Building the Legacy for Our Youngest Children with Disabilities:

Module 5

Procedures for IFSP Development, Review, and Evaluation



Produced by: National Dissemination Center for Children with Disabilities

A training curriculum on Part C of IDEA 2004

September 2014

National Dissemination Center for Children with Disabilities

Copyright free. You're welcome to share this module far and wide. Please do give credit to its producer, the National Dissemination Center for Children with Disabilities.

Suggested citation:

Suggested citation: Küpper, L. (Ed.). (2014, September). Procedures for IFSP development, review, and evaluation (Module 5). *Building the legacy for our youngest children with disabilities: A training curriculum on Part C of IDEA 2004*. Washington, DC: National Dissemination Center for Children with Disabilities.

Available online at: http://www.parentcenterhub.org/repository/partc-module5/



This training curriculum is designed and produced by NICHCY, the National Dissemination Center for Children with Disabilities, at the request of our funder, the Office of Special Education Programs (OSEP) at the U.S. Department of Education.

NICHCY Lead: Lisa Küpper

OSEP Lead: Rhonda Spence

OGC Lead: Kala Surprenant

Funding for NICHCY officially ended on September 30, 2014. All training materials in this Part C training curriculum are now available at the website of the Center for Parent Information and Resources, at:

http://www.parentcenterhub.org/repository/legacy-partc/

This module is part of a training curriculum on the Part C regulations of the Individuals with Disabilities Education Act, as amended in 2004. The curriculum provides a detailed discussion of the Part C regulations as published in the *Federal Register* on September 28, 2011.¹

The curriculum is entitled Building the Legacy for Our Youngest Children with Disabilities. This module is entitled Procedures for IFSP Development, Review, and Evaluation and is the 5th module in the curriculum.

Please be aware that the information in this module is <u>not</u> a substitute for the requirements reflected in the IDEA statute and Part C regulations.

Early Intervention and IDEA

Thanks to a powerful and important federal law called the Individuals with Disabilities Education Act, or IDEA, 336,895 eligible infants and toddlers birth through age 2 received early intervention services in 2011 under Part C of IDEA.²

Early intervention services are concerned with all the basic and brand-new developmental skills that babies typically develop during the first three years of life, such as:

- physical (reaching, rolling, crawling, and walking);
- cognitive (thinking, learning, solving problems);
- communication (talking, listening, understanding);

How the Trainer's Guide is Organized

This trainer's guide is organized by slide. A thumbnail picture of each slide is presented, along with brief instructions as to how the slide operates. This is followed by a discussion intended to provide trainers with background information about what's on the slide. Any or all of this information might be appropriate to share with an audience, but that decision is left up to trainers.

- social/emotional (playing, feeling secure and happy); or
- adaptive behavior (eating, dressing).³

Early intervention services are designed to meet the needs of eligible infants and toddlers who have a *developmental delay* or *disability*. Services may also address the needs and priorities of each child's family, to help family members understand the special needs of the child and how to enhance his or her development.⁴

> To say that Part C of IDEA has a huge impact on early childhood policy and practice is to understate the reality. IDEA's Part C regulations provide States with extensive guidelines and requirements in how to design and implement early intervention



system for infants and toddlers with disabilities and their families, including federal fiscal support via formula grants to States exceeding \$438.5 million annually.⁵

Introduction to the IFSP Process

For each infant or toddler with a disability who is eligible to receive services under the Part C early intervention program, the lead agency responsible for establishing and implementing the program must ensure the development, review, and implementation of what is known as an **individualized family service plan (IFSP)**. The IFSP is developed by a multidisciplinary team, which includes the parent, and contains specific information about the infant or toddler, his or



Trainer's Note

Throughout this training module, all references in the discussion section for a slide are provided at the *end* of that slide's discussion. her needs and strengths, developmental and learning goals for the child, and much more, as you'll see in this training module.

The process of developing this vital document is the subject of many of IDEA's provisions and, as such, is of great interest and importance to educators, administrators, and families alike. It also presents trainers with a primary topic to address across the broadest of audiences.

This Module in the Part C Training Curriculum

We have divided training on the IFSP (both the *document* and the *process*) into several parts within this curriculum—covering the basics of the IFSP process and document and IFSP "special" topics. There are three modules under the umbrella topic of **Theme D**, **Individualized Family Service Plan**, as follows:

- *Module 5: Procedures for the Development, Review and Evaluation of the IFSP (this* module) | Describes the procedures set forth in the Part C regulations regarding how the IFSP is developed, reviewed, and evaluated, including who is required to participate in developing a child's IFSP.
- *Module 6: Content of the IFSP* | Focuses on provisions for what type of information an IFSP must contain.
- *Module 7: Meetings of the IFSP Team* | Describes what is required with respect to meetings of the IFSP Team.

For Whom Is This Module Designed?

This module is primarily intended for trainers to use with audiences who are newcomers to the law, the early intervention process, and especially requirements associated with the IFSP. This includes:

- parents and family members of an infant or toddler who has, or is suspected to have, a developmental delay or a disability;
- early childhood candidates who are learning about Part C early intervention programs for our youngest children with disabilities and the central role that the IFSP plays in providing services to children and families based upon their developmental and functional needs;
- new staff, advocates, policy makers, administrators, and early childhood specialists who will be working with either the Part C system or with infants and toddlers who have disabilities and their families, but who have limited knowledge of what the law requires in terms of developing, reviewing, and evaluating children's IFSPs.

All of these files can be downloaded free of charge from the website of the Center for Parent Information and Resources (CPIR), at: http://www.parentcenterhub.org/repository/partc-module5/

• Slideshow. We are pleased to provide a fourcolor slideshow (produced in PowerPoint®) around which trainers can frame their presentations and training on the IFSP.

Important note: You do NOT need the PowerPoint[®] software to use the slide show. It's set to display, regardless, because the PowerPoint Viewer[®] is included. (You may be asked to agree to Viewer's licensing terms when you first open the slideshow.) The presentation is also saved as a "show"—which means it will launch when you open it.

- Trainer's Guide Discussion. The trainer's guide describes how the slides operate and explains the content of each slide, including relevant requirements of the statute passed by Congress in December 2004 and the final regulations for Part C published in September 2011. The trainer's guide is available in PDF and Word® formats.
- **Speaker Notes.** Provided as a Word file, the Speaker Notes show thumbnail pictures of all slides in the presentation, with lines next to each for you to annotate your presentation, if you

wish. You can also share the Speaker Notes with participants.

- Handouts for Participants. There's only one handout for this training module at that is:
 - Handout 8 | The IFSP (verbatim Part C regulations)
- Activity Sheets. There are two *optional* activity sheets for this module:
 - —Activity 7 | A Quick Look at the Content of an IFSP
 - -Activity 8 | Case Study: Extended Family Participation in the IFSP Meeting

PDF or Word format?

For trainers, we recommend using the PDF version of trainer's guide, because it's easier on the eyes. For participants in training sessions, we recommend the PDF version of the handout, because it, too, is easier on the eyes.

Word files are provided for accessibility purposes and to make it easy to copy and paste content into other software.

References & Footnotes

- ¹ U.S. Department of Education. (2011, September 28). Early intervention program for infants and toddlers with disabilities: Rules and regulations. *Federal Register*, 76(188), 60140-60309. Washington, DC: Office of Special Education and Rehabilitative Services, Department of Education. Online at: http://www.gpo.gov/fdsys/pkg/FR-2011-09-28/pdf/2011-22783.pdf
- ² Technical Assistance Coordination Center. (2012). *Historical state-level IDEA data files: Part C child count 2011*. Retrieved November 11, 2013, from: http://uploads.tadnet.org/centers/97/assets/2414/download
- ³ Center for Parent Information and Resources. (2014, March). *Overview of early intervention*. Washington, DC: NICHCY. Online at: http://www.parentcenterhub.org/repository/ei-overview/
- ⁴ §303.13(b)(3) of the Part C regulations.
- ⁵ U.S. Department of Education. (2011). *Department of Education fiscal year 2011 Congressional action*. Washington, DC: Author. Online at: http://www2.ed.gov/about/overview/budget/budget11/11action.pdf



Looking for IDEA 2004?

Visit the Center for Parent Information and Resources' website, where you can download copies of:

- IDEA's statute (the law passed by Congress in 2004)
- Part C regulations (published by the U.S. Department of Education on September 28, 2011)
- Part B regulations (published by the U.S. Department of Education on August 14, 2006)

Find all at: http://www.parentcenterhub.org/repository/idea-copies/

Finding Specific Sections of the Regulations: 34 CFR

As you read the explanations about the Part C regulations, you will find references to specific sections, such as §303.21. (The symbol § means "Section.") These references can be used to locate the precise sections in the Part C regulations that address the issue being discussed. In most instances, we've also provided the verbatim text of the Part C regulations so that you don't have to go looking for them.

The Part C regulations are codified in Title 34 of the *Code of Federal Regulations*. This is more commonly referred to as 34 CFR or 34 C.F.R. It's not unusual to see references to specific sections of IDEA's regulations include this—such as 34 CFR §303.21, which is where you'd find Part C's definition of "infant or toddler with a disability." We have omitted the 34 CFR in this training curriculum for ease of reading.

Citing the Regulations in This Training Curriculum

You'll be seeing a lot of citations in this module—and all the other modules, too!— that look like this: 76 Fed. Reg. at 60250

This means that whatever is being quoted may be found in the *Federal Register* published on September 28, 2011—Volume 76, Number 188, to be precise. The number at the end of the citation (in our example, 60250) refers to the page number on which the quotation appears in that volume. Where can you find Volume 76 of the *Federal Register*? At this address:

http://www.gpo.gov/fdsys/pkg/FR-2011-09-28/pdf/2011-22783.pdf



Solution of your own choosing or an opening activity, as best fits the needs and prior knowledge of your participants.

Suggestions for Quick Opening Activities

Any of the following suggestions would take about 1-2 minutes. You can expand each to 5 minutes by having participants then call out what their "partners" told them and jotting these down on a flipchart.

Suggestion 1 | Ask participants to introduce themselves to the person seated next to (or behind) them and exchange two pieces of information: (a) one thing they already know about the topic (the IFSP), and (b) one thing they hope to learn about the topic. **Suggestion 2** | Ask participants to stand up and politely bow to two or three people nearby, asking them why they are here today, taking this training on the IFSP, and what they hope to take away from it.

Suggestion 3 | Ask participants to shake hands with one neighbor and tell that person how this topic relates to their personal or professional life.



CLICK AGAIN to advance to next slide.

See discussion on next page -

Solution of three modules under the umbrella of Theme D, which covers IDEA's requirements regarding the Individualized Family Service Plan (IFSP). Together, the three modules in Theme D largely reflect how the Part C regulations on the IFSP are organized.

How the Part C Regulations Are Organized

The primary requirements for IFSPs can be found at \$303.340 through \$303.346. The sections are as follows:

303.340 | Individualized family service plan—general

303.342 | Procedures for IFSP development, review, and evaluation

303.343 | IFSP Team meeting and periodic review

303.344 | Content of an IFSP

303.345 | Interim IFSPs—provision of services before evaluations and assessments are completed

303.346 | Responsibility and accountability

The verbatim regulations for each of these sections are provided for participants on **Handout** 8. The three training modules on the IFSP won't cover all IFSP requirements, but as you can see, they *will* focus on content that's crucial for most audiences to know about the IFSP, including:

I Click

- what IDEA generally requires (Module 5),
- what the regulations specify as to IFSP procedures (Module 5),
- the IFSP team membership (Module 5),
- the content that's required in an IFSP (Module 6), and
- what happens at IFSP meetings (Module 7).

The current module (Module 5) is meant to be a general introduction to the IFSP and the team that develops it, with additional, important details provided in the subsequent modules.

Slide 3 Agenda In this module you'll learn: Definition and purpose of the IFSP Slide loads completely. No clicks • Who develops the IFSP are necessary except to advance to the • Timelines for IFSP next slide development and review • Procedures the lead agency must follow • Requirements regarding before scheduling an IFSP the use of the family's meeting native language

CLICK to advance to next slide.

Slide 3 serves as an advanced organizer for the audience, letting participants know what they can expect to learn in the training session.

You don't need to say very much about the slide—it's rather self-explanatory as to the upcoming training content. If you wish, you might encourage participant engagement by probing their prior knowledge of this content, asking them questions such as:

- What do you imagine the purpose of an IFSP is in early intervention?
- Any guesses as to what might be included in a *definition* of the IFSP?
- What type of people do you think should be involved in writing a child's IFSP?

- What timeline seems reasonable to you for having a child's IFSP developed after he or she is found eligible for early intervention services?
- Anyone know what a "lead agency" is? Who's the lead agency in *this* state?
- What kind of things might a lead agency have to do before it schedules an IFSP meeting to develop a child's IFSP? What makes sense to you?
- This last bullet, about using the family's native language. Why might that be important when we're talking about developing IFSPs?



These are GENERAL purposes, of course, not defined per se in law but useful as a quick way to

(and his or her family)

program will coordinate & provide for the child

on next page

"grasp" what the IFSP is all about. This basic understanding provides a framework from which to build deeper knowledge, adding the many details there are to know about IFSPs—why they're needed, who's involved in developing them, and what information IDEA requires they contain.

Needs First!

It's interesting to note that, for each and every child receiving early intervention under Part C, the reasonable goals that are set and the services that will be coordinated and provided <u>are based on the</u> <u>needs and developmental status</u> of that individual child. With parental consent, information about the child's needs and development is gathered in the evaluation and assessment process, which seeks to discover and document the child's current status in five developmental areas:

- physical development (including vision, hearing, and health status);
- cognitive development,

- communication development;
- social or emotional development; and
- adaptive development.

The team who writes the child's IFSP (including the parents) documents in the IFSP the child's present levels of functioning in each of these developmental areas. The team can then look at the child's needs, set reasonable goals for the child's learning and development, and state in the IFSP what early intervention services will be provided to help the child reach those goals.

Needs-Goals-Services are logically interconnected.

Space for Notes

Slide 5 Who Develops the IFSP?

Who Develops the IFSP?

The IFSP Team! The team that develops the initial & annual IFSP



* If requested by the parent

• the parent(s) of the child

- other family members * (if feasible)
- an advocate or person outside the family *
- the service coordinator
- person(s) directly involved in conducting the evaluations & assessments
- those who will be providing EI services to the child or family (as appropriate)

Slide loads completely. No clicks are necessary except to advance to the next slide.

Pertinent Handout:

• Handout 8 | The IFSP (optional)

This slide is designed to provide the audience with one of the "basics" of the IFSP, which certainly include the membership of the team that develops this very important document. Because the slide merely lists the team membership, you can either present the IFSP Team in brief and move on, or go into a bit of detail (provided below), as fits your training schedule and future training plans with this audience.

Quick-Start Activity

To frame the content you're about to present and connect participants with whatever prior experience they have with IFSP Teams, ask participants a series of questions that they can answer either by raising their hand to indicate "yes" or by calling out their answers. Questions might include:

• Have you ever served on an IFSP Team? As a parent? As a professional?

• Those of you who haven't served on an IFSP Team, imagine yourself as one of the members listed on the slide. Which one would you be (or want to be)? Why?

CLICK to advance to next slide.

- Give one reason you need to know who's on the IFSP Team.
- Those of you who HAVE served on the IFSP Team: What one word would you use to describe the experience?

Keep this back-and-forth short, no more than 1-2 minutes. The quick pace of the exchange energizes attention, even as it moves participants into the "personal" zone where they can connect more readily with the information about to be presented.

Where in the Regulations?

The membership of the IFSP Team is listed in the Part C regulations at §303.343, on Handout 8, and in the box to the right.

A Quick Look at the Team

There are several points you can make in brief about the membership of the IFSP Team, as required by the Part C regulations.

Parents are critical members of the IFSP Team | Of course they are. Parents are pivotal team members, in fact, because the IFSP is being written for and about their infant or toddler. Parents have invaluable perspectives to offer on their child's growth and development, areas of strength and need, and overall medical and personal history. They can also contribute substantively to IFSP development by sharing with the other team members the priorities, resources, and concerns of the family unit.

Family members can be invited to participate on the Team | The regulations clearly recognize the deep involvement and commitment that a child's family members can bring to supporting his or her well-being. Family members can and often do play a variety of roles in enhancing a child's development. That is why, when requested by the parent of the child and when feasible, family members may be included on the IFSP Team.

Other participants, at the request of the parent | Parents of the child may also request that an advocate or another person from outside the family unit be included on the IFSP Team. An advocate typically helps the parent to articulate his or her perspectives and concerns, while a person from outside the family might contribute professional or personal knowledge about the child's needs and strengths or the family's needs regarding supporting the child's development.

The service coordinator designated for the family | The early intervention provider or lead agency designates a service coordinator to help the parents and family members understand and navigate the early intervention process. This is obviously a key role; not surprisingly, the service coordinator has many specific duties and responsibilities, including coordinating all services across agency lines and serving as the single point of

§303.343 IFSP Team meeting and periodic review.

(a) *Initial and annual IFSP Team meeting.*(1) Each initial meeting and each annual IFSP Team meeting to evaluate the IFSP must include the following participants:

(i) The parent or parents of the child.

(ii) Other family members, as requested by the parent, if feasible to do so.

(iii) An advocate or person outside of the family, if the parent requests that the person participate.

(iv) The service coordinator designated by the public agency to be responsible for implementing the IFSP.

(v) A person or persons directly involved in conducting the evaluations and assessments in \$303.321.

(vi) As appropriate, persons who will be providing early intervention services under this part to the child or family.

(2) If a person listed in paragraph (a)(1)(v) of this section is unable to attend a meeting, arrangements must be made for the person's involvement through other means, including one of the following:

(i) Participating in a telephone conference call.

(ii) Having a knowledgeable authorized representative attend the meeting.

(iii) Making pertinent records available at the meeting.

(b) *Periodic review*. Each periodic review under \$303.342(b) must provide for the participation of persons in paragraphs (a)(1)(i) through (a)(1)(iv) of this section. If conditions warrant, provisions must be made for the participation of other representatives identified in paragraph (a) of this section. contact for carrying out the early intervention services and activities identified in the child's IFSP.

Those involved in evaluation and assessments | Those who have been directly involved in carrying out the evaluation and assessments of the child and family are also on the IFSP Team. This may be one individual or several, with key contributions being to explain the results of the evaluation and assessment process and to help the other Team members identify the early intervention services appropriate to addressing the child's developmental needs.

If the person filling this role cannot attend the IFSP meeting, the regulations state that arrangements can be made for the person's involvement through other means, including one of the following: participating in a telephone conference call; having a knowledgeable authorized representative attend the meeting; or making pertinent records available at the meeting.⁶

Provider(s) of early intervention services | If appropriate, the Team may also include one or more providers of early intervention services. Again, this may be one or more individuals who can speak directly to the question of which early intervention services are needed and what measurable goals or outcomes are appropriate for the child.

Team Participants for the Periodic Review of the IFSP

The closing provision of §303.343 is important when discussing the membership of the IFSP Team. It indicates that the participants listed above are required participants at the <u>initial</u> and the <u>annual</u> IFSP meeting. All these participants are not *necessarily* required for the periodic review of the IFSP (which must occur every six months, or as conditions warrant).

Translated, the provision means that only the first four listed members are expected to participate in the periodic review of the IFSP. Those Team members are:

- the parent(s);
- family members requested by the parent;
- the advocate or person outside the family (if requested by the parent); and
- the family's service coordinator.

Who's not mentioned? | Two members of the Team are not necessarily expected to attend periodic reviews of the IFSP:

- the person(s) directly involved in the evaluation and assessment process;
- the provider(s) of early intervention services.

If conditions warrant, however, provisions must be made for the participation of these other representatives as relevant. This is discussed more under Slide 8, where timelines for the periodic review and other IFSP meetings are explored.

Reference

⁶ §303.343(a)(2)—IFSP Team meeting and periodic review: Initial and annual IFSP Team meeting.





Pertinent Handout:Handout 8 | The IFSP

Now for the official definition of the IFSP, as provided in the Part C regulations at \$303.20. The slide distills the opening paragraph of the definition into smaller, manageable phrases.

Refer participants to the top left column of **Handout 8** for the exact opening words of the Part C regulations, which are provided in bold in the box at the right.

The regulations that we've put in grayed-out text will be addressed on the next slide. For now, just look at the introduction to the IFSP definition, which lays out the "basic" elements, summarizing that the IFSP is a <u>written</u> plan for providing EI services to an infant or toddler with a disability and that child's family.

How the Part C Regulations Interlock

As mentioned under Slide 2, the Part C regulations place the bulk of IFSP requirements at \$303.340 to \$303.346. Yet the actual definition of IFSP is found much earlier in the regulations (at \$303.20), where other key terms are defined (such as *developmental delay, early intervention services,* and *infant or toddler with a disability*). That definition is then referenced in \$303.340, where the provisions for the "Individualized Family Service Plan (IFSP)" begin.

Individualized Family Service Plan (IFSP)

\$303.340 Individualized family service plan—general.

For each infant or toddler with a disability, the lead agency must ensure the development, review, and implementation of an individualized family service plan or IFSP developed by a multidisciplinary team, which includes the parent, that—

303.20 Individualized family service plan.

Individualized family service plan or IFSP means a written plan for providing early intervention services to an infant or toddler with a disability under this part and the infant's or toddler's family that—

(a) Is based on the evaluation and assessment described in \$303.321;

(b) Includes the content specified in \$303.344;

(c) Is implemented as soon as possible once parental consent for the early intervention services in the IFSP is obtained (consistent with \$303.420); and

(d) Is developed in accordance with the IFSP procedures in §§303.342, 303.343, and 303.345.

(a) Is consistent with the definition of that term in \$303.20; and

(b) Meets the requirements in \$\$303.342 through 303.346 of this subpart.

You can see this on **Handout 8**, right under the verbatim definition of IFSP. Refer participants to \$303.340 on **Handout 8**, and summarize that the lead agency (the State agency responsible for developing the system through which early intervention services are made available) must ensure that an IFSP is developed, reviewed, and implemented for each infant or toddler with a disability served under Part C. Additional elements of that responsibility include ensuring that:



- the IFSP is developed by a multidisciplinary team;
- the multidisciplinary team includes the child's parent; and
- the IFSP meets specific requirements laid forth in the regulations (i.e., \$303.342 through 303.346).

The specific requirements that must be met with respect to the IFSP are, of course, the focus of the training modules in Theme D!

Now, to continue with the definition of IFSP... because we're not done with it yet.



Pertinent Handouts:

- Handout 8 | The IFSP
- Activity Sheet 7 | Quick look at the content of the IFSP (optional)

Picking up where we left off in the definition of IFSP at \$303.20, let's look at the grayed-out part we previously provided. Now we "un-gray" it (see the box on the next page).



You can see that the slide closely follows the Part C regulations, only omitting its many cross-references to other provisions in the regulations. The discussion below provides those details, which you can offer (or not) as you wish, depending on the time you have available for training and the information needs of your audience.

I | The IFSP is Based on Evaluation and Assessment

As the first bullet on the slide indicates, the IFSP must be based on the evaluation and assessment (as described in IDEA). What the bullet doesn't tell you is *where* in IDEA the "evaluation and assessment" are described. According to the regulations cited above, what's required for "evaluation and assessment" is described in §300.321.

The shortest story | Going into any depth with the audience about \$300.321 is probably beyond the scope of your training session. It may be sufficient to indicate that, under the Part C regulations, a child's IFSP must be based on the results of evaluation and assessment, which are conducted to identify:

- the child's strengths and needs;
- the early intervention services appropriate to meet those needs;
- the family's resources, priorities, and concerns; and
- the services appropriate to build the family's ability to meet their child's developmental needs.

A more detailed summary | If you'd like to offer more detail to the audience about the requirements of \$300.321, here's a more indepth summary.

- The title of \$303.321 is "Evaluation of the child and assessment of the child and family." Clearly, "evaluation" and "assessment" are two separate and distinct processes.
- Parental consent must be obtained before the lead agency may evaluate an infant or toddler suspected of having a disability.
- The evaluation of the child must be timely, comprehensive, and multidisciplinary.

303.20 Individualized family service plan.

Individualized family service plan or *IFSP* means a written plan for providing early intervention services to an infant or toddler with a disability under this part and the infant's or toddler's family **that**—

(a) Is based on the evaluation and assessment described in \$303.321;

(b) Includes the content specified in \$303.344;

(c) Is implemented as soon as possible once parental consent for the early intervention services in the IFSP is obtained (consistent with \$303.420); and

(d) Is developed in accordance with the IFSP procedures in §§303.342, 303.343, and 303.345.

• Under certain circumstances, a child's medical and other records can be used to establish eligibility for early intervention, and an evaluation of the child won't need to be conducted.

If the infant or toddler is found eligible for early intervention services, then two types of assessment are conducted. These are:

- a multidisciplinary assessment of the child, focused on identifying his or her "unique strengths and needs" as well as the "services appropriate to meet those needs."
- a voluntary family-directed assessment, focused on identifying the "resources, priorities, and concerns" of the family, as well as the "supports and services necessary" to enhance the family's capacity to meet the developmental needs of their child.

Section 300.321 also includes definitions of the terms "evaluation" and "assessment" and procedures for both.

For the full story | Theme C in this curriculum addresses evaluation and assessment requirements in great detail. If you'd like to offer yet more detail or simply inform yourself, please refer to the modules in Theme C.

Trainer's Note!

SE:

What does "multidisciplinary" mean?

The IFSP must be developed by a <u>multi-disciplinary team</u> and be based in part on the results of a <u>multidisciplinary</u> <u>evaluation</u> of the child. Participants might well wonder what the term means.

The Part C regulations at §303.24 define *multidisciplinary* in general as "the involvement of two or more separate disciplines or professions." The definition also indicates that:

 when used in reference to a multidisciplinary <u>evaluation</u>, "multidisciplinary" may include one individual who is qualified in more than one discipline or profession; and

• when used in reference to the <u>team</u> that develops the child's IFSP, "multidisciplinary" includes the parent and two or more individuals from separate disciplines or professions (one of whom must be the service coordinator).

Extension discussion of "multidisciplinary" can be found in the trainer's guide for Section 3 of Module 1—specifically, on pages I-38 to I-41. The trainer's guide is available online at: http://tinyurl.com/oecbn3j

2 | IFSP Includes Specific Content

Bullet 2 on the slide indicates that the IFSP must include specific content, but it doesn't say *what* content. The actual Part C regulations *do* say: the content specified at §303.344. Not surprisingly, the title of §303.344 is "Content of an IFSP."

Handout 8 includes the verbatim text of \$303.344. You can treat this information at different levels of detail, given your training time and the audience's information needs. For example:

• Shortest story | Give a few examples of the type of content that's required in an IFSP— such as information about the child's present levels of development, family information, the results or outcomes expected to be achieved for the child, what early intervention services will be provided and where, and so on. Let the audience get the "flavor" of this all-important written plan for a child in early intervention, without dwelling on any one part.

- Take 5 minutes for audience participation | Have participants use Handout 8 to identify (and call out to you) different parts of the IFSP mentioned in §303.344. Take notes on a flipchart.
- Take 10-15 minutes for an activity | You may wish to devote a chunk of training time to involve participants in an individual or smallgroup activity that focuses on the required IFSP content (such as Activity Sheet 7, described on the next page).

This may be especially desirable with participants who aren't going to receive training with Module 6 (the contents of the IFSP) but who still need to be acquainted with the types of information a typical IFSP must contain.

3 | IFSP is Developed According to Specific IFSP Procedures

The 3rd bullet on the slide indicates that there are specific procedures for developing an IFSP for a child and family. Many of those procedures are discussed in this module and include the following:

- the timelines for holding an IFSP meeting to develop the child's IFSP (Slide 8);
- who is required to participate in IFSP development (Slide 5);
- actions the lead agency must take before holding an IFSP meeting (Slide 9);

- the required accessibility and convenience of IFSP meetings (Slide 9);
- providing parents with a full explanation of the contents of the IFSP (Slide 10); and
- securing parents' informed written consent before any early intervention services may be provided to the infant or toddler (Slide 10).

There's no need to delve into the details of any of these procedures yet. Merely share the broad list of bulleted items above with participants, to introduce them to the types of procedures that IDEA requires when IFSPs are developed and to let them know they will be hearing more about each of these in a few minutes.

Discussion continues on next page



Optional Activity

Total Time Activity Takes: 10-15 minutes Group Size: Work in pairs. Materials: Activity Sheet 7

Instructions

Refer participants to **Activity Sheet 7**. Indicate that they are to complete the activity sheet by matching the sections of the IFSP (left column) with possible examples (in the right column). Give the pairs 5-10 minutes to complete the activity sheet, then call the audience back to large-group focus.

Go through the IFSP sections listed on the left of the worksheet and have participants call out what examples on the right they felt matched and why.

Use **Handout 8** to elaborate on what IDEA requires be included in the specific sections of the IFSP. Suggested answers are given below.

Suggested Answers

1. Information about the child's status: **D** | *Communication:* Kim's challenges include her inability to babble and make consonant and other sounds as a result of her NG tube. These challenges impact her ability to communicate her wants, thoughts, and needs with her parents, sister, grandparents, and playgroup teacher.

2. Family information: **C** | Freddie's parents are concerned that he is going to get "kicked out" of his child care center, if they don't get help. His behaviors at home and child care are the priority concern. His mother would like suggestions on how to handle his behaviors.

3. Measurable results or outcomes: A | Marina will walk and her parents will not have to carry her when they go to church, shopping, and to visit friends.

4. Early intervention services to be provided: **B** | Physical therapy, special instruction, speech pathology

5. Length, duration, frequency, intensity, and method of delivering the early intervention services: **G** | Physical therapy, twice weekly, 30 minutes, individual

6. Appropriate setting, and if needed natural environments justification: F | The services will be provided in the home environment, which is considered by the IFSP Team to be Maria's natural environment at this time.

7. Other services (non-Part C): E | