Includes:
• Introduction to Early Intervention Services
• Parent’s Rights & Responsibilities
• IFSP Basics
• Preparing for Transition
• Family Resources

Revised March 2020
GUIDING PRINCIPLES OF NEVADA’S EARLY INTERVENTION SERVICES SYSTEM

Children are special and unique:

All children are unique, with their individual strengths and talents. The presence of a disability or special need is not the defining characteristic of a child.

Children grow, develop and learn in the context of relationships with their families and other caregivers in everyday routines, activities, and community settings.

Early Intervention enhances and supports community partners’ capacity to serve and include young children with disabilities and their families as all children have the right to belong, to be welcomed and to participate fully in their community.

Families are central to decision making:

Each family’s priorities, values, hopes and diversity are honored.

Families are partners and decision-makers in all aspects of services, as they are the experts about their child’s and family’s needs.

The early intervention role:

Service providers across all disciplines value family participation and collaboration.

Mutual trust, respect, honesty and open communication characterize the family-provider relationship, building on family strengths.

Services and supports:

Services, supports and resources need to be timely, flexible, individualized and responsive to the changing needs of children and their families.

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Early Intervention Program
Telephone

Early Intervention Service Coordinator

Telephone

Nevada’s Early Intervention Services System
Project ASSIST Toll-Free: 1-800-522-0066
or email ProjectAssist@dhhs.nv.gov
http://dhhs.nv.gov/Programs/IDEA/PartC/
Welcome to Nevada’s Early Intervention Services System

In Nevada, early intervention is a system of services and supports individually designed to help your family meet the specific needs of your child.

Children ages birth through two years will be determined eligible for early intervention services if they meet any of the criteria below through medical diagnosis, test scores from standard evaluation tools or by informed clinical opinion.

Developmental Delay

A. A child exhibits a minimum of fifty percent (50%) delay of child’s chronological age in any one of the areas listed below or a minimum of 25% delay of the child’s chronological age in any of the two areas listed below. The delay(s) must be identified in one or more of the following areas:

1. cognitive development (learning/understanding);
2. physical development, (including motor, vision and hearing);
3. communication development (speech/language);
4. social or emotional development; or
5. adaptive development (self-help).

B. Children will also be eligible who have a diagnosed physical or mental condition that has a high probability of resulting in developmental delays.

In Nevada, early intervention services are provided at no cost to families. With your permission, private health insurance may be used to assist with service costs. The early intervention program is responsible for any co-pay or deductible for those services.

You must consent to the initial screening and evaluation, receive a copy of your Parents’ Rights, which are included in this handbook, and have those rights explained to you in a way you can understand. Once your child is eligible for services and supports, your service coordinator and possibly other team members will meet with you to share information.

With your agreement the other team members will ask about your family’s routines and what people and places are important to you and your child. During this time, you and your service coordinator will determine what your concerns and priorities are for your child and family and what outcomes (or changes) you would like to work on.

Next, your service coordinator will schedule your Individualized Family Service Plan (IFSP) meeting. By Federal Law, this meeting must be held within 45 days from the date of referral for services and may not be held without a parent or legal guardian and service coordinator being present. The IFSP describes your child’s present levels of development, the outcomes for your child and family, and the services and supports necessary to meet them. This is your family’s unique plan for services.

Project ASSIST
Toll Free 1-800-522-0066
Email: ProjectAssist@dhhs.nv.gov
http://dhhs.nv.gov/Programs/IDEA/ProjectASSIST/
About Nevada’s Early Intervention Services Parent Handbook

Why is this handbook important?
This booklet will guide you and your family while you are a part of early intervention services. It will explain the services and supports available to help meet your child’s and family’s needs. It will also explain your rights as a family and give you information about other organizations that might be helpful for your family.

How do I use this handbook?
Early intervention services is probably new and unexpected for your family. Using your handbook will help you understand the new words and how to talk with the new people you will meet. It will explain the different steps while receiving early intervention services and supports.

You will need different information from this booklet at different times. Keep your handbook with the other important information about your child. If you decide to enroll in the early intervention services program, your service coordinator will review this handbook, and your parent rights and responsibilities, with you at all major decision making meetings.

If you have questions after reading your handbook, please ask! Your service coordinator and your early intervention program are eager to help your child and family.

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Referral
A child should be referred to Early Intervention Services as soon as there is a concern about developmental delay. Parents, Doctors or Pediatricians, Hospital and Public Health Nurses, WIC Clinics, Childcare Providers, and Family Members can all refer a child to an early intervention program.

Intake/Screening
This is required to happen within 45 days of referral.

Assign Service Coordinator, Evaluation/Assessment to Determine Eligibility
This is required to happen within 45 days of referral.

Individualized Family Service Plan (IFSP) Meeting (if eligible)
This is required to happen within 45 days of referral.

Delivery of Services
As soon as possible after the initial development of the IFSP

6 Month Review of IFSP
Need for Change in Services and Re-Evaluation/Assessment
Annual Review of IFSP

On-going Delivery of Services

Transition/Discharge
When your child turns three (3) OR is developing appropriately for his or her age and is no longer eligible for Early Intervention Services, your child will be discharged from the program through the IFSP process and NEIS will assist your family in this change of services or supports. Planning for your child to leave Early Intervention Services may begin by 2 years 3 months of age and no later than 2 years 9 months of age.

Steps in Early Intervention Services
This is an overview of the steps your child and family will take in an early intervention program. There are certain timelines when these steps should happen.
Service Coordination

When your child and family are referred for early intervention services, you will be assigned a service coordinator who will be your family’s primary point of contact for obtaining information and services. Your service coordinator will meet with your family to explain early intervention services and will also:

♥ Help you understand information you receive.

♥ Inform you of your rights in the early intervention services program and explain them to you.

♥ Help you get the evaluations and assessments that your child needs.

♥ Work as a part of the team, along with you, to help determine what services and supports your family needs.

♥ Coordinate and assist in the development and regular review of your child and family’s IFSP.

♥ Assist your family in finding other community resources. For example, determining if there is a public agency that could provide financial assistance, if needed, and assisting your family to complete the application and claim forms.

♥ Make sure that you receive the services and supports that are on your IFSP in a timely manner.

♥ Help you access support services, such as training opportunities, parent groups, and advocacy services.

♥ Help you resolve concerns if they arise.

♥ Assist in the development and implementation of a Transition Plan for services for your child when early intervention ends.

♥ Refer you to other services such as child care, health, or family support services, and help you become your child’s best advocate.

♥ Coordinate the provision of early intervention and other services that your child needs or is already receiving through other agencies.

Refer to Individuals with Disabilities Education Improvement Act of 2004 (IDEA), Public Law 108-446 (P.L. 108-446) and 34 CFR parts 300 and 303 (303.34)

http://dhhs.nv.gov/Programs/IDEA/Early_Intervention_Programs/
Your Family’s Participation in Early Intervention

Early intervention is a voluntary program. The early intervention staff will assist you in designing and carrying out the strategies that will meet your child’s and family’s unique needs.

In order for your family to receive maximum benefit from early intervention services, it is critical for you to fully participate in all aspects of the services and supports. You are a key decision-maker related to the needs of your child and family, and in choosing the services and supports that will help to make a difference in your lives. To optimize your child’s development you need to be actively involved in the implementation of the activities designed with your family.

The more involved your family becomes with early intervention, the better the outcomes for your child. Early intervention is a system of supports and services designed to assist families in helping their child. All intervention should be designed to enhance your family’s lives within your daily routines. The success of these interventions is dependent upon family participation.

If for any reason, you do not choose to participate in all or some early intervention services, please notify your service coordinator that you wish to discontinue services. If you are unable to participate for a period of time due to life circumstances, please notify your service coordinator. If your family is planning on moving, your service coordinator can assist you in locating another program in your new community, even if in another state. If you discontinue your participation in the program through missed appointments or lack of communication over an extended period of time, the program may discharge your child from services as a voluntary withdrawal by family.

Early Intervention Services Programs operate year round. Due to illness or vacations, service coordinators and therapists may cancel or reschedule appointments with their families. These will be made up to meet the frequency of services for your child.

Early intervention services are designed to support families whose child is experiencing developmental delays for any reason. If during the course of intervention your child reaches age appropriate developmental milestones, this is a cause for celebration!

If you and your service coordinator agree your child is developmentally at age level, your child will be exited from early intervention services through the IFSP process. Your service coordinator will help develop a transition plan to ensure that you are informed of other community resources as appropriate.
Parent Rights and Responsibilities

Introduction to Parent Rights

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What if my early intervention program and I cannot agree?

