1.A.7 Child Find

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II Purpose:

The purpose of this policy is to ensure that the Baby Watch Early Intervention Program has a comprehensive system that focuses on the early identification of infants and toddlers with developmental delays or disabilities, including a system that identifies appropriate services, professionals and resources for making timely referrals.

III Definition(s):

Utah Department of Health, Baby Watch Early Intervention Program (BWEIP):
The Utah Department of Health, Baby Watch Early Intervention Program (BWEIP) has been designated by the governor as the lead agency with the single line of responsibility to carry out all the provisions of the part C program under IDEIA.

Child Abuse Prevention and Treatment Act (CAPTA):
The Child Abuse Prevention and Treatment Act (hereafter, referred to as CAPTA) was developed in support of prevention, assessment, investigation, prosecution, and treatment activities for children. CAPTA mandates the National Clearinghouse on Child Abuse and Neglect Information.

Children’s Health Insurance Program (CHIP):
The Children’s Health Insurance Program (hereafter, referred to as CHIP) is a program administered by the United States Department of Health and Human Services that provides matching funds to states for health insurance to families with children. CHIP was designed to cover uninsured children in families with incomes that are modest, but too high to qualify for Medicaid.

Comprehensive System of Child Find:
The comprehensive system of child find identifies the major components of the BWEIP’s statewide comprehensive, coordinated, and multi-disciplinary interagency system by distinguishing between pre-referral activities (public awareness and child find), referral, and post-referral Individualized Family Service Plan (IFSP) activities, including:
- Screening;
- Evaluations;
- Assessments; and
- IFSP development, review, and implementation.

Developmental Disabilities Assistance and Bill of Rights Act (DD Act):
The Developmental Disabilities Assistance and Bill of Rights Act (hereafter referred to as the DD Act) ensures that individuals with developmental disabilities and their families have access to community-based services and supports to promote opportunities for independence, productivity, and inclusion.
Early Hearing Detection and Intervention (EHDI):
Early Hearing Detection and Intervention (hereafter, referred to as EHDI) programs are located in every state and are designed to identify infants with hearing loss by universal screening. EHDI allows identified infants to be enrolled in an EI program, designed to help facilitate the development of visual and/or spoken language and the cognitive skills necessary to succeed academically and socially.

Early Intervention (EI):
Early Intervention (EI) refers to programs or services which are selected in collaboration with parents, and are designed to meet the developmental needs of a child and the needs of the family to assist in the child’s development.

Early, Periodic, Screening, Diagnosis, and Treatment (EPSDT):
Early, Periodic, Screening, Diagnosis, and Treatment (hereafter, referred to as EPSDT) is a mandated program that is designed to find children with actual or potential health problems and to screen, diagnose, and treat the problems before they become permanent, lifelong disabilities. The program also offers preventive health services to Medicaid-eligible children less than twenty-one (21) years of age.

Family Violence Prevention and Services Act (FVPSA):
The Family Violence Prevention and Services Act (hereafter, referred to as FVPSA) serves as the federal mechanism for encouraging State, Tribal, and local support for implementing, maintaining, and expanding programs and projects to prevent family violence and increase public awareness of domestic violence issues.

Head Start Act:
The Head Start Act is the reauthorization of the Head Start programs. Head Start affords federal grants to local agencies, schools, and organization to provide early education and child development services to low-income families.

Individualized Family Service Plan (IFSP):
An Individualized Family Service Plan (IFSP) is a working document agreed upon by EI service providers and family members to address the special needs of eligible children from birth to three (3).

Individuals with Disabilities Education Improvement Act (IDEIA):
The Individuals with Disabilities Education Improvement Act is the federal law set forth by the United States that governs how states and public agencies provide early intervention special education and related services to children with disabilities.

Infant or Toddler with a Disability (Child):
A child under three (3) years of age who needs EI services because s/he is experiencing a developmental delay in one or more of the following areas:
- Cognitive development;
- Physical development, including vision and hearing;
- Communication development;
- Social or emotional development;
- Adaptive development; or
- Is diagnosed with a physical or mental condition that has a high probability of resulting in a developmental delay.

Interagency Coordinating Council (ICC):
The ICC is designed to advise and assist the Utah Baby Watch Early Intervention Program (BWEIP) in performing the responsibilities set out in part C of the IDEIA. As required by statute, the ICC is comprised of a body of people appointed by the governor representing families, EI providers, agencies and representatives from the community.
Part B:
Part B of IDEIA supports states in providing special education and related services to all children and youth with disabilities from ages three (3) to twenty-two (22).

