Children’s Issues Series: Early Intervention

What is Early Intervention?

Early Intervention (EI) in MA is a statewide, integrated, development service available to families of eligible infants and toddlers. Family-centered services are provided under federal and state law to help children progress in their development and to enhance a family’s ability to meet the needs of their child. 1 Part C of the federal Individuals with Disabilities Education Improvement Act of 2004 (IDEA) enumerates the minimum requirements for establishing the statewide system of programs providing early intervention services. 2 The Massachusetts Department of Public Health is designated as the lead agency responsible for implementing the comprehensive statewide system of services, certifying programs, coordinating funding sources, and for carrying out monitoring and technical assistance activities. 3

Under State law early intervention services are available to children and families of children, who are between birth and three years of age and who have disabilities or identified delays, or who are at risk for developmental delays due to biological, established or environmental factors. 4

Part C of the IDEA and the MA Department of Public Health’s Operational Standards include specific procedural safeguards to ensure that the rights of parents and their children are protected. 5

Who is eligible for early intervention services?

For children between birth and three years of age who live in Massachusetts:

I. A child is considered eligible for Early Intervention when there is an established risk or established developmental delay:

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3 M.G.L. c. 111G, § 2

4 M.G.L. c. 111G, §§ 1.2; OPERATIONAL STANDARDS, supra note 1, at 1.

5 34 C.F.R. §§ 303.400-.425; DPH Early Intervention Services Operational Standards, Appendix B: Massachusetts Early Intervention System Procedural Safeguards and Due Process Standards.
The child has a diagnosed medical condition with a relatively well-known expectation for delay (e.g. neurological, metabolic or genetic disorder; chromosomal anomaly; medical or other disabling condition with documented expectation of developmental delay; vision loss not corrected by medical intervention or prosthesis; or permanent hearing loss of any degree).

In one or more areas of development, including cognitive, physical, or communication, social/emotional, or adaptive development, the child exhibits a delay of 30%, as measured by an approved instrument yielding age equivalent scores, or

In one or more areas of development, including cognitive, physical, or communication, social/emotional, or adaptive development, the child’s development is a 1.5 standard deviation below the norm, as measured by an approved instrument yielding standard deviation scores, or

The child has questionable quality of developmental skills and functioning based on the informed clinical opinion of a multi-disciplinary team.

II. A child is considered eligible for Early Intervention when there is a risk for developmental delays or disorders due to four or more of the following risk factors being present:

Child Characteristics:
- Birth weight less than 2lbs, 10 ½ ounces
- Gestational age less than 32 weeks
- NICU admission more than 5 days
- Apgar less than 5 @ 5 minutes
- Total hospital stay more than 25 days in 6 months
- Diagnosis for Intrauterine Growth Retardation or Small for Gestational Age
- Weight for age or height below 5th percentile; weight for age dropped more than two major centiles in 3 months (child under 1 years old) or in 6 months (child 1-3 years old)
- Chronic feeding difficulties
- Insecure attachment/interactional difficulties
- Blood lead levels measured at 15 mg/dl
- Suspected Central Nervous System abnormality
- Multiple trauma or losses

Family Characteristics
- Mother’s age at child’s birth less than 17 or she has a history of 3 or more births before she’s 20 years old
- Mother’s education is less than or equal to 10 years
- Parental chronic illness or disability affecting care-giving ability
- Family lacking social supports

6 OPERATIONAL STANDARDS, supra note 1, at 14-15 (emphasis added). For more information about whether a child fits in to one of these categories see http://massfamilyties.org/ei/eiwelcome.php and scroll down to “Eligibility.”
Inadequate food, clothing or shelter (including homelessness)
Open or confirmed protective service investigation, including child is in foster care
Substance abuse in the home
Domestic violence in the home

The EI program staff will determine whether the challenges faced by a specific family are such that they think the child may have a developmental delay in the future.

**How does a family become involved with Early Intervention?**

Anyone can make a referral, including a family member, doctor, friend, care-giver, teacher or legal advocate. If someone other than the family makes the referral, the parent will be required to provide written consent in order for an initial intake to proceed.

Early intervention services do not require a prescription. The person making the referral will want to provide the program with any relevant and important information, including:

- Child’s name
- Parent’s name, address, and phone number (work and home)
- Child’s date of birth
- Primary Pediatrician and other physicians/agencies/services involved
- Reason for referral
- Family’s insurance coverage

Within 45 days after a referral is made, an EI team will then conduct a developmental assessment with the child to determine eligibility. This assessment focuses on areas of child development including cognitive, language, motor, social, emotional, behavioral, and self-help skills. The assessment can take place wherever is most convenient for the family, including at the child’s home or daycare, or at the development center.

If the child is determined eligible and the family agrees to proceed, an Individualized Family Service Plan (IFSP) will be developed based on the individual needs of the child and family. Early intervention staff, parents and other qualified personnel make up the IFSP Team that collaboratively determine the services that will meet the child’s outcomes and family’s needs. If the family agrees to the IFSP, they will sign it and begin to receive services from the EI program.

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7 Id. at 15-19 (emphasis added).
8 Id. at 26.
9 34 C.F.R. § 303.404; DPH Early Intervention Services Operational Standards, Appendix B: Massachusetts Early Intervention System Procedural Safeguards and Due Process Standards, Sec. VI.
10 FAMILY TIES OF MASSACHUSETTS, http://www.massfamilyties.org/ (follow “Early Intervention” hyperlink; then follow “Welcome to EI” hyperlink; then scroll down to “Referral”).
11 34 C.F.R. § 303.321(e)(2); OPERATIONAL STANDARDS, supra note 1, at 26.
12 34 C.F.R. § 303.322(c).
13 34 C.F.R. § 303.342
14 34 C.F.R. § 303.343(a)(1).
15 34 C.F.R. § 303.342(e).
What is an Individualized Family Service Plan?

An Individualized Family Service Plan (IFSP) is the principal written document containing the agreed upon early intervention services necessary to meet the individual needs of an eligible child and family. An IFSP is developed collaboratively by the parent(s) of the eligible child, the designated service coordinator, and where appropriate, other persons directly involved in conducting evaluations or assessments, and personnel involved in providing services to the child or family.

Before EI services are provided to a child, the Massachusetts Department of Public Health must obtain parental written informed consent. As such, all contents of the IFSP must be fully explained to the child’s family. Services for which the family provides written consent must be provided to the child; however, services for which the family does not provide written consent must not be provided. A family may revoke its consent after first providing it without jeopardizing the provision of any other agreed upon services. Finally, with written parental consent, an IFSP may be modified at any time.

What types of services may be provided?

In Massachusetts, children and their families receive individualized services designed to meet the developmental needs of the eligible child and needs of the family related to enhancing the child’s development. Services may include family training and counseling, nursing services, nutritional services, occupational therapy, physical therapy, psychological services, speech language pathology, special instruction provided through home visits, center-based individual visits, community child groups, EI only child groups, parent groups, and services from specialty providers.

Services are provided by an EI team that may include the child’s family and professionals from among the following disciplines: Developmental Specialist, Physical Therapy, Speech-Language Pathology, Psychology, Occupational Therapy, Social Work, Nursing and other specialty service providers. The child’s medical provider is also a valuable member of the team.

Services are provided in a natural setting for the child, which is determined during the IFSP process and with consideration given to what is most convenient for the family. This could be the child's home, daycare center, family childcare homes, and other community settings. Whenever transportation to early

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16 OPERATIONAL STANDARDS, supra note 1, at 29; 34 C.F.R. § 303.344(d).
17 34 C.F.R. § 303.343(a)(1)
18 Id. at 30; 34 C.F.R. § 303.404.
19 34 C.F.R. § 303.342(e).
20 34 C.F.R. § 303.342(e).
22 20 U.S.C. § 1432(4); 34 C.F.R. § 303.12
23 OPERATIONAL STANDARDS, supra note 1, at 34; 34 C.F.R. § 303.12(d).
24 Id.; 20 U.S.C. § 1436(d)(5); 34 C.F.R. § 303.12; §300.344(d)(ii).
25 OPERATIONAL STANDARDS, supra note 1, at 34.
intervention services is required, the Massachusetts Department of Public Health shall provide transportation with respect to those services.26

Is Early Intervention free?

Per federal law, fees for early intervention services are determined on a sliding scale based on family size and income.27 There are no fees for families with an income less than 300% of the Federal Poverty Line (FPL). Additionally, a child in foster care or a child who has any form of MassHealth will not pay a fee.28 Families with income above 300% of the FPL can still receive services, but may have to pay a fee.29

For more information, see http://www.massresources.org/early-intervention.html and scroll down to “How Much Will it Cost?”

How are parents involved?

Early Intervention is a family-centered system.30 A unique aspect of the Early Intervention system is its focus on the family rather than the child in isolation. As described above, both Federal and State laws require that a child’s needs be assessed in the context of his or her family’s strengths and needs. Parents are encouraged but not required to participate in services. If family circumstances preclude participation, this is documented in the child's record and alternative communication strategies are developed. However, parents are equal members of the IFSP team and only with their written consent will EI services be provided through the IFSP. Parents have significant procedural safeguards that help to ensure that the services their eligible child and family receive are based on complete information and that their privacy is protected.

How do I know where to refer a family who might be interested in EI services?

A family should be referred to a program located in their city or town. Every city and town in Massachusetts has at least one EI program for its eligible residents. Anyone can call 1-800-905-8437 and ask for a listing of certified EI Programs that serve a specific city or town or visit http://massfamilyties.org/ei/eicity to view programs by location.

26 M.G.L. c. 11G § 6; 34 C.F.R. § 303.12(d)(15).
28 WHO PAYS, supra note 15.
29 Id.
30 OPERATIONAL STANDARDS, supra note 1, at 38; .
If there is more than one program located in a family’s catchment area, the family may choose a specific program based on neighborhood or other factors. A family can only enroll with one EI program at a time.

MA DPH also contracts for specialty services for certain children with low incidence disabilities who must first be enrolled in a certified Early Intervention program to be eligible for these services.

**What happens when the child turns three?**

The Early Intervention program will discharge an eligible child from early intervention services when the child reaches his or her third birthday. When a child is two years and six months old, the family’s EI program provider should ensure that a developmental specialist is assigned to begin to work with the family to determine whether the child needs to transition to an Early Childhood (EC) education program for children in need of special education when he or she turns three. If it is determined that the child is potentially eligible for special education services through EC, a transitional plan must be developed by the time the child turns two years and nine months, and the public school district where the child resides must be notified that the child will shortly reach the age of eligibility for preschool special education.

The school district where the child lives is obligated to convene an IEP team meeting when a child who had previously received IDEA Part C services becomes eligible for Part B special education services at age 3. The federal law further requires that an invitation to the initial IEP meeting for a child previously served under Part C of IDEA shall, at the request of the parents, be sent to the EI service coordinator or other representatives of the EI system to assist with the smooth transition of services.

Family TIES is the statewide information, resource, referral and support network for families. Family TIES can be reached at 1-800-905-TIES or 8437. [http://massfamilyties.org/about_us/staff.php](http://massfamilyties.org/about_us/staff.php).

**This Q&A was compiled with reference to:**

[http://www.mass.gov/dph/earlyintervention](http://www.mass.gov/dph/earlyintervention)

[http://www.massfamilyties.org](http://www.massfamilyties.org)


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31 Id. at 20.

32 Id. at 36.

33 34 CFR 300.101.

34 34 CFR 300.321 (f).