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Information regarding appointment of Surrogate Parents.

For information about organizations, programs or agencies that provide services and supports for children and young adults up to 21 years with disabilities, and their families.

Project ASSIST Toll Free at 1-800-522-0066 or ProjectAssist@dhhs.nv.gov

Website: http://dhhs.nv.gov/Programs/IDEA/ProjectASSIST/
Introduction to Parent Rights

Nevada’s System of Early Intervention Services is set up to encourage and increase family participation and ensure parental consent throughout the process. From referral through service delivery, early intervention programs strive to be family-centered.

This section of the handbook has been designed to inform families of their rights under the federal law known as the Individuals with Disabilities Education Improvement Act, Final Regulations effective on October 28, 2011, (IDEA) and Public Law 108-446 (P.L. 108-446). The law provides for early intervention services for eligible children beginning at birth through age two. This document is an official notice of your rights under this law. Participation in the IDEA early intervention system for infants and toddlers is completely voluntary.

You have taken the first step toward helping your child by contacting an early intervention program. At the time of referral, a service coordinator will be assigned to your family to guide you through the process. The service coordinator will work closely with you to help you understand your rights and to suggest ways you and other family members can work with professionals to meet the developmental needs of your child. A team that includes you and at least two early intervention professionals will use evaluation information to decide if your child is eligible for early intervention services. Other people may be included on the team, if needed.

Once your child is eligible, the IFSP team will identify the appropriate services for your child on an Individualized Family Service Plan (IFSP). The purpose of the IFSP process is to develop outcomes to support your family in meeting the needs of your child. The IFSP is a legal document that outlines the activities and supports to be used to achieve your child’s and family’s goals. The IDEA law states that, “the IFSP will identify supports and services necessary to enhance the family’s capacity to meet the developmental needs of the child”  
(P.L. 108-446, Section 636 (a) (3) (d).)

The IFSP lists the specific services needed to meet the unique needs of your child and includes frequency, intensity, and method of delivery. These services may include:

- Assistive Technology Services
- Audiology Services
- Family Training, Counseling, and Home Visits
- Health Services in order to participate in early intervention
- Medical Services only for diagnostic or evaluation purposes
- Occupational Therapy
- Physical Therapy
- Psychological Services
- Service Coordination
- Sign Language and Cued Language Services
- Social Work Services
- Special Instruction
- Speech-Language Pathology
- Transportation in order to access early intervention services
- Vision Services

For More Information:

If you have ANY questions or concerns, please talk with your service coordinator. The program manager of the early intervention program is also available to assist you. If you have further questions, you may contact the IDEA, Part C Office at:

Toll Free 1-800-522-0066
or Email:
ProjectAssist@dhhs.nv.gov
Parent Rights

What are my rights?
Rights protect your family and child. All families enrolled in early intervention programs in Nevada have the same rights. Your rights within the early intervention process begin as soon as you are referred to a program and continue as long as you and your child participate in the early intervention program. The IDEA, Part C law gives families’ rights. You can find more information about these laws at: http://ectacenter.org/families.asp

Your rights are listed below:

The Right to Have Your Child Evaluated to Determine Eligibility for Services
When your child is referred to an early intervention program, you have the right to an evaluation to determine eligibility. Sometimes programs screen children first. This is to determine if an evaluation is needed. If you disagree with the screening results, you can still ask for and receive an evaluation.

Refer to P.L. 108-446, Section 639 (a) (1) and 34 CFR 303.320

The Right to Timely, Comprehensive Evaluation
Your child and family must have an evaluation that considers all areas of your child’s development and includes a voluntary family needs assessment. If your child is eligible, the team will assist in the development of an Individualized Family Service Plan (IFSP) no later than 45 days from your referral date.

Refer to P.L. 108-446 and 34 CFR 303.342

The Right to Give Your Consent or Permission and the Right to Refuse Services
Your early intervention program must have your permission in writing before any evaluations, assessments, or services are provided. You can decide not to give permission for any specific service and you may refuse a service at any time. You can also refuse one service and accept another. An early intervention program must also have your permission before sharing information about you or your child with others. Consent means that you have been fully informed about the activity for which consent is being sought and that you understand and agree.

If you do not give consent for recommended services, the early intervention program is still able to give you information about the results of the evaluation and assessment(s). They may also provide literature, and/or encourage you to talk with other parents about the value of early intervention for your child. The program will attempt to ensure that you understand your child will not be able to receive services unless consent is given.

Refer to P.L. 108-446, Section 639 (a) (3) and 34 CFR 303.7

Payment for Your Child’s Early Intervention Services
Nevada’s Early Intervention Services System is the payor of last resort for early intervention services. Providers within this system are responsible for those services designated on your child’s IFSP. To maximize services, funding is sought from a variety of sources including Medicaid and private insurance providers.

Early Intervention Programs in the State of Nevada must provide written notice to you of financial requirements that may impact the use of your private insurance and/or public insurance /Medicaid.

1. Your family may not be charged for service coordination, child find referral services, evaluations and assessments, Individualized Family Service Plan (IFSP) development, and implementation of procedural safeguards (Family Rights).
2. Early intervention services authorized on the IFSP will be provided at no cost to you, including any co-payments or deductibles related to these services. You may be required to pay an insurance premium, if applicable per your insurance plan. Using your insurance for early intervention services may also impact your lifetime cap.

3. You may not be required to sign up for or enroll in public benefits or insurance programs as a condition of receiving early intervention services.

4. We must have written parental consent to access public or private insurance benefits if (a) your child is not already enrolled in Medicaid but enrolls after referral to early intervention services, or (b) if your child is already enrolled upon referral to early intervention services and that use would:
   - Decrease available lifetime coverage or any other insured benefit for the child or parent, or
   - Result in the child’s parents paying for services that would otherwise be covered by public benefits or insurance, or
   - Result in any increase in premiums or cancellation of public benefits or insurance for the child or parent, or
   - Risk the loss of eligibility for the child or the child’s parents for home and community-based waivers based on total health-related cost.

5. You have the right to withdraw your consent to bill private insurance at any time.

CONSENT FOR USE OF PRIVATE INSURANCE
1. Any individual or agency providing early intervention service(s) required in your IFSP must have your written parental consent to use the family private insurance to pay for your child’s early intervention services. If you do not provide consent for the use of insurance, you and/or your child will still receive those early intervention services on the IFSP for which you have provided consent.

2. Your written consent is required before using the insurance when:
   a. The early intervention service provider seeks to use the family's private insurance or benefits to pay for the initial provision of any early intervention service in the IFSP; and again if
   b. There is an increase (in frequency, length, duration, or intensity) in the provision of services in the child's IFSP.

3. You must be provided a written copy of this document before providing or declining your consent for the use of private insurance to pay for an early intervention service.

CONSENT TO RELEASE OF PERSONALLY IDENTIFIABLE INFORMATION FOR BILLING MEDICAID:

Ask questions and discuss this decision with your service coordinator, employer and family to achieve full understanding before making your decision.

If your child is not already signed up or enrolled in Medicaid, then he/she is not required to do so in order to receive early intervention services.

1. If your child is eligible for Medicaid coverage for some early intervention services and is also covered by private insurance, Medicaid requires the use of your private insurance as primary. Your consent for billing for third-
party payment was included in the application for benefits as a condition for eligibility for Medicaid in Nevada.

2. If you have provided written consent for the early intervention service provider to bill insurance and the insurance company sends the Explanation of Benefits and payment to you rather than directly to the provider, any payment you receive must be turned over to the early intervention service provider.

Refer to 34 CFR 303.520(a)(3) and (b) (1)(i)

**The Right to Participate in Your Child’s Program**

You are an important part of planning services for your child. No one knows your child better than you and your family! You are encouraged to speak up about your family’s and child’s needs. You can also review the evaluation and assessment of your child and get information about how to help your child develop. You must agree to services for your child and sign the plan before these services begin.

Your family’s participation in the early intervention program is voluntary. It is your choice as to how much you participate in the program.

Refer to P.L. 108-446, Section 639 (a) (2) and 34 CFR 303.13 (a)

**The Right to an Individualized Family Service Plan within 45 days of Referral**

If your child is eligible for services, your family must be given the opportunity to participate in writing the Individual Family Service Plan (IFSP) within 45 days of your child’s referral. The IFSP will include early intervention services and supports based on your child’s and family’s needs.

Written in the IFSP are the projected dates for initiation of services as soon as possible after the IFSP meeting.

