

Ohio Early Intervention

IFSP REVIEW PACKET

www.ohioearlyintervention.org

Ohio Early Intervention IFSP Review Packet

This packet is a collection of Ohio Early Intervention forms and documents used during periodic Individualized Family Service Plan (IFSP) reviews. These materials have been compiled, and in some cases reformatted, to make it easier to share and explain their content to families while using a video conferencing platform during an IFSP review.

If the IFSP review is held via technology, the EISC is encouraged to use the “Share Your Screen” feature so families can follow along with the explanation of parent rights, procedural safeguards, and the completion of the necessary EI forms. Additionally, the EISC may provide the family with these forms electronically for review at any time.

If you have further questions on best practices or how to use this packet, please reach out to your region’s EI Program Consultant.

Prepared by

Early Intervention Program Consultants and the DODD Training Team
From the idea and best practice created by the Belmont County Board of
Developmental Disabilities
May 8, 2020

Ohio Department of Developmental Disabilities
30 E. Broad Street
Columbus, Ohio 43215

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Parents Rights (July 2019)

Introduction

Parents of children in Early Intervention (EI) have many rights and protections under the Individuals with Disabilities Education Act (IDEA).

The Ohio Department of Developmental Disabilities (DODD) and its local partners make up the EI system in Ohio and are responsible for implementing these rights and protections. Many of them apply even if your child is found ineligible for EI.

This brochure will provide your family with information about those rights and protections as well as what to do if you have a disagreement about something in EI. The forms used in EI explain these rights and protections in greater detail. In addition, your service coordinator will also explain them and answer any questions you may have.

Prior Written Notice and Consent

You will receive information about certain activities delivered by the EI system ahead of time and in writing. This is called "prior written notice." The prior written notice gives you time to decide if you want to go through with a particular activity. If you are ready to begin the activity right away, you can waive this waiting period. After deciding to go through with some activities, you will give your permission in writing.

This permission is called "consent." Your consent is voluntary and may be revoked at any time. The EI system will ensure your questions about any activity have been answered before you give your consent. Please ask your service coordinator or anyone else working with you in EI any questions you have. Prior written notice and consent applies to

- developmental screenings,
- child evaluations,
- child and family assessments,
- determination of ineligibility,
- and beginning or changing services on your Individualized Family Service Plan (IFSP).

In addition, you will receive prior written notice whenever a service included on your IFSP is ended or you exit from EI.

Some situations will not involve a prior written notice, but your consent is still required before the EI system completes certain actions. The EI system must receive your consent before

- sharing information about your family outside of the EI system, including to your local school district or pediatrician;
- holding a transition planning conference;
- or using your public or private insurance to pay for EI services.

It is important to know that an evaluation or child assessment is required before you may be served by the EI system. If you do not consent to an evaluation or child assessment, your child will not be able to be served by the EI system.

EI Records and Your Privacy

Because the EI system will receive a lot of information about you and your child, you have rights associated with the records maintained by the EI system. These records include information about evaluations and assessments, medical information related to your child's eligibility for EI, services on your IFSP, copies or originals of the EI forms you have filled out and signed, and documentation of communications between you and your EI providers. All of this information is part of your child's EI record.

You have many rights related to your family's EI records. These include the right to

- request copies of your child's EI records,
- inspect and review your child's EI records within 10 calendar days of your request;
- have a representative inspect and review your child's EI records;
- receive explanations and interpretations of your child's EI records;
- have a list of the types and locations of EI records collected, maintained, or used;
- request that the EI service provider amend your child's EI record;
- and receive a due process hearing if the provider refuses to amend your child's EI record.

You will receive at no cost either an electronic or paper copy of the evaluation or assessment of your child, the family-directed assessment, and the IFSP plan within 10 calendar days after each IFSP meeting. You will not be charged a fee to search for or retrieve your EI records; however, your provider may charge a fee for copies of EI records that are made for you as long as the fee does not effectively prevent you from exercising your right to inspect and review those records.

Because of the private nature of the information in your EI record, people working in the EI system who have access to that information must keep it private. Agencies that maintain EI records about your family must keep a list of the types and locations of the EI records they collect and maintain. People in the EI system who have access to your EI record can only disclose your personally identifiable information (PII) to other people working in the EI system and only to the extent necessary to provide EI services to your family. If you want your PII shared outside of the EI system, you must first provide your consent.

However, the Family Educational Rights and Privacy Act of 1974 (FERPA) allows your EI service provider to disclose PII without parent consent in some situations. These include

- any entity or person designated by the Comptroller General of the United States, the Attorney General of the United States, the Secretary of Education, or a state or local educational authority to conduct any audit, evaluation, compliance, or enforcement activity with respect to any federal legal requirements that relate to any federal or state-supported educational program;
- an agency caseworker or other representative of a state or local child welfare agency when that person is legally responsible for the care and protection of the child;
- a court in response to a lawfully issued subpoena or judicial order;
- or an appropriate official relating to a health or safety emergency.

When someone outside of the EI system has accessed your EI record, the agency who maintains the record must keep documentation of who accessed the record, when, and for what purpose.

Retention and Destruction of EI Records

Your EI service provider is required keep your child's EI records until your child's ninth birthday. The EI service provider may retain your child's EI records longer than this unless you ask that the records be destroyed after your child's ninth birthday.

EI may retain a permanent record of your child's name, date of birth, your contact information, names of EI service coordinators and providers who have worked with your family, and exit data (including year and age upon exiting, and any programs entered into after exiting) without time limitation.

For additional guidance on your rights regarding your child's EI records, contact the DODD at 614-466-6879 or ei@dodd.ohio.gov. For additional guidance regarding FERPA, contact the Family Compliance Office in the U.S. Department of Education at 202-260-3887.

Resolving Disputes

If you have a disagreement about something in EI, there are many ways to resolve it. The easiest and fastest way is to work with your local EI program through your EI service coordinator or the EI contract manager in your county to find a solution to the disagreement.

Your service coordinator's contact information is on this brochure and you can find information about your local EI program's leaders on the EI website: ohioearlyintervention.org.

If you prefer not to work through your local EI program, you can contact DODD's EI staff at 614-466-6879 or ei@dodd.ohio.gov.

You may also file a complaint with DODD and ask the department to investigate the complaint, go through mediation, or have a due process hearing. Your complaint must be signed and in writing. It must include a description of what has happened and which rules or rights have been violated.

Complaints should be sent to

Ohio Early Intervention

Ohio Department of Developmental Disabilities 30 East Broad St., 12th floor

Columbus, Ohio 43215

Investigation

If you want DODD to investigate your complaint, the department will request information from you and your EI provider, review all of the relevant information, and make a final written determination within 60 days about whether there has been

a violation of your rights or the EI rules. The final determination will include information about what DODD has done and will do to correct any problems.

Mediation

Mediation is voluntary on the part of both you and your EI provider. If you want to use mediation and your EI provider agrees to participate, DODD will provide a qualified and impartial mediator to oversee the process. DODD pays the cost of the mediator, and the mediation must be at places and times that are convenient for the participants.

Due Process Hearing

A due process hearing is a more formal process. You may hire an attorney to represent you, but this is not a requirement. In a due process hearing, an impartial due process hearing officer will review the complaint, listen to the participants, review additional information, and provide a written decision within 30 days of receiving the complaint. DODD pays the cost of the due process hearing officer, and the hearing must be at places and times that are convenient for the participants.

Visit ohioearlyintervention.org/federal-and-state-regulations to learn more about IDEA and the state rules for Ohio's EI program.

My EI service coordinator: _____

Contact info: _____



Department of
Developmental Disabilities



Section 4: Our Child and Family Outcomes

This section identifies a child or family outcome based on what you want to accomplish, as well as the steps to meet your outcome. The outcome is based on information the team learned from the child and family assessment(s). Each IFSP outcome must be written in words easily understandable by everyone and in a way that clearly relates to what you stated as your priorities during the family-directed assessment (if conducted).

Outcome number	This child outcome addresses	<input type="checkbox"/> Developing positive social relationships	<input type="checkbox"/> Acquiring and using new skills and knowledge	<input type="checkbox"/> Taking action to meet own needs	<input type="checkbox"/> Outcome addresses family participation, family well-being, or information	<input type="checkbox"/> Outcome addresses transition
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Given what you've shared about your family's daily life, what would you like to see happen within your family's activities as a result of EI supports and services. How will we know when it is accomplished?

What's happening now?

Strategies: What steps and activities, including who and when, will help us meet the IFSP outcome?

Supports that we currently have available to help us with this outcome (formal and natural, including services not provided by EI).

Review of this outcome: A review of the IFSP must occur at least every six months, but may occur sooner. You may request an IFSP review at any time.

Result of review

<input type="checkbox"/> Outcome met	<input type="checkbox"/> Progress made; continue with current outcome, strategies and services	<input type="checkbox"/> Continue outcome and revise strategies and/or services	<input type="checkbox"/> Revise outcome, strategies, and services	<input type="checkbox"/> No longer parent priority
_____	_____	_____	_____	_____
Date	Date(s)	Date(s)	Date(s)	Date

New concerns or events that affect this outcome

Progress made toward meeting this outcome

Early Intervention services: Using all of the information available, the IFSP team has identified the following EI services to support our outcomes.

El service type	Method	Location	How often	Session length	Provider agency	Funding source	Projected start date	Projected end date	Outcome number(s)

Method: Direct (D); Joint (J) • In-person: (P); Technology (T)

Location: Home (H); Community (C); Other (O)

For each EI service that will not be provided in our child's natural environment, an explanation of why the outcome(s) cannot be achieved in a natural environment is provided.

List steps that the service coordinator and family will take, including projected date, for moving the service into a natural environment.

List any EI service that is needed, but not yet coordinated.

Steps that the service coordinator will take to coordinate the needed EI service(s).

Timely receipt of services (TRS) due by _____

Section 5: Consent for EI Services

I have been fully informed and understand all information related to the provision of Early Intervention services described in this IFSP. I have a copy of the Ohio Early Intervention Parent Rights brochure and understand my rights for giving consent. I understand that I have dispute resolution options if I have an Early Intervention complaint. I have received prior written notice about the proposed Early Intervention services and agree to the provision of these Early Intervention services described in this IFSP.

Parent signature

Parent name

Date

Parent signature

Parent name

Date

We acknowledge that the outcomes reflect the family's priorities and concerns and the EI services support those outcomes. We agree to carry out the plan in a manner that supports the family's ability to help their child participate in and learn from their everyday activities whenever possible.

Signature	Name, role, and agency	Participation method	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Participation method: In-person (P); Technology (T); Written (W)

IFSP Overflow (1)

When it is not possible to provide all relevant information within the allotted space on the previous pages, type see "See attached" in that section and write the information for that specific section on this page. Be sure to include the IFSP section reference.

IFSP Overflow (2)

When it is not possible to provide all relevant information within the allotted space on the previous pages, type see "See attached" in that section and write the information for that specific section on this page. Be sure to include the IFSP section reference.

IFSP Overflow (3)

When it is not possible to provide all relevant information within the allotted space on the previous pages, type see "See attached" in that section and write the information for that specific section on this page. Be sure to include the IFSP section reference.

IFSP Overflow (4)

When it is not possible to provide all relevant information within the allotted space on the previous pages, type see "See attached" in that section and write the information for that specific section on this page. Be sure to include the IFSP section reference.

Form EI-11

Today's date _____ Child's name _____ Child's DOB _____

Parent name(s) _____ EIDS number _____

Prior Written Notice of Proposed Change to Services

When any Ohio Early Intervention (EI) service provider recommends or proposes to begin (initiate) or change the EI services that will be provided to your family and child, we must give you prior written notice at least ten calendar days before beginning or changing that EI service.

Ohio Early Intervention is proposing to begin change one or more EI service(s) for your child and your family.

Details about proposed change

Reason for proposed change

Proposed date of change (no fewer than 10 days from today's date)

Please contact me as soon as possible if you have any questions about this action.

EI service provider name

EI service provider contact information

As the parent, you have dispute resolution options available. A copy of your Ohio Early Intervention Parent Rights brochure is enclosed. If you have any questions, please contact your EI service coordinator at:

EI service coordinator name

EI service coordinator contact information

Waiver of Timeline (optional)

I understand and agree to waive my right to receive written notice 10 calendar days prior to changing or beginning proposed activity.

Initials of parent(s)

Date

On (date) (name/role)
provided a copy of this notice and consent form to the parent(s)
 in-person via mail via email.

If this form is completed by a person other than the EI service coordinator, the EI provider must send a copy to the EI service coordinator within five calendar days of providing notice to the parent.

Form EI-07

Today's date _____ Child's name _____ Child's DOB _____
Parent name(s) _____ EIDS number _____

Service coordinator use only
On _____ (date), a copy of this consent was provided to the parent(s)
 in-person via mail via email

Consents for Transition

School District and Ohio Department of Education (ODE) Notification: Ohio Early Intervention (EI) seeks your consent to share your child's name and your contact information with the Ohio school district responsible for your child's education and with the ODE. This information helps school districts plan for preschool special education programs for the upcoming year.

My service coordinator has informed me of all information related to sharing my child's name and date of birth and my contact information with the school district and ODE and explained my parent rights, including giving consent. I have a copy of the Ohio Early Intervention (EI) Parent Rights brochure. I understand I have dispute resolution options if I have an EI complaint.

- I understand and consent to sharing my child's name and date of birth and my contact information with the school district and ODE.
- I do not consent to sharing my child's name and date of birth and my contact information with the school district and ODE.

Parent name(s) _____ Parent signature(s) _____ Date _____

Transition Planning Conference (TPC): If your child may be eligible for preschool services under part B of IDEA, Ohio Early Intervention (EI) seeks your consent to schedule a transition planning conference with a representative from your school district who will explain the process for determining part B preschool eligibility. This conference must occur at least 90 days, but no sooner than 9 months before your child's 3rd birthday.

If your child is determined not to be potentially eligible for preschool services under part B of IDEA, EI seeks your consent to schedule a transition planning conference with other community service providers you and your team have identified.

My service coordinator has informed me of all information related to the transition planning conference (TPC) and explained my parent rights, including giving consent. I have a copy of the Ohio Early Intervention (EI) Parent Rights brochure. I understand I have dispute resolution options if I have an EI complaint.

- I understand and give consent to scheduling a TPC.
- I do not give consent to a TPC.

Parent name(s) _____ Parent signature(s) _____ Date _____

Form EI-06

Service coordinator use only Date received from other EI qualified personnel, if applicable <input type="text"/>
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Today's date _____	Child's name _____	Child's DOB _____
Parent name(s) _____	EIDS number _____	

Consent for Release of Records and Consent for Release and/or Exchange of Information

As a parent, you have the right to give permission or not give permission for the release of your child's Early Intervention (EI) records to other persons or agencies who are not part of the EI system. A copy of this form will be released to the agencies or persons when you give permission to release records. If you do not want these agencies or persons to be aware of your permissions for other agencies, please request the use of multiple release of record forms. As a parent, you have access to any part of your child's EI record. An EI record means all records regarding your child that are collected, maintained, or used under the federal law, Part C of the Individuals with Disabilities Education Act.

Consent for Release of Records

I give consent for the following EI records to be released

<input type="checkbox"/> Individualized Family Service Plan (IFSP)	<input type="checkbox"/> Progress notes
<input type="checkbox"/> Results of evaluation/assessments	<input type="checkbox"/> Other (specify) _____

To the following agencies or persons

Purpose of the release of records

This consent is valid

<input type="checkbox"/> Until my child's third birthday on	<input type="text"/>		
<input type="checkbox"/> For one year. Specify end date	<input type="text"/>		
<input type="checkbox"/> From	<input type="text"/>	to	<input type="text"/>

My service coordinator or EI provider has informed me of all information related to release of records and explained my parent rights, including giving consent. I have a copy of the Ohio Early Intervention (EI) Parent Rights brochure. I understand I have dispute resolution options if I have an EI complaint. I understand and agree to the release of my child's records.

Parent name(s) _____	Parent signature(s) _____	Date _____
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Consent for Release and/or Exchange of Information

I give consent for the release and/or exchange of the following information orally, in writing, or electronically

Between Early Intervention and the following agencies or persons

Purpose of the release or exchange of information

This consent is valid

Until my child's third birthday on

For one year. Specify end date

From to

I have been fully informed of all information related the release and/or exchange of information about my child or my child's Early Intervention records. I have a copy of the Ohio Early Intervention Parent Rights brochure and understand my rights for giving consent. I understand that I have dispute resolution options if I have an Early Intervention complaint.

Parent name(s)

Parent signature(s)

Date