Part C:
Part C of IDEIA supports states in providing EI services for infants and toddlers with disabilities from birth to age three (3) and their families.

Post-referral Procedures:
Post-referral procedures ensure compliance with the timeline requirements that include:
- Evaluations and assessments;
- Development, review, and implementation of Individual Family Service Plans; and
- Informing parents of toddlers enrolled in EI services about preschool programs under section 619 of part C of IDEIA within ninety (90) days prior to the toddler’s third (3rd) birthday.

Supplemental Security Income:
Supplemental Security Income (hereafter, referred to SSI) is a Federal program designed to help the aged, blind, and persons with disabilities; that have little or no income; and to provide financial assistance for those individuals to meet basic needs, food, clothing, and shelter.

IV Principles and Procedure:

A. Equitable Access Assurance:

BWEIP in Utah is the lead agency for the Federal Part C program and serves a culturally, and socioeconomically diverse population of infants and toddler with disabilities and their families. Utah is strongly committed to equal access and treatment for all infants and toddlers and their families who are referred to, and served in, the Part C program, as well as the early intervention service providers and the general public. The Utah BWEIP is advised by and works with its Interagency Coordinating Council (ICC) to identify and address any barriers. BWEIP ensures that Part C programs are part of a state-wide system of early intervention services, and provides an environment free from discrimination and harassment based upon gender, race, national origin, color, disability or age.

B. Child Find System:

1. BWEIP, with the advice and assistance of the State ICC, shall implement a comprehensive Child Find system that:
   a. Ensures all children in the State who are potentially eligible for services through BWEIP are:  
      1) Identified;  
      2) Located; and  
      3) Evaluated.
   b. Is consistent with part B of IDEIA through the Utah State Office of Education;
   c. Includes a system for making referrals that includes timelines (provides for referring a child as soon as possible, but in no case more than seven days, after the child has identified);
   d. Ensures rigorous standards for appropriately identifying children with disabilities and delays for services through BWEIP that will reduce the need for future service;
   e. Ensures the referral of specific at-risk infants and toddlers under the age of three who:
      1) Is the subject of a substantiated case of child abuse or neglect; or
      2) Is identified as directly affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure.
f. Provides for coordination with by all other major efforts to locate and identify children by other State agencies responsible for administering the various education, health, social service, and ethnic programs, including:
   1) Children with disabilities who are homeless;
   2) Maternal and Child Health programs;
   3) EPSDT under Title XIX of Social Security Administration;
   4) Programs under the DD Act;
   5) Head Start Act (including Early Head Start programs);
   6) SSI program under Title XVI of the Social Security Act;
   7) Child protection and child welfare programs, including programs administered by, and services provided through, the foster care agency and the State agency responsible for administering the CAPTA;
   8) The programs that provide services under the FVPSA;
   9) EHDI systems administered by the Centers for Disease Control;
   10) CHIP; and
   11) Indian infants and toddlers with disabilities residing on a reservation geographically located in the State and minority populations.

   g. All efforts are being taken to eliminate unnecessary duplication of tasks by BWEIP and EI programs by coordinating with other agencies involved in child find.

   h. Provides for participation with primary referral sources including:
      1) Hospitals, including prenatal and postnatal facilities;
      2) Physicians;
      3) Parents, including parents of infants and toddlers;
      4) Child care programs and early learning programs;
      5) LEAs and schools;
      6) Public health facilities;
      7) Other public health or social service agencies; and
      8) Other clinics and health care providers;

   i. Any person who has a concern about a child’s development may make a referral to BWEIP or their local EI program and must include:
      1) Child’s name;
      2) Child’s date of birth; and
      3) Parent’s contact information.

   Note: Although, a referral to part C for evaluation of the child’s need for EI services may be made; neither the evaluation, nor EI services can be provided without the parent’s consent.

C. Central Directory Procedures:

1. BWEIP shall develop and maintain a central directory of information which identifies:
   a. Services;
   b. Resources;
   c. Experts;
   d. Professionals; and
   e. Other groups (including parent support groups and advocate associations).