A team, including you and professional staff with different backgrounds, will meet to develop this plan. This IFSP team can also include family members, friends, or advocates that you choose to help you decide what is best for your family and child. This plan is reviewed every six months or more frequently if needed. You can request an IFSP review at any time.

Refer to P.L. 108-446 and 34 CFR 303.342(a)

**The Right to Written Prior Notice So You Can Participate**

You will meet with early intervention staff many times for different reasons during your enrollment in early intervention. All meetings must be held at a time and place that is convenient for you. Each time you meet to make major decisions you must be given a notice in writing and orally in a language you understand. You must receive the notice in a reasonable amount of time before the meeting so you may plan for it. For example, you might like to arrange to have a family member or friend at the meeting, or think more about the decisions you will be making.

Each notice will include the following information about the meeting:

- Time and place of the meeting
- The action that is being proposed or refused and the reason for taking the action
- Information about your procedural safeguards
- Information on how to file a complaint if you disagree
You also have the right to written prior notice before a public agency or service provider proposes, or refuses, to initiate or change the identification, evaluation, or placement of your child, or the provision of appropriate early intervention services.

Refer to P.L. 108-446, Section 636 (a) (1) and 34 CFR 303.421.

**The Right to Receive Services in Natural Environments**

Your child has the right to receive early intervention services in places that are familiar and comfortable, such as your home or a grandparent's home, a daycare setting, or other location in your community where typically developing children would be. If this is not possible, the early intervention program must justify, in writing, why an alternate location is necessary to help your child achieve the outcome. These reasons must be included in your IFSP.

Refer to P.L. 108-446, Section 636 (d) (5) and 34 CFR 303.126

**The Right to Confidentiality**

All information on your child and family is confidential. Sometimes, your early intervention program may need to request or share information about your child to determine eligibility or to receive services. Your early intervention program must get your permission to request information from or share information with other agencies, service providers, or professionals. It is up to you if you want to share this information. You can ask for a written explanation about how private information is protected at your early intervention program.

Your early intervention program must keep a record of who looks at your files, the date of review, and the purpose for which the person is authorized to view the records. The early intervention program must also give you a list of where the files are kept and what information is in them, if you ask. Files must be kept in a secure location and only people who need to view the records will have access.

Your child’s records will be kept as long as required by State and Federal laws. At any time thereafter, the program will destroy the records. You can also ask the program to remove information about your family’s identity, such as names, social security numbers, and addresses. However, the early intervention program must keep a permanent record of your child’s name, address, and telephone number.

Refer to P.L. 108-446, Section 639 (a) (2) and 34 CFR 303.401 (c) (2) and/or Part 99 of Title 34 of the Code of Federal Regulations Family Educational Rights and Privacy Act (FERPA)

**The Right to Review Records**

You have the right to review your child’s records. Early Intervention programs give you the opportunity to inspect and review any early intervention records relating to your child which are collected, maintained, or used. Your early intervention program must comply with a request without unnecessary delay and before any meeting regarding an IFSP or hearing related to identification, evaluation, placement, or provision of appropriate early intervention services. Within 10 days of your request your local early intervention program must comply either with copies of your child’s records or access to the records. The law states that you can be charged for these copies of early intervention records if
the fee does not effectively prevent you from exercising your right to inspect and review those records.

Refer to 34 CFR 303.405 through 300.409

According to Nevada’s Aging and Disability Services Division policy, the local early intervention program may not charge a fee to search for or retrieve information that you have requested. You also have the right to have someone who is representing you inspect and review the early intervention records.

Refer to 34 CFR 300.560 through 300.576 Sections 303.405

If you think your child’s records are wrong, you can ask your early intervention program to correct the information. If they disagree, you can place a written statement in the record explaining your disagreement.

Refer to P.L. 108-446, Section 639 (a) (4) and 34 CFR 300.562, 303.409 and/or Part 99 of Title 34 of the Code of Federal Regulations Family Educational Rights and Privacy Act (FERPA)

The Right to Disagree

At all IFSP meetings your early intervention program must review your rights with you.

Talk to your local early intervention program at any time if you have concerns or questions. Your early intervention program will ask you to sign a form acknowledging you have been informed of and received a copy of your rights.

For information you can also write or call:

IDEA Part C Office
1000 E. William Street, Suite 105
Carson City, NV 89701
ATTN: IDEA Part C Coordinator

Project Assist 1-800-522-0066
Email: ProjectAssist@dhhs.nv.gov
http://dhhs.nv.gov/Programs/IDEA/PartC/

Refer to P.L. 108-446, Section 639 (a) (7), 636 (e) and 34 CFR 300.612, 303.342

What if my early intervention program and I cannot agree?

Sometimes, parents and early intervention staff disagree. If there is a disagreement, try talking to the person with whom you disagree. If the problem is not resolved, talk to the program manager of your local early intervention program. If you are not satisfied after talking to your program manager, you can call the IDEA Part C Office at (775) 687-0587.

If you feel any of your rights or regulations are not being honored or followed by your early intervention program, you can file a complaint, request mediation, and/or request a due process hearing. Your child will continue to receive the services in the IFSP during the mediation or hearing process. You also have the right to be notified of free and inexpensive legal services and other services in your area.

The IDEA Part C Office staff may be able to work with you and your local program to resolve your concerns informally. Or, you can send a formal letter of complaint directly to the Department of Health and Human Services, IDEA Part C Office. (refer to sample letter section) You have the right to request Due Process, Mediation, or submit a letter of Complaint all at the same time. If you have already requested Due Process, a Complaint may not be filed on the same issues.

Refer to P.L. 108-446, Section 639 (a) (3) and 34 CFR 303.430 through 303.434
What happens during a complaint, mediation, or hearing process?

How to File a Complaint

Individual Child Complaint

The local early intervention program is eager to discuss any concerns you may have. You are encouraged to talk with your service coordinator, the program supervisor, or the program manager if you disagree with the local program on the identification, evaluation, placement of your child, or provisions of appropriate early intervention services to your child or family. If you feel that the early intervention program has ignored a federal law in regards to those listed in this paragraph, you can write a letter of complaint to the IDEA Part C Coordinator (see sample letters section starting on page 13). You have the right to a timely resolution of your concerns through the complaint process, mediation and/or an impartial due process hearing. These are described in the following sections.

Administrative Complaint

In addition to the individual child complaint process, an individual or organization may file a written, signed complaint that any public agency or private service provider participating in the statewide system of early intervention services is violating a requirement of Part C regulations. The complaint must include a statement that a requirement of Part C has been violated and the facts on which the complaint is based. You can write a letter of complaint to the Part C Coordinator (see sample letter). You must also send a copy of the letter to your child’s Early Intervention Service Provider.

After receiving your written complaint (individual child or administrative complaint), the IDEA Part C Coordinator will assign a staff person to investigate and gather information from you and others concerned. This office will review all the information and reach a decision about your complaint.

You will receive a written final decision within 60 calendar days of receipt of your complaint. If you disagree with the decision, you have the right to request a Due Process Hearing (see the section beginning on Page 12)

How to Request Mediation

Mediation is another way to handle a problem. Through mediation, you and a representative from your early intervention program will meet with a neutral person to help you and the program solve the problem. This process may be used only when you and the program both agree to participate. A sample letter to request mediation follows at the end of this section.

When requested, the Department of Health and Human Services through the IDEA Part C Office will arrange for mediation. You may simultaneously file a request for a complaint investigation, mediation, and for an impartial due process hearing. Mediation cannot be used to extend the due process hearing timeline of 45 days. An extension may be granted in certain circumstances. If an agreement is reached in mediation, the due process hearing is canceled.

A mediation agreement must be to the satisfaction of both parties and must not conflict with state or federal law or policy of the Aging and Disability Services Division. Both parties must sign the agreement and are given a copy of the written agreement at the end of the mediation. Discussions that occur during the
mediation process must be confidential and may not be used as evidence in any subsequent impartial due process hearings or civil proceedings, and the parties to the mediation process may be required to sign a confidentiality pledge prior to the beginning of the process.

Refer to P.L. 108-446 and 34 CFR 303.431

Due Process Hearing

You have the right to ask your local program for a due process hearing conducted by a hearing officer if you disagree with decisions made by the team, including eligibility, evaluation, and/or services, or if your child is not receiving services per the IFSP.


Nevada’s IDEA Part C Office will appoint an impartial hearing officer. The hearing officer will not be an early intervention administrative staff member or an employee from any program involved in providing services to your child or family. Also, the hearing officer will not have a personal or professional interest that would conflict with his or her ability to make a decision. A sample letter is provided at the end of this section.

