18 Addendum) Procedure 2008/03 dated 3/27/08.

WHAT HAPPENS WHEN A CHILD IS REFERRED TO EARLY INTERVENTION OR THE DEVELOPMENTAL MONITORING UNIT?

Early Intervention

When a child under the age of three is referred because s/he is suspected of having a developmental delay or disability and is found to meet the criteria for a multidisciplinary evaluation (based on a telephone conversation with the Developmental Monitoring Specialist), the case will be referred to the Early Intervention Program.

Once referred to the Early Intervention Program the child will be assigned an Initial Service Coordinator who will:

- Assist the parent or foster parent in identifying an evaluation provider;⁴
- Inform parent or foster parent of their rights and responsibilities;
- Coordinate the performance of evaluations and assessments;
- Facilitate and participate in the development, review, and evaluation of the Individualized Family Service Plan (IFSP);
- Assist parent or foster parent in identifying service providers;
- Coordinate and monitor the delivery of services;
- Inform the family about advocacy services; and
- Facilitate the development of a transition plan from Early Intervention to a preschool program, Head Start, daycare or any other setting deemed appropriate by the family.

Developmental Monitoring Unit

When a child under age three is referred because s/he is considered to be "at risk" for developmental delays as a result of environmental and/or biological factors and does **not** meet the criteria for a multidisciplinary evaluation (based on a telephone conversation with the Developmental Monitoring Specialist), the child will be referred to the Developmental Monitoring Unit.

Please note the child **<u>will not receive</u>** a multidisciplinary evaluation at this time. However, the child may be followed for possible developmental delays until three years of age and when appropriate, based on screening and/ or parental concern, be transferred to the Early Intervention Program for a multidisciplinary evaluation.

Once referred to the Developmental Monitoring Unit, the child will be followed by a Developmental Monitoring Specialist who will:

- Contact the parent or foster parent by phone to tell him/her about the program and to ask whether s/he would like to participate in developmental monitoring;
- Inform the parent or foster parent about the Developmental Monitoring Specialist's role in providing developmental monitoring;
- Send a Welcome Packet to the parent or foster parent which includes:

⁴ The EI regulations, governed by Article 25 of the New York State Public Health Law (10 N.Y.C.R.R. § 69), require that EI make every effort to protect the rights of parents to make decisions about a child's receipt of EI evaluations and services. In most cases, the child's birth parent should be signing consent for EI evaluations and services. However, there may be certain circumstances when a child's foster parent should be appointed as the surrogate parent to make decisions about the child's receipt of EI evaluations and services. The EI service coordinator should collaborate with the child's foster care agency caseworker to determine the status of the birth parent's rights and if the child's birth parent is available to participate in the EI process.

- Sample questions from the ASQ (a questionnaire that asks about the child's development and is completed by the parent or foster parent at a later date);
- A pamphlet that outlines some of the child's developmental milestones;
- "Request for Information" form (used to provide information on the child's doctor and consent to participate in Developmental Monitoring).
- Monitor the child's development using the parent or foster parent's responses to the ASQ; and
- Inform the parent or foster parent of test results and the need for continued Developmental Monitoring or Early Intervention multidisciplinary evaluation.

If the Developmental Monitoring program is NOT able to reach the parent or if the parent does not have a telephone, the Developmental Monitoring Specialist will:

- Send a letter informing the parent or foster parent that a referral was made and including a welcome package. The parent or foster parent is asked to contact the Developmental Monitoring Specialist to let them know if the parent or foster parent wants to participate in the developmental monitoring process;
- Send an ASQ for the parent or foster parent to fill out;
- If the parent or foster parent fails to respond to the ASQ, a letter will go out to the parent or foster parent letting him/her know that if the parent or foster parent does not contact the Developmental Monitoring Specialist by a certain date, the case will be closed. The letter also indicates that the parent or foster parent can request that the case be re-opened at a future date;
- If the parent or foster parent chooses to participate, an ASQ will be sent to the parent or foster parent at regular intervals (so that a child is "monitored" over time). To move forward, the parent or foster parent must complete the ASQ and return it (in the provided stamped envelope), where it gets scored;
- If the score falls within a certain range (that suggests atypical development), the Developmental Monitoring Specialist will speak to the parent or foster parent about transferring the child to Early Intervention for an evaluation; and
- If the score falls within a typical range, the parent or foster parent will receive a letter indicating the result and letting him/her know that another ASQ will be sent to the parent or foster parent in the future so that there can be ongoing monitoring.