   Note: These sources are designed to provide assistance to eligible children and their families, and is developed in coordination with families and community groups, including the local EI programs.
2. Utah’s part C central directory shall include information regarding:
   a. Public and private EI services and resources;
   b. Parent support, training, and information centers (The Utah Parent Center);
   c. Professionals available within the state;
   d. Professionals and other resources that provide assistance to eligible children and their families; and
   d. Research projects being completed within the state.

3. The above information shall be provided in detail to allow:
   a. The general public the ability to determine the nature and scope of services provided from each of the resources listed in the directory.
   b. Families or caregivers the opportunity to contact (by telephone or correspondence) any of the resources provided in the directory.

4. The central directory shall be:
   a. Readily available to the general public;
   b. Updated annually; and
   c. Available in hard copy in each geographical area and accessible for persons with disabilities.

D. Public Awareness:

1. BWEIP shall maintain a broad, ongoing public awareness program using a variety of methods to inform the general public about the importance of early identification of infants and toddlers with disabilities and delays and the availability of EI services.

2. BWEIP will develop, prepare, and disseminate information and materials to all primary referral sources (especially hospitals and physicians) to be given to parents of infants and toddlers, especially parents with premature infants or infants with other physical risk factors associated with learning or developmental complications and adopt procedures for assisting the primary referral sources to disseminate the information about the availability of EI services to those parents of infants and toddlers with disabilities.

3. Methods for informing the public and locating children and families shall include:
   a. Maintaining a central directory that is updated on an annual basis.
   b. Maintaining a toll free access line that will link families and other concerned individuals to the local point of entry for EI programs.
   c. Participating with the ICC in the development and implementation of a plan for effective outreach, which may include:
      1) Public service announcements;
      2) Newspaper articles;
      3) Posters;
      4) Other community information processes; and
      5) Reporting the results of these efforts on an annual basis.
d. Maintaining a web site which provides pertinent information regarding the EI system.

e. Maintaining a system for supplying and distributing public awareness materials, especially through:
   1) The BWEIP point of entry;
   2) Local EI providers; and
   3) Community partners.

2. The public awareness program shall inform the public about:

   a. The EI system in the state;
   b. The central directory;
   c. The Child Find system;
   d. The purpose and scope of the EI system; and
   e. How to make a referral for a comprehensive multidisciplinary evaluation and other EI services or special education preschool services.

3. The public shall include, but is not limited to:
   a. Individuals with disabilities;
   b. Public agencies at the state and local level;
   c. Private and public providers;
   d. Professional associations;
   e. Parent groups;
   f. Advocacy associations;
   g. Child Protective Services;
   h. The homeless;
   i. Child care providers;
   j. Health care providers;
   k. Hospitals;
   l. The un-served and underserved populations of Utah;
   m. All minority populations throughout the state;
   n. Utah Schools for the Deaf and the Blind; and
   o. Non-profit organizations.

6. BWEIP shall work with local EI programs throughout the state; the ICC, rural areas, and other community members, as necessary in order to provide for the involvement and development of a coordinated program of public awareness.
7. BWEIP shall offer various avenues to provide information on available services to families across the state:
   a. BWEIP’s toll free number, 1-800-961-4226;
   b. BWEIP’s website, www.utahbabywatch.org;
   c. Utah Parent Center, www.utahparentcenter.org;
   d. Utah Clicks, https://utahclicks.org/uas/;
   e. United Way of Salt Lake, 2-1-1 (Utah), www.211.org;
   f. Utah Medical Home Portal, www.medicalhomeportal.org; and
   g. Through BWEIP public awareness activities.

V Authority:
34 CFR §303.300: General;
34 CFR §303.310: Post-referral timeline (45 days);
34 CFR §303,321: Evaluation of the child and assessment of the child and family;
34 CFR §303.322: Determination that a child is not eligible; and
34 CFR §303.340: Individualized family service plan – general;
34 CFR §303.342: Procedures for IFSP development, review, and evaluation;
34 CFR §303.343: IFSP Team meeting and periodic review;
34 CFR §303.344: Content of an IFSP;
34 CFR §303.345: Interim IFSPs – provision of services before evaluations and assessments are completed; and
34 CFR §303.346: Responsibility and accountability.

VI Related Directive(s):
None

VII Revision Log:
February 2012: New policy.
January 2013: Updated definitions. Added definitions. Revised minor wording. Added hyperlinks to regulations in Section V.
June 2013: Added language