Refer to P.L. 108-446 , 34 CFR 300.511 and 303.443

The program must offer a resolution session prior to the due process hearing. This is to determine if any issues related to the dispute can be resolved prior to proceeding with the due process hearing. Refer to P.L. 108-446 and 34 CFR 300.510 & 303.442

Each hearing must be at a time and in a place that is convenient for both you and the local early intervention program. You must be notified of the time and place. Refer to P.L. 108-446, 34 CFR 300.515 and 303.442

You may be advised and accompanied to the hearing by a lawyer or by someone with special knowledge of early childhood intervention or legal proceedings. The early intervention program must provide a listing of free or reduced cost legal assistance. You may present evidence, confront and cross-examine, and require the attendance of witnesses. Evidence cannot be presented at the hearing unless it has been shown to you at least five (5) days before the hearing.

The hearing must be recorded by a court recorder. All information identifying the child and family will be deleted. Parents decide if hearings are closed to the public or open. A copy of the transcription must be provided at no cost to families for appeal purposes. Refer to P.L. 108-446 and 34 CFR 300.512

The hearing officer must make a decision within 45 days from the day a request for hearing is received if:

- Both parties agree in writing to waive the resolution meeting or
- Both parties agree in writing no agreement can be reached.

While the hearing is in process, your child may continue to receive appropriate early intervention services currently being provided, or if applying for initial services shall receive the services not in dispute. If there is good cause by any of the participants in the hearing, the officer may extend the 45 day time limit. Refer to P.L. 108-446 and 34 CFR 300.510
How to Appeal a Decision

Either you or the early intervention program may appeal the due process hearing decision made by a hearing officer. If an appeal is requested, Nevada’s IDEA Part C Office will appoint an impartial review officer who will review the hearing records to be sure the proper procedure was followed. The review officer has the option to gather additional evidence or testimony if needed. Any additional meetings held to gather information must be scheduled at a time and place convenient to you and the early intervention program. The review officer will make an independent decision upon completion of the review.

An independent decision will be reached and mailed to both you and the agency within 30 days of the request. The IDEA Part C Office will delete any personally identifying information and submit the findings and decisions of the due process hearing or the appeal to the State Interagency Coordinating Council. The findings are also available to the public after personally identifying information is removed. Refer to P.L. 108-446 and 34 CFR 300.515

The decision of the review officer is final unless a civil action is filed in State or Federal court. Any involved party has the right to bring a civil action. Refer to P.L. 108-446 and 34 CFR 300.516

Sample Letters

Sample Complaint Letter:

(Date)

Department of Health and Human Services
IDEA Part C Office
1000 E. William Street, Suite 105
Carson City, NV 89701

Dear IDEA Part C Coordinator:

I would like to file a complaint because I believe (Child’s Name and Address) is not receiving early intervention services as the law requires. I would like the Department to investigate the following actions:

(Statement of Charges. Be specific about the law or regulation that is being violated.)

I understand that my complaint will be investigated within 60 days and that I may be contacted for additional information and that I will receive a copy of the final report. The best time to reach me is on (Day[s]) at (time[s]).

Sincerely,

Signature

(Name)

(Address)

(Phone)

For additional information contact:
Project ASSIST
Toll Free 1-800-522-0066 or
Email: ProjectAssist@dhhs.nv.gov

cc: Your Child’s Early Intervention Service Provider Address
Sample Letter to Request Mediation:

(Date)

Dear (Early Intervention Local or State Program Manager):

I would like to request mediation. I am concerned about the early intervention services that my child, (Name), is receiving or should be receiving.

The specific reasons for this request are as follows: (State the nature of the problem.)

I hope you will agree to this request. If so, I understand someone will contact me to make arrangements for mediation. The best time to reach me is on (Day[s]) at (time[s]).

Sincerely,

Signature
(Name)
(Address)
(Phone)

Sample letter to request a due process hearing with an impartial Hearing Officer:

(Date)

(Early Intervention Services Program Name)
(Local Program Address)

Dear Program Manager:

The purpose of this letter is to request an impartial due process hearing for (name of child), born on (birth date), enrolled at (early intervention program name) who currently resides at (address).

I am/We are requesting this hearing in order to resolve the issue(s) of the (state the issue, i.e. identification/evaluation/placement/early intervention services) of my/our child.

The specific reasons for this request are as follows: (State the nature of the problem.)

Facts that support this request include: (Describe the facts related to the problem.)

In order for us to prepare for this hearing, would you please provide us with the following information:

a. The procedure to follow in order to examine and copy my/our child’s records.

b. A list of the agencies where I/we can obtain free or inexpensive legal assistance and other relevant services in the area.

In addition, please forward a statement of my/our rights under the provisions of the Individuals with Disabilities Education Act.

Sincerely,

Signature
(Parent/Guardian Name)
(Address)
(Phone)

Nevada Disability Advocacy and Law Center (NDALC) is Nevada’s federally mandated protection and advocacy system for the human, legal, and service rights, interests, and welfare for individuals with disabilities.

NDALC will advocate to ensure that children with developmental disabilities obtain appropriate and timely early intervention services and transition services.

1-800-992-5715 (Northern Nevada)
1-888-349-3843 (Southern Nevada)
www.ndalc.org
Surrogate Parents

If the parent(s) of a child cannot be identified or located and/or the child is a ward of the State under Nevada Laws, the early intervention program shall appoint someone to act as a surrogate parent.

Ward of the State

IDEA considers a child to be a “ward of the state” when the state has assumed under its own law the legal responsibility to make decisions for the child, including the child’s receipt of early intervention services.

A child is a “ward of the state” in Nevada when:
- The child is in the custody of the State.
- A Case Plan has been approved by the Juvenile Court, and the Case Plan includes Termination of Parental Rights (TPR); or
- Termination of Parental Rights (TPR) is pending.
- TPR has been finalized.
- Exception – The term does not include a foster child who has a foster parent who meets the definition of a parent.

Parent

[IDEA 2011, 34 CFR 303.27]

General. As used in this part, “parent” means—
- A natural, adoptive or foster parent of a child;
- A guardian (but not the State if the child is a ward of the State);
- An individual acting in the place of a natural or adoptive parent (including a grandparent, stepparent, or other relative with whom the child lives, or an individual who is legally responsible for the child’s welfare); or

An individual assigned as a surrogate parent in accordance with IDEA 2011, 34 CFR 303.422(d)(2)

- Has no interest that conflicts with the interest of the child he or she represents;
- Has knowledge and skills that ensure adequate representation of the child; and
- Is not an employee of the state lead agency or any other agency providing services to the child or any family member of the child.

The surrogate parent shall:
- Become acquainted with the eligible child, including disability, individual needs, and cultural and language background;
- Represent the child in all IFSP meetings and other meetings relating to the identification, evaluation, and provision of services for the child in the natural environment;
- Ensure the confidentiality of information and records concerning the child;
- Be able to make sufficient time available to carry out the duties of surrogate parent; Have sufficient knowledge and skills to execute these responsibilities and to seek additional consultation and training as needed;
- Notify the appointing agency whenever the surrogate parent has reason to believe that a conflict of interest exists with respect to his or her appointment

Refer to P.L. 108-446, and 34 CFR 303.422
The Importance of Family and IFSP Development

The family is the primary person in the life of their developing infant and/or toddler. The family has an important role to play and it is the key decision maker within the early intervention system. Early intervention professionals are available to support your family, provide suggestions, and assist you in helping your child develop.

Early intervention programs in Nevada have adopted a philosophy of providing “family-centered” supports and services. It is both your right and your responsibility to participate in all decisions that affect your child and family.

You have the right to receive answers to your questions from your early intervention program. Ask for help from your service coordinator if you don’t understand something. You can always ask questions if you don’t understand why something is, or is not, happening for your child. If needed, you have the right to receive a translation orally, in sign language, or in Braille.

Refer to P.L. 108-446, Section 639 (a) (7), 636 (e) and Federal Regulation 300.561 (a) (1), 303.342 (d)(ii)

Your decision-making ability is respected and you are encouraged to choose the level of involvement and support you want for your child and family.

The outcomes on your child’s IFSP and the strategies to meet those outcomes should reflect your family’s concerns, priorities, choices, resources, and preferences. It is important that you are involved in all aspects of implementing and planning your child’s intervention program. Interventionists will assist you by providing support and information. The IFSP will state services that you and your child may receive. These services will not be provided without your written consent.

You are a vital member of the IFSP team, if you would like to have your child receive more services or make changes to the current IFSP, you must discuss this with your service coordinator. The service coordinator will schedule an IFSP review meeting and you will receive a Prior Written Notice (PWN) as to the date, time, and reason(s) for the meeting.

If during the IFSP meeting the team does not agree to increased service to the existing IFSP, you will be given a PWN stating the extra services will not be provided. The IFSP is an agreement you sign with your early intervention provider. If your child is receiving services not listed on the IFSP, your early intervention provider is not responsible for payment of those services. If you do not agree and want your early intervention provider to pay for outside services, you may request an IFSP meeting or file a complaint.

Refer to P.L. 108-446, and 34 CFR 303.13 and 303.342
Intervention Strategies/Activities in Daily Routines

When you meet with your service coordinator and other team members for the first time, it is likely they will ask you to describe a typical day for your family. This discussion will help identify what things in your daily routine are going well, and areas that you would like to change. For example, if meal time is especially stressful for you and your child, you might need strategies and support to help meal time go better and for this to be a more enjoyable time for you both.

After talking about your daily routines, the team — parents, other important people to the family, and professionals — determine the strategies and activities that will help your child achieve the outcomes (desired changes or improvements) you have identified. These activities should be things that you do with your child or with family and friends on a regular basis and can be done at home or in community settings, such as grandma’s house, the park, at a child care provider, or at any other activity you participate in regularly.

The early interventionists on the IFSP team will give you many ideas and strategies for ways to help your child’s development by participating in family and community activities. They will also provide direct services when the team determines this is necessary to meet your child’s outcomes.

How Children Learn

Research from leading experts on early childhood development has shown that infants and toddlers learn best when they are participating in natural learning opportunities that occur in everyday routines and activities with their families and in the community (e.g. playing with siblings, eating with their family, visiting grandparents, etc.). Children need repeated opportunities to practice, during the family’s normal day, to develop skills. When children are interested and participating in an activity, they are more likely to gain and master new skills. Children with disabilities or delays need many opportunities to repeat activities in a variety of ways and at different times to promote learning.

Early intervention will support your family by focusing on specific challenges that impact your child’s functional participation in everyday activities and routines. Staff will provide services and supports to assist you in facilitating your child’s learning and participation in community life. “Early intervention professionals’ job is to make sure that... regular caregivers, such as parents and other child care providers, have the information, encouragement, and materials to take advantage of learning opportunities that occur throughout the day, wherever the child happens to be.”
Parents support their child’s development everyday through planned or naturally occurring learning opportunities and, as a result, have the greatest impact on their child’s learning. Whether parents intend to or not, they are already providing their child with learning opportunities and teaching their child. When a family receives early intervention, professionals can give families support to make this teaching most effective.¹”

In planning intervention for your child and family, the goal is to choose areas and activities that are meaningful in your everyday life and may be carried out during your daily routines. Intervention should be spread throughout your day.

References:

THE IFSP DOCUMENT COMPONENTS
1. Information about your child's current development – includes both your home information and the evaluation results about his/her health, vision, hearing, language, speech, social, adaptive (self-help) and cognitive development.
2. Information about your family – includes what you believe to be the strengths, concerns, and priorities you and your family have in helping with your child’s development, and areas in which you need help. You do not have to give this information unless you choose to do so.
3. Expected outcomes - includes your hopes and dreams for your child and family, and how you will progress toward reaching these outcomes, and how to handle changes in these outcomes or services in order to reach your goals.
4. Early intervention services – help you achieve the outcomes you have written. This section must also describe where, when and for what length of time each session of the services will be given and who will pay for them (many different sources fund early intervention services).
5. Statement of how and where will be provided – Services have to be provided where the child would normally be if he/she didn’t qualify for services, such as home, daycare center, parks, etc. Rarely, if the IFSP team determines services cannot be provided in a child’s natural environment – for example, in a center or office where only children with developmental delays go – the IFSP must state why services cannot be provided in natural environments.
6. Other services – includes, if appropriate, medical or other needs of your child that are not required under the IFSP, but will help in planning and securing services for your child.
7. Dates and duration of services – states when the services will begin and how long they will last.
8. Service Coordinator – helps you to coordinate the various services required. This person has the appropriate training to meet the needs of your child and family.
9. Transition plan for your child – includes statements about what will happen after your child leaves early intervention (no later than his/her third birthday). For example, those statements may describe the community programs, home programs, preschools, etc. in your area. Taking all suggestions and points of view into consideration, specific contents of the IFSP will evolve at the transition meeting. You, as the parent, are the one who makes the final decision, and without your consent the IFSP will not be put into effect.
Screening

Screening involves the use of selected tools or procedures during the intake visit or other appropriate times to determine whether further evaluation and assessment activities are warranted for your child. Your local early intervention program will ask for written consent before each screening. Screenings may not be required for all children.

Who Participates in an IFSP Meeting?

A parent or legal guardian must be present at all IFSP team meetings. You may also invite other family members, friends, neighbors, advocates, or community members who are important to your child and family. The meeting must also include your early intervention service coordinator.

Other participants who may attend could include members of the evaluation team (when an initial or re-evaluation has been done) and any or all professionals who will be providing supports and/or services to your child and family. Before an IFSP meeting, team members should review the results of their most recent assessments with you.

Principles for Developing Outcomes

- Words used to describe IFSP outcomes, strategies, activities, supports, and services should reflect your family's preferences and be understandable to everyone involved.
- Outcomes (things we want to change or improve) should reflect the changes family members want to see for their child or themselves. Professionals may have suggestions as well.
- Strategies/Activities and supports should fit naturally into your family's daily life.
- Criteria and timelines for evaluating if outcomes have been met should reflect family priorities and team consensus.
- Family strengths and community resources should be used as part of IFSP strategies.
- To ensure collaboration, you contribute your concerns, needs and strengths throughout the team process.

MOVING ON AT AGE THREE … TRANSITION

Why does my child and family have to leave our early intervention program?

IDEA states that early intervention serves children from birth to age three (3). Transition plans are required by law for children moving from early intervention into the public school system or to other programs and services.

Your family may be comfortable with your early intervention program and it may be hard to think about moving on. This change, or transition, for your child and family can be easier for your child and family by having support from your early intervention program, friends, and other family members.

The transition activities include:

♥ Information and training about options for future services, which may include exploration of eligibility for school district services or other community-based services.

♥ Providing information about your child (evaluation and assessment reports, IFSPs, etc), with your written consent, to other service providers.

♥ Help in preparing your child, and your child’s new program, for changes in services such as riding a school bus, meal times, medications, toileting concerns, nursing issues, etc.

http://dhhs.nv.gov/Programs/IDEA/PartC/

What is a transition plan?

A transition plan will include steps to help your family and support your child to move to the next program. These steps will be written into your IFSP. Your service coordinator will give you information about services you may want to consider when your child turns three (3). During this time, it is most important to keep in mind what your child’s needs are.

As early as 2 years 3 months, and no later than 2 years 9 months, you and your IFSP team will develop a transition plan to help your family prepare for future services through your local school district, child care, Head Start Program or other agency.
When Does Transition Planning Begin and What Will Happen?

Between ages two and three, there are important decisions that should be made so your child’s services are not disrupted.

Your service coordinator and representatives from the school district or other community programs will work with you to plan and prepare your child and family for the changes that will happen at age three. They will help you develop a Transition Plan.

**Timelines**

As early as 2 years 3 months, no later than 2 years 9 months — Begin planning.

Transition is a planning process that begins as early as 2 years 3 months and no later than 2 years 9 months. At this time, you and your service coordinator will begin working on a Transition Plan. Your plan should be specific including the timelines and activities necessary for successful transition to other services.

The transition plan will be part of your IFSP. The transition plan may include learning more about services in your community, such as child care options, preschool, Head Start, or special education services. Visits to these settings could be included in the plan. This is the time to ask questions about these other settings and programs.

Between 2 years 3 months and 2 years 9 months, but no later than 90 days before your child’s third birthday — Meet and talk.

As early as nine months prior, and at least 90 days before your child’s third birthday, with your permission, a meeting between you, a representative from the early intervention program, and the school district or community provider who may be working with your child after age three must take place. At this meeting, you will review or develop your transition plan, share information and talk about options offered by these programs.

If your child has a summer birthday, the timeline for Transition Planning should begin early enough so that the Individualized Education Program (IEP) is in place by June and a determination has been made regarding the need for Extended School Year (ESY) services. ESY is special education and related services that, if determined necessary by the IEP team, provides a summer session to assist children in meeting the IEP goals. (If your child will be attending a year round school, that district will describe their ESY program to the parents.)

This 90 day time line is important to ensure services begin by the 3rd birthday.

