

## Infant & Toddler Connection of Virginia Procedural Safeguard Chart

Procedural Safeguards protect the rights and safeguards of families enrolled in Virginia's early intervention system. It is critical that families understand the early intervention process as well as the rights and safeguards associated with each step throughout this process. This flow chart is designed to be a reference document. It is not intended to replace information in the Infant & Toddler Connection of Virginia's Practice Manual as not all procedural safeguard forms are required for every family or required at the step in the process where they are listed. It is important that at each step in the early intervention process, Service Coordinators and Service Providers thoroughly read the Practice Manual for detailed information about the child and family rights and safeguards.

STEP IN THE EARLY INTERVENTION PROCESS	PROCEEDING TO NEXT STEP	UNABLE TO PROCEED TO NEXT STEP
<p><b>REFERRAL</b></p> <p>Referral received at the Single Point of Entry.</p> <p><b>Determine need for Surrogate Parent.</b> If needed, complete:</p> <ul style="list-style-type: none"> <li>• <i>Surrogate Parent Identification of Need</i> form</li> </ul>	<p><b>Contact Family</b></p>	<p><b>Unable to contact family after obtaining additional information from referral source</b></p> <ul style="list-style-type: none"> <li>• Letter mailed to family including: <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>Family Declines Intake Visit</b></p> <ul style="list-style-type: none"> <li>• <i>Declining Early Intervention Services</i> form</li> <li>• Copy and explanation of <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul>
<p><b>INTAKE</b></p> <p><b>Inform family about their rights, responsibilities and procedural safeguards emphasizing those applicable to eligibility determination.</b></p> <p><b>Complete the following forms:</b></p> <ul style="list-style-type: none"> <li>• <i>Notice and Consent to Determine Eligibility</i></li> <li>• Copy and explanation of <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i> AND ;</li> <li>• <i>Strengthening Partnerships: A Guide to Family Safeguards in the Infant &amp; Toddler Connection of Virginia Part C Early Intervention System.</i></li> </ul>	<p><b>Emphasize the rights and safeguards applicable to eligibility determination steps in the early intervention system. Point out where information related to storage, disclosure, accessing and correcting of personally identifiable information is located in "rights" booklet."</b></p> <p><b>If a developmental screening is not needed, only complete:</b></p> <ul style="list-style-type: none"> <li>• <i>Notice and Consent to Determine Eligibility</i></li> </ul> <p><b>If eligibility can be established by records (e.g., child has diagnosed condition or records document developmental delay or atypical development), complete:</b></p> <ul style="list-style-type: none"> <li>• <i>Notice and Consent for Assessment for Service Planning.</i></li> <li>• <i>Eligibility Determination Form</i></li> </ul>	<p><b>Family does not wish to proceed to Eligibility Determination</b></p> <ul style="list-style-type: none"> <li>• <i>Declining Early Intervention Services</i> form</li> <li>• Copy and explanation of <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> <li>• Review and explain complaint procedures</li> <li>• Review how to access early intervention services in the future</li> </ul>
<p><b>ELIGIBILITY DETERMINATION (ED)</b></p> <p><b>Assemble documentation and identify multidisciplinary team members to be used in the ED process.</b></p>	<p><b>Child found eligible and proceeds to Assessment for Service Planning</b></p>	<p><b>Child found eligible but family declines to proceed</b></p> <ul style="list-style-type: none"> <li>• <i>Declining Early Intervention Services</i> form</li> </ul>

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<p><b>Complete eligibility process</b>, including:</p> <ul style="list-style-type: none"> <li>• <i>Eligibility Determination</i> form</li> </ul> <p><b>Notify family of results of Eligibility Determination.</b></p> <ol style="list-style-type: none"> <li>Child found eligible.</li> <li>Child found eligible but family declines to proceed.</li> <li>Child found ineligible.</li> </ol> <p>(Optional) - Send <i>Confirmation of Scheduled Meetings/Activities</i> form as notification for ASP meeting.</p>	<ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• <i>Notice and Consent for Assessment for Service Planning</i></li> <li>• <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul>	<ul style="list-style-type: none"> <li>• Copy and explanation of <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>Child found ineligible</b></p> <ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• Copy and explanation of <i>Notice of Child and Family Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>When this situation occurs, remember to:</b></p> <ul style="list-style-type: none"> <li>○ Review and explain complaint procedures</li> <li>○ Medicaid/FAMIS Recipients only <ul style="list-style-type: none"> <li>▪ <i>DMAS Early Intervention Services – Notice of Action Letter</i></li> <li>▪ Explain right to appeal under Medicaid</li> </ul> </li> </ul>
<p><b>ASSESSMENT FOR SERVICE PLANNING (ASP)</b></p> <p>Document Assessment for Service Planning information in child's IFSP.</p> <p>Identify multidisciplinary team members for and ensure completion of assessment for service planning.</p>	<p><b>Plan and Schedule IFSP Meeting</b></p> <ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>Notify <u>all</u> participants in writing of the date, time and location of IFSP meeting using:</b></p> <ul style="list-style-type: none"> <li>• <i>Confirmation of IFSP Schedule</i> form (or other written means)</li> </ul>	<p><b>Family declines ASP Meeting and/or to proceed with IFSP development</b></p> <ul style="list-style-type: none"> <li>• <i>Declining Early Intervention Services</i> form</li> <li>• Copy and explanation of <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>Review and explain complaint procedures</b></p>
<p><b>IFSP DEVELOPMENT</b></p> <p>Conduct the IFSP meeting within the 45-calendar day timeline.</p> <p>Obtain <u>parental consent</u> (by signature on IFSP) prior to provision of early intervention supports and services outlined on IFSP.</p>	<p><b>Distribute copies of IFSP as appropriate</b> (family, physician, service provider, insurance, etc.) and with family consent to initiate service provision.</p>	<p><b>Family declines one or more OR declines all early intervention services listed on IFSP</b></p> <ul style="list-style-type: none"> <li>• <i>Declining Early Intervention Services</i> form</li> <li>• Copy and explanation of <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>When this situation occurs, remember to:</b></p> <ul style="list-style-type: none"> <li>○ Explain services that are not declined will be provided at the frequency, length and duration listed on the IFSP.</li> <li>○ Review and explain complaint procedures</li> <li>○ Explain how the family may, at a later date, through the IFSP review process accept a service previously declined</li> <li>○ If the family declines all early intervention services, review how to access EI services in the future</li> </ul> <p><b>Family request specific early intervention services, length, intensity, location and/or method that IFSP team does not agree is necessary to achieve the outcomes identified on the IFSP</b></p>

		<ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• Copy and explanation of <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>When this situation occurs, remember to:</b></p> <ul style="list-style-type: none"> <li>○ Review and explain complaint procedures</li> <li>○ Medicaid/FAMIS Recipients only <ul style="list-style-type: none"> <li>▪ <i>DMAS Early Intervention Services – Notice of Action Letter</i></li> <li>▪ Explain right to appeal under Medicaid</li> </ul> </li> </ul>
<p><b>IFSP IMPLEMENTATION AND REVIEW</b></p> <p>Early Intervention supports and services begin within 30 calendar days of the parent signing the IFSP.</p> <p>Facilitate the periodic review of the IFSP at least every 6 months or more frequently if conditions warrant or the family requests a review.</p> <p>Conduct an annual IFSP meeting within 365 days of the date of the initial or previous annual IFSP meeting to review the child's progress and write a new IFSP if the child continues to be eligible.</p> <p>Ensure each child and family is offered individualized transition supports and services.</p> <p>Parental Prior Notice form is completed at least 5 days prior to early intervention services being terminated.</p>	<p><b>Schedule an IFSP Review or Annual IFSP Meeting</b></p> <ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>Notify <u>all</u> participants in writing of the date, time and location of IFSP meeting using:</b></p> <ul style="list-style-type: none"> <li>• <i>Confirmation of IFSP Schedule</i> form</li> </ul> <p><b>Transition Planning Conference &amp; Meeting to Develop Transition Plan</b> – Obtain parent approval for transition planning (verbal approval must be documented in contact note).</p> <ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>Discharge from Early Intervention Services</b></p> <ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul>	<p><b>Family declines one or more OR declines all early intervention services listed on IFSP</b></p> <ul style="list-style-type: none"> <li>• <i>Declining Early Intervention Services</i> form</li> <li>• <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>When this situation occurs, remember to:</b></p> <ul style="list-style-type: none"> <li>○ Explain services that are not declined will be provided at the frequency, intensity and duration listed on the IFSP.</li> <li>○ Review and explain complaint procedures</li> <li>○ Explain how the family may, at a later date, through the IFSP review process accept a service previously declined</li> <li>○ If the family declines all early intervention services, review how to access EI services in the future</li> </ul> <p><b>Family request specific early intervention services, frequency, intensity, location and/or method that IFSP team does not agree is necessary to achieve the outcomes identified on the IFSP</b></p> <ul style="list-style-type: none"> <li>• <i>Parental Prior Notice</i> form</li> <li>• <i>Notice of Child and Family Rights and Safeguards including Facts about Family Cost Share</i></li> </ul> <p><b>When this situation occurs, remember to:</b></p> <ul style="list-style-type: none"> <li>○ Review and explain complaint procedures</li> <li>○ Medicaid/FAMIS Recipients only <ul style="list-style-type: none"> <li>▪ <i>DMAS Early Intervention Services – Notice of Action Letter</i></li> <li>▪ Explain right to appeal under Medicaid</li> </ul> </li> </ul>