When a child in foster care, is referred for monitoring (rather than a multidisciplinary evaluation) via the use of the ASQ, the agency caseworker should encourage and assist the foster parent with the completion and prompt return of this the ASQ. It is critical that the foster care agency caseworker or employee take necessary steps to assist the parent or foster parent in accurately completing and returning the ASQ to the Developmental Monitoring Specialist in a timely manner. This will ensure that the child is monitored on a regular basis through the Developmental Monitoring program and transferred to the Early Intervention Program for a multidisciplinary evaluation when appropriate.

MONITORING

ACS, preventive or foster care agency employees should become linked to and assist families in obtaining appropriate EI evaluations and services.⁵

⁵ As stated in Request for Proposals (RFP) released on May 20, 2009, pages 60 and 94.

For children in foster care, an educational plan for each child is required that is appropriate to their needs and goals, which includes a child's access to EI services. The foster agency caseworker or employee should keep the EI service coordinator appraised about the child's placement, location, health/medical status and permanency plan status.⁶ The information that the foster agency caseworker or employee provides and shares with Early Intervention may impact the delivery of EI service to the child. Furthermore, the foster agency caseworker or employee is expected to participate in the development of the child's IFSP, transition conference meetings and consider the child's EI services when coordinating permanency planning and other services.

There are instances in which a child who receives EI services moves from one foster home to another. Frequently, a change in foster homes/ location leads to a disruption of the child's EI services and in some cases, to the closing of an EI case. Therefore, it is critical the child's EI service coordinator be notified by the child's foster care agency caseworker or employee of changes in a child's address so that appropriate personnel can arrange for the transfer of services.

TRAINING

If an agency is interested in hosting a training session on the Early Intervention Program and Developmental Monitoring Unit, the Children's Services Education Unit is available and willing to provide it. The Education Unit can also assist on questions regarding parental involvement and obtaining EI records. For information about how to contact the Education Unit, please go to: <u>www.nyc.gov/html/acs/education</u>.

For additional information on this policy please ACS Family Support Services at 212-341-2977.

⁶ See generally N.Y.S. Dept. of Health's *Protocol for Children in Foster Care Who Participate in the Early Intervention Program*, <<u>www.ocfs.state.ny.us/main/sppd/health_services/manual/App%20D%20Early%20Intervention.pdf</u>> (last updated 2008-9).

The Early Intervention Program

The Early Intervention Program (EIP) is a voluntary program offering a variety of therapeutic and support services to eligible infants and toddlers and their families. Each county has an Early Intervention Officer/Designee (EIO/D) that oversees the provision of this in-depth, multidisciplinary assessment and delivery of the Individualized Family Service Plan (IFSP) process.

Referral, assessment and documentation procedures for EIP treatment differ from care that results from the routine developmental assessment that is a part of the child's initial Comprehensive Health Evaluation. There are additional mandates regarding referrals to EIP.

Referral to EIP is mandated for:

 all children under three years of age in an Indicated CPS report;

Referral to EIP is recommended for:

foster children under the age of three, particularly . those children whose developmental assessments indicate the possibility of a developmental disability or delay; and



Refer to Appendix D of the

Health Services Manual for a

detailed protocol on the Early

Intervention Program at:

www.ocfs.state.ny.us/main/sppd

/health_services/manual.asp

any child under the age of three in a family receiving child welfare services from an agency or local district. if there is a reason to believe the child may be developmentally delayed or in danger of becoming developmentally delayed.

The New York State Department of Health is the lead agency for the Early Intervention Program.

A worker will have two working days from the time you determined a referral is necessary to make a referral.

The Early Intervention tab provides for documenting the Early Intervention referral, the evaluation date and result, the service provider, and the type of services the child received, as applicable. All applicable fields on the Early Intervention tab should be completed for referred children. A completed Early Intervention evaluation should be entered in the Clinical Appointment tab as a developmental assessment.

Security for the Early Intervention Tab

Enhanced security associated with other modules in health does not apply to the Early Intervention tab. Instead, all workers with a role in the stege and health professionals with the MAINT HEALTH will be able to access the Early Intervention tab (view and modify). Additionally, health professionals with VIEW HEALTH Business Function and workers with an implied role in the case have view access to Early Intervention tab.

Early Intervention information can be recorded and modified for children until they reach their fourth birthday. After that date, Early Intervention information will be view-only.

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Step-by-Step: Accessing the Early Intervention Tab

- On the Health Services window, select a child from the Child List. The Early Intervention tab displays.
- 2 Click on the Early Intervention tab. The Early Invention tab displays. The following message displays when a child over the ege four is selected: "Early Intervention Information may not be entered for children over 4 years of ege." Click on the OK button.



Assigned Workload > FSS > Tasks >Health Services tab> Select a Child > Early Intervention. tab.

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The Early Intervention Tab

The Early Intervention tab is comprised of various fields, a History grid and buttons. This tab provides for recording Early Intervention information and viewing a child's Early Intervention records in both a summary and detail view with add, invalidate and print commands.

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This tab contains an Early Intervention Evaluation area with two date pickers where you may enter the selected child's Referral Date and Evaluation Date. The Early Intervention area also contains three radio buttons where you may select one of the following:

- Disability
- ٠ **Developmental Delay**
- None

The History area contains a grid that maintains a summary view of each Early Intervention Program that the child has attended. When you select a record in the History grid, the detailed Early Intervention Program information populates the other areas of the tab. The only columns that are editable in the History grid are End Date and the INV checkbox indicator. The History grid includes the following columns:

INV	Updated By	Date Updated	Contact Number	Contact Person	Program Name	End Date	Start Date
A checkmark in this field indicates the selected record was incorrectly recorded in CONNECTIONS. "Invalid" in CONNECTIONS typically means that the information was never correct—that it was recorded in error. Invalid entries will display at the bottom of the list and will not be included in any outputs.	This field is populated with name of the worker who last saved information.	This field is populated with date CONNECTIONS last saved information.	The telephone number for the provider of service.	A name of a contact person for the Early Intervention service provider.	The name of the program providing Early Intervention services.	The date on which the information is no longer applicable.	Date on which the information is first applicable.

The Program information area is where you will record information about the specific Early Intervention Program serving the child. It includes fields for the Program Name, Program Contact Person and Contact Number. You will enter the Start Date that the child entered the Early Intervention Program in the Program Information area.

The Services Types area is where you will select the types of Service that the child is receiving or it is anticipated that they will be receiving. This area contains a list of Service Types and two mutually exclusive checkboxes indicators next to each fisted service. The first checkbox is labeled "Receiving" and the second checkbox is labeled "Anticipated". The Service Types section includes the following:

- Assistive Technology
- Audiology Services . Parent Support Groups
- ٠ Physical Therapy
- ٠ Psychological Services

Family Training / Counseling

- Service Coordination
- Health Services ٠ ٠
- ۰ Home Visits

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• •	Nutritional Services	 Speech-language Pathology Therapy Social Work Services Transportation Services Vision Services 			
The following bu	ittons display at the bottom of th	e Early Intervention tab:			
Clear		n entry is recorded in the Program Information in button deletes information that is recorded			
Save	Clicking on this button saves that have been made.	work that has been recorded or modifications			
Cancel	This button only enables when you have unsaved changes on the window. Clicking on the Cancel button displays the following message:				
	"Changes have no	t been saved. Do you want to Cancel?"			
	Click on the Yes information.	button to close the window without saving the			
	 Click on the No b remain pending. 	utton to leave the window open; all changes			
Close	Clicking on this button closes the window and displays the last window from which you originated. If any unsaved changes exist on the window when you click on this button, the following measage displays:				
		Do you want to Exit? ta and/or narrative(s) will be lost.			
	Clicking on the Y closes the window	es button discards the unsaved changes and w.			
	-	o button closes the message without closing the remain pending.			

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Recording a New Early Intervention Record Early Intervention records may be added for children up to the age of three years. When you select a child from the child list who is over four years of age the following message is displayed:

"Early intervention Information may not be entered for children over 4 years of age."

An OK button will display and once selected, it will close the message box.

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Step-by-Step: Recording a New Early Intervention Record

- Click on the Early Intervention tab. The Early Intervention window displays.
- 2 Record the Referral Date in the Early Intervention Evaluation area. The Save button enables. You may save the record

at this point since all children referred will not receive El evaluations, and there may be a long wait between referral and evaluation. If additional information needs to be recorded proceed to Step 4.

- 3 Click on the Save button. The Referral Date is saved to the database.
- 4 Record the Evaluation Date in the Early Intervention Evaluation area.
- 5 In the Classified/Disability Type area click in the radio button to select the appropriate classification determined as a result of the evaluation.
- Record the date the child entered the Early Intervention Program in the Start Date field.

The Save button enables.

- 7 Record the name of the Early Intervention Program in the Program Name field.
- 8 Record the name of the Early Intervention Program Contact Person.
- 9 In the Contact Number field record the telephone number of the contact person.
- 10 Select one or more Service Types in the Service Types area indicating if the service is currently being received or is anticipated.
- 11 Click on the Save button to save.

A new Early Intervention Program record will be posted to the History grid and all previously recorded information in the Program Information and Service Types areas will be cleared.

The EI checkbox indicator on the Health Services window will be checked by the system.

Viewing an Early Intervention Record

You can view a child's Early Intervention records in both a summary and detail view by selecting a child in the Select Child grid from the Health Services window and selecting the Early Intervention tab. If information has been recorded in CONNECTIONS the History grid will contain a summary view of each Early Intervention Program that the child has attended.

The current record will appear at the top of the grid with the rest of the records in descending order. When you select a record in the History grid, the detailed Early

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Where am 1? Assigned Workload > FSS > Tasks > Health Services tab> Select a Child The date selected for the Referral Date or Evaluation

Date fields may not be earlier

than the child's DOB.

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Intervention Program information, Program Dates and Service Types populates the fields below. Invalid records display at the bottom of the grid.



Step-by-Step: Viewing an Early Intervention Record

- Click on the Early Intervention tab. The Early Intervention window displays.
- Select the desired record in the History grid. The Program Information and Services Types grids will be populated. The Clear button becomes enabled.
- 3 Click on the Clear button. The Program Information and Services Types grids will be cleared.

Modifying an Existing Early Intervention Record

Once recorded, Early Intervention records may be modified at any time.



Step-by-Step: Modifying an Existing Early Intervention Record

- Select the desired record in the History grid The Early Intervention Evaluation area, Program Information and Services Types grids will be populated. The Clear button becomes enabled.
- 2 Modify the information as needed. The Save button enables.
- 3 Click on the Save button to save your changes. The changes display in the Early Intervention Evaluation area.



Assigned Workload > FSS > Tasks >Health Services tab>

Select a Child > Early

Intervention tab.

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End Dating and invalidating an Existing Early Intervention Record

An Early Intervention record may be end dated or invalidated in the History grid. Pre-existing Early Intervention records for children over the age of four years may be end dated or invalidated as well. The End Date for an Early Intervention Program will be recorded in the End Date area of the History grid. CONNECTIONS will system populate the End-Date field after a record has been invalidated. An Early Intervention Program record should be invalidated if it was never correct and should not have been recorded. For example, if the wrong child was selected when recording the Early Intervention Program, that record was never correct.



Step-by-Step: End Dating an Existing Early Intervention Record

- Select the desired record in the History grid. The Program Information and Services Types grids will be populated.
- 2 Record the End Date in the End Date field in the History grid.

The Save button enables.

3 Click on the Save button to save your changes.



Step-by-Step: Invalidating an Existing Early Intervention Record

- Select the desired record in the History grid. The Program Information and Services Types grids will be populated.
- Click on the INV checkbox for the record in the History grid.
 The End Date field will populate with the date if a date was not praviously recorded.
- 3 Click on the Save button to save your changes.



Assigned Workload > FSS > Tasks >Health Services tab>

> Select a Child > Early Intervention, tab.

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