

How to Guide: IDEA – Part C, Birth to Three, Infant Toddler Services

How to Apply

- If you have concerns about your child’s development, you can make a referral to your local infant toddler services program. Referrals can be made by phone, fax, or an online form.
 - **Online form:** <https://www.kdhe.ks.gov/DocumentCenter/View/5830/KECDS-Initial-Referral-Form-PDF>
 - **Zip code:** You can find your local infant toddler programs by entering your zip code at this link: <https://www.itsofks.org/>
- A local specialist will contact you to schedule a screening or an initial evaluation. These services will occur at your home and at no cost to you.
 - A free, comprehensive evaluation is conducted by two or more professionals to assess your child’s developmental areas such as motor skills and communication. Your child could be eligible for services if they have a diagnosed physical, mental, or neurobiological condition that makes it more likely for them to have a developmental delay too.
- If your child is eligible, the infant toddler team will work with you to develop an Individualized Family Service Plan (IFSP) to outline goals and services for your child and your family.
 - **Team:** Your child’s team consists of parents, caregivers, other family members at your request, the family services coordinator, professionals involved in your child's evaluations, and those providing early intervention services. You can invite an advocate or person outside your family to provide support and assistance if you’d like.
 - **Individualized Family Service Plan (IFSP):** The Individualized Family Service Plan (IFSP) is a family-centered written plan. It provides a comprehensive picture of your child’s abilities and needs as well as services designed to meet your family’s concerns. An IFSP includes:
 - Your child’s current developmental levels in various areas, such as cognitive, communication: expressive and receptive, fine motor, gross motor, social-emotional, and self-help
 - Family information addressing your concerns, resources, and priorities
 - Statement of measurable results or outcomes for your child and family
 - Specific services including:
 - Frequency (how often it occurs)
 - Intensity (individual or with siblings/peers)
 - Duration (period of time with start and end dates)

- Daily routines and natural environments where services will be provided
 - Details about the family service coordinator and primary provider as well as other licensed professionals as needed
- When your child is nearing age three and is still eligible for early intervention services, the infant toddler team will refer them to the local school district and help develop a **Transition Plan**, so needed services are continued.

Information Needed:

- The infant toddler provider staff on your child's IFSP team will conduct specialized tests to understand how your child is developing. You can bring information that helps other team members understand your child's strengths, difficulties, and any concerns you have. This information could include:
 - Discuss what your child can do in the areas of motor skills, vision, hearing, learning, communication, self-care, and emotional development.
 - Review what your child has difficulties within the areas of motor skills, vision, hearing, learning, communication, self-care, and emotional development.
 - Provide information about your child's likes, dislikes, and preferences. Include what can frustrate your child and any challenging behaviors that occur.
 - Talk about what your child's typical day or routine looks like, including when they eat, sleep, and play.
 - Explore what is working well and how your child does during everyday activities.
 - List any concerns or goals you have for your child.
 - List your needs. For example, childcare, transportation, teaching strategies, or getting more information about your child's development.
 - Share the people or agencies that help your child and family.
 - Tell your providers if your child used any assistive technology in the past and what he/she uses now.
 - Share any reports or recommendations from other therapies. For example, private speech-language pathologists, physical or occupational therapists, counselors, etc.
 - Share any reports or recommendations from your child's primary care physician or other medical specialists. For example, audiology or ophthalmologists.

Helpful Tips

- **Participate and communicate.** You are an expert on your child. You have a unique perspective about your child's needs, strengths, interests, and daily life. Decisions made in IFSP meetings can have a long-term impact on your child's learning. Stay involved.
- **Ask questions.** Ask other team members to explain words and jargon that are new to you. Ask how infant toddler staff will measure your child's progress, how a suggested goal meets your child's needs, and why they are suggesting specific strategies. Find out who will work with your child and what they will be doing. See what you can do at home to help.

- **Share your ideas.** If you know of an assistive technology device or accommodation that might help your child, share it with other team members. Be open to trying different solutions to figure out what works best. You want an assistive technology device if it helps your child learn, communicate, participate in daily activities, or interact with their siblings and friends. One that meets your child's unique needs.
- **Request an Assistive Technology (AT) assessment.** Tell other team members if you think assistive technology will help your child participate in an activity, complete tasks independently, or perform an activity at the same pace as their peers. Ask for the opportunity to try out a device to see if it helps.
 - Assistive technology devices are recommended based on your child's needs. AT devices could include supports with:
 - **Self-care:** suction bowl, bathing chair.
 - **Communication:** picture communication boards, single or multiple message devices with switches, dynamic screen communication devices, speech generating devices.
 - **Mobility:** gait trainers, wheelchairs.
 - **Positioning:** corner chairs, bolsters or other positioning devices, standers.
 - **Sensory enhancers for hearing and vision:** toys with sound or vibration, flashing signalers for doorbells or alarms, high contrast toys or utensils, handheld magnifiers.
 - **Socialization/play:** a ball designed with openings to help grip it, crayon with hand grip, switch-adapted spinner for games, standing devices to interact with siblings and peers.
 - **Cognition:** switch-adapted toys, apps on tablets.
- **Technology is provided at no cost.** Local infant toddler providers are required to help you access a device listed on your child's IFSP, but do not have to pay for it. They may purchase devices, lease devices, or seek public or private funds to acquire devices. Possible options include the use of Medicaid, Special Health Care Needs, family health insurance, private foundations, and community or faith-based organizations.
 - For example, if your child has a medical card, the local provider may use Medicaid funds to acquire a mobility or communication device.
 - For example, the school might ask to use your private insurance to request an assistive technology device. If you agree, the provider can pay your co-pay or use other funds to cover it with your permission.
- **Make sure your child learns to use their AT.** Ask for training so your child knows how to use the technology at home and in other natural environments. Training and technical assistance can be included on the IFSP for your child, you, and even local infant toddler specialists.
- **Request a meeting.** Your child's IFSP is written for a period of six months, but you can request to meet with the Family Services Coordinator, your primary infant toddler specialist, or the entire team earlier if you have questions.