If your child does not qualify or you choose not to participate in school district services, the Transition Plan will assist you in exploring other community resources such as Head Start, preschool programs, child care, home program etc.

There is a video about Transition located on the web page at:

http://dhhs.nv.gov/Programs/IDEA/Early_Intervention_Programs/
WHAT HAPPENS IN THE SCHOOL DISTRICT?

Basic Rights Under IDEA

Public Law 108-446, or the Individuals with Disabilities Education Improvement Act of 2004 (IDEA), guarantees some basic rights to all children with disabilities. In order to assure that these rights are received, this law also includes two basic protections:

Free Appropriate Public Education (FAPE)

Children ages 3-21 with disabilities are entitled to a public education appropriate to their needs, at no cost to their families.

Least Restrictive Environment (LRE)

Children ages 3-21 with disabilities must be educated with students who do not have disabilities as much as possible (“the maximum extent appropriate”). The location should be as close to home as possible, providing any and all support services that are necessary.

Authority: 20 U.S.C. 1412(a)(5)

The law also states that “special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes, with the use of ‘supplementary aids and services,’ cannot be achieved satisfactorily,” — and it must be documented.

P.L. 108-446, 34 CFR 300.550 (b) (2)

Procedural Safeguards

Children and families continue to have the protection of Prior Written Notice for any meetings or any time the school district wishes to make a change in the IEP. Parents must still consent to all evaluation, assessment, and placement of their child. Parents still have the right to ask for changes of service of an existing IEP; just as they did for IFSPs. They can ask to have IEPs scheduled to discuss their concerns and request for change of services.

What are the steps for my child to receive Special Education Services and to have an IEP?

Eligibility is different for the school district than it is for early intervention. Eligibility is focused on how your child functions in the classroom. After your child has been evaluated by the school district and determined eligible for special education services, an IEP meeting is scheduled. Parents may invite anyone they wish to participate in this meeting.

The Individualized Education Program (IEP) must be in place on or before an eligible child’s third birthday. The IEP must include:

♥ A statement of your child’s present levels of educational performance.

♥ A description of how your child’s disability affects his or her participation in appropriate activities.

♥ A statement of measurable, annual goals.

♥ Needed services and assistive technology needs with initiation dates.

♥ Behavioral Plan if necessary.

♥ Language needs if primarily non-English speaking.

♥ Special considerations for children who are blind, hearing impaired, have autism, etc.

♥ Determination of Extended School Year needs.

The last thing to be determined is:

♥ The placement where your child is most likely to achieve the goals the team has agreed upon, including a statement of other placements considered and why the team rejected a less restrictive placement.

Nevada Administrative Code (NAC) 388.284
How can I prepare for our Transition meeting?

1. Organize your thoughts...
   Remember that you know the needs of your family and child, think about the big picture. What are your resources; what are your family's other commitments and responsibilities; what are your preferences? How does this transition fit into the more complete picture you have of your family's and child's needs?

2. Gather information...
   Find out what options are available. Know your rights and responsibilities. Ask specific questions before you make final decisions. Every School must provide a copy of your rights.

3. Identify the specific changes...
   What is really happening? For example, making a change from your early intervention program to preschool will involve changes in location, persons and environment.

4. Preparation...
   Prepare your family and your child. Develop a plan.
   Consider the following:
   a. What needs to be done and what information needs to be shared?
   b. Who is going to do it?
   c. When does it need to be completed?
   d. What vision do I want for my child’s future? (Additional resources on page 26 & 27.)

5. Keep the lines of communication open...
   A positive attitude can help you adjust, and communication with those involved will make the best of the situation. It is important to communicate openly with other family members and professionals to ensure a smooth transition.
   REMEMBER: If you have a question, ASK!
EXAMPLES OF ISSUES THAT MIGHT BE INCLUDED IN AN IFSP TRANSITION PLAN

The following are examples of some, but not all, of the issues a family might include in their Transition Plan. Each family and child will have a plan unique to their priorities, concerns and needs.

- What information will I need to know to support my child?
- Will my child need more tests/assessments?
- What kind of program will my child go to? How long will my child be there?
- Are there age-appropriate (typically developing peers without special needs) role models in this program/classroom?
- Are there appropriate opportunities for integration with typically developing children?
- My child is in child care—can I get services for my child at our child care center?
- How will special education programs be different from early intervention programs?
- If my child does not go to the school district, what are my other options?
- Can my child go to school with his/her brother or sister?
- How will my child get to the program/school (transportation)? How long is the bus ride?
- What if my child needs medications?
- My child has a special diet—what kind of snacks do they serve?
- Are they familiar with special needs in feeding, positioning, sitting, etc.?
- Are they trained for special needs such as G-tube feedings?
- Are they familiar with or prepared for seizures or other medical needs?
- My child has a vision impairment—how will my child get familiar with a new setting?
- Do they have special equipment that will help my child learn?
- Do the children receive instruction that is individualized to meet their unique needs?
- My child needs to use sign language—how will he/she be able to communicate his/her needs?
- Are they prepared to help my child learn?
- My child will need to wear diapers—how will he/she be provided support and privacy?
- Are bathrooms, stairs, playground, etc., accessible and adapted to the needs of my child?
- My child has never participated with other children in a group setting—what can be done to prepare him/her?
- My child has never been separated from me for an extended period of time—what can be done to help both my child and I adjust?
- Are there other support groups I could contact?
- Can I visit my child’s program/classroom?
- How will I know how my child’s day went?
- Will there be ways for me to help my child at home?
- Will my rights or those of my child be different from what they were in early intervention? How?
Basic Comparison of the IFSP and IEP

<table>
<thead>
<tr>
<th><strong>Components of the Individualized Family Service Plan</strong></th>
<th><strong>Components of the Individualized Education Plan</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>A statement of the child’s present levels of physical (including vision and hearing), cognitive, communication, social or emotional, and adaptive development, based on objective criteria, and family assessments.</td>
<td>A statement of the child’s present levels of educational performance including how the disability affects the child’s participation in appropriate activities.</td>
</tr>
<tr>
<td>A statement of the major outcomes expected to be achieved for the child and the family.</td>
<td>A statement of measurable annual goals and benchmarks/objectives related to how the child will be involved and participate in appropriate activities, as well as how the child’s educational needs that result from the disability will be met.</td>
</tr>
<tr>
<td>A statement of specific early intervention services necessary to meet the unique needs of the child and family.</td>
<td>A statement of the special education and related services, modifications, and supplementary aids and services to be provided to the child or on behalf of the child as well as program modifications or supports for school personnel.</td>
</tr>
<tr>
<td>A statement of natural environments in which early intervention services will be provided, including a justification of the extent, if any, to which services will not be provided in natural settings.</td>
<td>An explanation of the extent, if any, to which the child will not participate with non-disabled children in the regular classroom and in general education activities.</td>
</tr>
<tr>
<td>The projected date for initiation of services and the anticipated duration of the services. It must also include the frequency, intensity, and method of delivering the early intervention services.</td>
<td>The projected date for the beginning of the services and modifications. The anticipated frequency, location, and duration of those services and modifications.</td>
</tr>
<tr>
<td>The criteria, procedures, and times used to determine the degree to which progress toward achieving the outcomes is being made and whether modifications or revisions of the outcomes or services are necessary.</td>
<td>A statement of how the child’s progress toward goals will be measured, including how the child’s parent will be regularly informed, to include the extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year.</td>
</tr>
<tr>
<td>Parent signature on the IFSP means informed written consent is given for the services listed in the IFSP.</td>
<td>Parent signature on the IEP indicates that the parent participated in the development of the IEP. Additionally, informed written consent must be given by the parent for the initial provision of special education and related services under Part B as outlined in the IEP.</td>
</tr>
</tbody>
</table>
Family Resources in Nevada

A.T.A.P.
Autism Treatment Assistance Program
Is a statewide program which provides support and monthly funding to pay for evidence-based treatments and therapies for children ages 0-18 with Autism Spectrum Disorders (ASD).

(775) 687-4210
http://adsd.nv.gov/Programs/Autism/ATAP/ATAP/

Early Childhood Mental Health Services – birth to six years of age
Early Childhood Mental Health Services provides services to children between birth and six years of age with emotional disturbance or high risk factors for emotional and behavioral disturbance and associated developmental delays. Early Childhood Mental Health Services provides:

- Behavioral and psychological assessments,
- Individual, family, and group therapies and behavioral management,
- Psychiatric services,
- Day treatment,
- In-home crisis intervention,
- Childcare and pre-school consultation, outreach, and training,
- Clinical case management.

Northern Nevada: (775) 688-1600
Southern Nevada: (702) 486-6120
http://dcfs.nv.gov/Programs/CMH/Community-Based-Outpatient-Services/

Early Childhood Library
The Part C Office maintains a Library available to families, service providers, students, and teachers across the state. This large collection of books and DVD’s is a tremendous source of information for parents and professionals in the care and education of young children with disabilities or special health care needs. For more information, please contact your service provider or coordinator.

Or call: Project ASSIST at 1-800-522-0066
http://dhhs.nv.gov/Programs/IDEA/ProjectASSIST/Special-Ed-Library/

Family Resource Centers (FRCs)
The FRCs provide information, referrals, and case management for individuals and families in need of assistance in accessing services and programs that will strengthen and support the family. There are 21 service areas that reach communities throughout Nevada. FRCs collaborate with community organizations and government agencies to help individuals and families access needed services and support. FRCs emphasize community based, collaborative services that are culturally competent, accessible, and flexible.

(775) 684-4001 Northern Nevada
(702) 486-3527 Southern Nevada
http://dhhs.nv.gov/Programs/Grants/Programs/FRC/Family_Resource_Center/

Children and Youth with Special Health Care Needs
CYSHCN serves “...children who have or are at risk for chronic physical, developmental, behavioral or emotional conditions and who also require health and related services of a type or amount beyond that required by children generally”, by working with families and across systems to develop strategies that promote quality well-being and support for those children and their families.

(775) 684-3476 Statewide
http://dpbh.nv.gov/Programs/CYSHCN/CYSHCN-Home/

Consumer Health Assistance
Nevada Office for Consumer Health Assistance is a free advocacy service for all Nevada residents, information and access to resources, prescription assistance and resources, hospital /medical bill reviews, patient rights and responsibilities, appeal and insurance denials.

Toll free: 1-888-333-1597
http://dhhs.nv.gov/Programs/CHA/
Family Resources in Nevada -Continued

Nevada Disability Advocacy & Law Center (NDALC)

Nevada Disability Advocacy and Law Center (NDALC) is Nevada’s federally mandated protection and advocacy system for the human, legal, and service rights, interests, and welfare for individuals with disabilities.

NDALC was designated as Nevada’s protection and advocacy system by the governor in March 1995. NDALC is a private nonprofit organization.

NDALC will advocate to ensure that children with developmental disabilities obtain appropriate and timely early intervention services and transition services. NDALC will only provide direct representation at IFSP meetings in select cases.

1-800-992-5715 (Northern Nevada) 1-888-349-3843 (Southern Nevada)
www.ndalc.org

Nevada Parent Advocacy

Nevada Parent Advocacy Initiative: By Parents, for Parents—It’s information about Nevada’s Early Intervention Services System in one common place. This project consists of a parent Facebook (www.nvparents.com/fb) support page for families with children in Early Intervention Services, information to give parents the basic knowledge they need to access and utilize services effectively, and shares with everyone. It is a place for all parents of children with disabilities to connect. Please post your personal stories, questions about your child's development and/or disability, questions about Early Intervention programs, great parenting articles you've come across, community resources and events.

www.nvparents.com/fb

Nevada P.E.P.

As the statewide Parent Training and Information (PTI) Center, Nevada P.E.P. provides family focused and community based services for families of children with disabilities or special needs, and to professionals. Nevada P.E.P. offers the following services:

• Information, referral and technical assistance
• Individual assistance and support
• Specialized workshops
• Newsletter and Resource Library
• Speakers

Toll free: 1-800-216-5188
www.nvpep.org

Project ASSIST

Project ASSIST is Nevada’s central directory for Early Intervention Services. It’s purpose is to provide information, resources, and referral services to inform and educate families of infants and toddlers with developmental delays or disabilities, and the general public.

Monday through Friday, 8:00 a.m. to 4:00 p.m., telephone calls are answered or a 24-hour voice mail records your call, which will be returned generally within two to three working days. There is no cost for this information service.

Toll Free 1-800-522-0066
Email: ProjectAssist@dhhs.nv.gov
http://dhhs.nv.gov/Programs/IDEA/ProjectASSIST/

Women, Infants and Children (WIC)

WIC is a federally funded program operated by the Nevada Division of Public and Behavioral Health to improve the health of Nevada residents. WIC provides nutritious foods and education for pregnant or recently pregnant women, infant or children up to the age of 5 years old.

Many working families, including military families, meet WIC income guidelines. These guidelines are much higher than for welfare programs. There are many WIC clinics throughout Nevada. You may call to apply for appointment to determine eligibility.

WIC Toll Free Phone: 1-800-863-8942
http://nevadawic.org/for-families/what-is-wic/
Terms

**Assessment:** The ongoing process used by appropriate, qualified personnel throughout the period of a child’s eligibility under this part to identify:

a. The child’s unique strengths and needs and the services appropriate to meet those needs;
b. The resources, priorities, and concerns of the family and the supports and services necessary to enhance the family’s capacity to meet the developmental needs of their infant or toddler with a disability; and
c. The nature and extent of early intervention services that are needed by the child and the child’s family to meet the needs in a. and b. above.

**Consent:** The approval for services a parent gives to a program, generally in writing. Consent is always voluntary and a parent may revoke it at any time.

**Disclosure:** To permit access to or the release, transfer, or other communication of education records, or the personally identifiable information contained in those records, to any party, by any means, including oral, written, or electronic means.

**Early Intervention:** A section of the federal law, Individuals with Disabilities Education Improvement Act of 2004 (IDEA -- Part C, P.L. 108-466). IDEA states the federal requirements for educating children with disabilities. This section specifically describes federal requirements for providing early intervention services to children from birth to their third birthday who have disabilities, as well as to their families.

**Eligibility Requirements:** The requirements a child must meet to be able to receive early intervention services. This will include the age of the child and whether or not the child has a disability or developmental delay.

**Evaluation:** The standardized tools used by qualified personnel to determine a child’s initial and continuing eligibility under this part, consistent with the definition of "infants and toddlers with disabilities" in 34 CFR 303.16, including determining the status of the child in each of the developmental areas.

**Extended School Year:** Special Education and related services that are provided beyond the normal school year in accordance with the IEP and at no cost to parents.

**Family:** Defined according to each family’s definition of themselves.

**Family Assessment:** Family directed identification of the family’s resources, priorities, and concerns relative to enhancing the development of the child.

**Family Concerns:** Those areas that the parent identifies as needs, issues, or problems related to meeting the needs of their child which they wish to have addressed within the Individualized Family Service Plan (IFSP). For example: financial concerns, social supports, medical needs, etc.

**Family Priorities:** Those areas which the parent identifies as most important for their child and family unit.

**Family Resources:** The strengths, abilities, and formal and informal supports that can be used to address family concerns, needs, or desired outcomes.

**FERPA:** Family Education, Rights, and Privacy Act (34 Code of Federal Regulation Part 99).

**IDEA:** Individuals with Disabilities Education Improvement Act of 2004. IDEA states the federal requirements for educating children with disabilities. (P.L. 108-466)

**IEP:** Individualized Education Program: A written education program designed to meet the individual special education and related services needs of a child with a disability.

**IFSP:** Individualized Family Service Plan: A written plan for providing early intervention services and supports to eligible children/families that:

a. Is developed jointly by the family and appropriate qualified personnel providing early intervention services and supports;
b. Is based on the multidisciplinary evaluations and assessment of the child and the assessment of the strengths and needs of the child’s family, as determined by the family and as required in Federal Regulation §303.322, and includes services necessary to enhance the development of the child and the capacity of the family to meet the specific needs of the child.

**Interim IFSP:** When the child and/or family are in apparent immediate need of early intervention (EI) services, a temporary IFSP can be developed to allow the child and family to receive EI services after the child has been referred to a program and before an evaluation is completed. An IFSP must still be completed within 45 days of referral.
Terms Continued...

**Inclusion:** Children with and without disabilities participating in community activities together. Recognizes every individual’s right to be treated equally and to be accorded the same services and opportunities as everyone else.

**Interagency Coordinating Council (ICC):** Mandated by Federal law to advise and assist the State Part C office in several areas, including development, implementation, and review of policies that guide the state early intervention system. The ICC is also responsible to advise and assist the State Educational Agency regarding the transition of toddlers with disabilities to preschool and other appropriate services. (see page 34 for more information)

**Mediation:** A voluntary process freely agreed to by parents and providers to attempt to resolve service delivery disagreements. Neither party is required to participate in the mediation process and both parties must approve any agreement reached. Mediation may not be used to deny or delay your right to an impartial hearing.

**Multidisciplinary:** The involvement of two or more different disciplines or professions in the provision of integrated and coordinated services, including evaluation and assessment activities in 34 CFR §303.322 and development of the IFSP in 34 CFR §303.342.

**Natural Environment:** To the maximum extent appropriate to the needs of the child, early intervention services must be provided in the natural environments, including the home and community settings in which children without disabilities participate. Natural environments mean settings that are natural or normal for the child’s age peers who have no disability. The places where your child lives, learns, and plays.

**Outcomes:** Statements of changes or improvements you desire for your child and family. The IFSP team determines these outcomes for IFSP development.

**Parent:** A parent, a guardian, a person acting as a parent of a child, or surrogate parent who has been appointed in accordance with 34 Code of Federal Regulations (CFR) §303.406. The term "parent" has been defined to include persons acting in the place of a parent, such as an adoptive parent, grandparent or stepparent with whom a child lives, as well as persons who are legally responsible for the child’s welfare.

**Referral to Early Intervention:** When you discover your child may need Early Intervention (EI) Services and you are told about EI Services or make contact with EI Services yourself. Your child should be referred to an EI program as soon as a developmental delay is determined or a condition which is likely to result in delay is identified.

**Service Coordination:** Helping your child and family get services and supports, providing information about Early Intervention, finding other services in the community, and ensuring that your family receive the rights and protections guaranteed by Federal Law.

**Service Coordinator:** The primary point of contact for your family. A person from the early intervention program who works with your family to support your child’s development and to help arrange for EI and community services in and out side of early intervention.

**Strategies:** The methods and activities developed to achieve outcomes. Strategies may be included in the IFSP and are ongoing.

**Surrogate Parent:** The early intervention program shall appoint an individual to act as surrogate for the parent when (1) the parent cannot be identified; (2) the public agency, after reasonable efforts, cannot locate the parent; and/or (3) the child is a ward of the State under the laws of the State of Nevada.

**Transition:** When your child leaves a local early intervention program. All children must leave Early Intervention Services by age three (3), or when no longer eligible. Your service coordinator will help you write and follow a Transition Plan.
Parent Handbook Acknowledgment Form

Name of Parent, Surrogate Parent, or Guardian ____________________________________________

Name of Child _______________________________________________________________________

Child’s Date of Birth __________________________________________________________________

Early Intervention Program Name _______________________________________________________

Program Address ______________________________________________________________________

City ___________________________ NV, Zip Code __________________________________________

This is to verify that I have received a copy of my Early Intervention Services Parent Handbook. It informs me of my rights and my child’s rights while enrolled in an early intervention program in Nevada. These rights have been explained to me by:

Name _____________________________________________________________

Date ___________________________ Position _____________________________________________

I understand that I have the right to:

♥ Have my rights explained to me in a way I can understand

♥ Participate in decision making for my child

♥ Have my child’s developmental skills evaluated

♥ Give consent, or permission for evaluation and services

♥ Develop a plan for services within 45 days of referral (IFSP)

♥ Receive a written prior notice of meetings for IFSP, evaluation and assessment, or proposed changes to or refusal of services by the early intervention program

♥ Ensure confidentiality

♥ Review Records

♥ Disagree

My signature below indicates I have received my Early Intervention Services Parent Handbook and understand its contents.

_________________________________________ ________________________________
Signature of Parent, Surrogate Parent, or Guardian Date
NOTES

http://dhhs.nv.gov/Programs/IDEA/PartC/
You Are Invited to Participate!

The Nevada Early Intervention

INTERAGENCY COORDINATING COUNCIL (ICC)
http://dhhs.nv.gov/Programs/IDEA/ICC/Home/

The Nevada Interagency Coordinating Council (ICC) was established by Nevada's Governor in 1987 pursuant to the requirements of Public Law 99-457, the Individuals with Disabilities Education Act (IDEA). The Council’s primary mission is to advise and assist the Nevada Department of Health and Human Services in the development of and implementation of a statewide system of early intervention services for young children with developmental delays or disabilities and their families.

Who is on the ICC?
Membership includes representatives from public or private providers of early intervention services, members of state agencies involved in the provision of, or payment for, early intervention services who have sufficient authority to engage in policy making, State Department of Education personnel responsible for preschool services to children with disabilities, Head Start, State Legislators, University or college system, child care, parents, and other members selected by the Governor.

How can families get involved?
There are many ways that you and your family can get involved with Early Intervention Services beyond the services and support activities specifically designed for you. Below are some of the opportunities in Nevada to...

- Provide valuable input from a parent’s perspective,
- Assist in the development of program policies,
- Help shape and create a better system for all children receiving Early Intervention Services!

Nevada's Interagency Coordinating Council (ICC)
ICC members include parents of children with disabilities or developmental delays. The parents on the ICC bring their real life experience to the table and those who provide the services provide expertise on how systems work and how to accomplish the tasks of the ICC. Working together as a team makes the ICC an asset in the planning and advocacy for a statewide coordinated and comprehensive system of services and supports in early intervention

ICC Family Support Resource Subcommittee
Nevada's Interagency Coordinating Council (ICC) established a "Family Support Resource Subcommittee" made up of parents of young children with special needs and others interested. They support ICC activities and help ensure the ICC responds to issues important to families, strengthen and broaden family involvement at all policy and service levels, increase ICC communication with families, provide public awareness support, and identify and support efforts to improve early intervention services and programs within communities.

More information may be requested by calling Nevada’s Project ASSIST at 1-800-522-0066 or email at ProjectAssist.dhhs.nv.gov

There are also other opportunities for participation on various subcommittees, ad hoc committees, task forces, and work groups.

"The highest reward for a person’s toil is not what they get for it, but what they become by it." ... John Ruskin
Project ASSIST
http://dhhs.nv.gov/Programs/IDEA/ProjectASSIST/

Project ASSIST is a Nevada central resource directory for anyone seeking information about organizations, programs or agencies that provide services and supports for young children with disabilities, and their families.

Information is available on:
- parent support groups,
- respite care
- screening, diagnosis and assessment,
- early intervention programs for infants and toddlers,
- education, health, and social service agencies,
- vocational training,
- therapies,
- counseling and psychological services,
- advocacy organizations,
- life planning, financial and legal assistance,
- as well as many other services.

During work days phone calls are answered promptly when staff are available. There is twenty-four hour voicemail as well and calls are returned generally within two to three working days. A search of a computerized database, tailored to the unique needs of the caller, yields information about selected resources and information which is provided at no cost to the individual.

Project ASSIST Statewide Toll Free Number: 1-800-522-0066
Email: ProjectAssist@dhhs.nv.gov

Acknowledgement
In preparing this Early Intervention Services Parent Handbook, reviewing similar materials from other states and the Department of Defense was invaluable. We would especially like to thank Texas, Arizona, Colorado, Georgia, Montana, New Mexico, Virginia, and Department of Defense for sharing their handbooks with us.

We also thank the many parents and community members who helped review and provide input for this publication.
Until the 1960’s education for children with special needs was primarily considered a state and local concern. The Federal government’s commitment was limited to grant and matching funds for research and education, distributing information, and providing some consultation to local and state agencies.

The Handicapped Children’s Early Education Assistance Act of 1968 was the first Federal law recognizing the importance of early childhood education. In 1975, Public Law 94-142 (P.L. 94-142), the Education for All Handicapped Children Act required all states without a conflicting law to develop a plan to identify and serve children with disabilities from birth through 21 years.

Public Law 99-457, passed in 1986, and Part H of the law provided monetary incentives for states to provide services for children from birth through 2 with special needs or who were at risk for later developmental problems.

In 1991, Congress reauthorized funds for education for all children with special needs as the Individuals with Disabilities Education Act ... IDEA (P.L. 99-457). In 1997 IDEA was again reauthorized and Part H of the law became Part C under P.L. 105-17. On December 3, 2004, President Bush signed the Individuals with Disabilities Education Improvement Act of 2004 (P.L. 108-446), a major reauthorization and revision of IDEA. The new law preserves the basic structure and civil rights guarantees of IDEA but also makes significant changes in the law.

Part C of IDEA establishes rights for families, including the right to consent to or refuse any or all early intervention services. It defines the role of the service coordinator and gives guidelines for developing the IFSP and what parts must be included — beginning with the initial plan through the completion of the transition plan to preschool services at least 90 days before your child’s third birthday.

Your family’s rights are explained in detail in this handbook your service coordinator will go over with you at your first meeting. They can also provide you with a complete copy of the IDEA. You may also find additional information the federal law at:

http://idea.ed.gov

State of Nevada,
Department of Health and Human Services

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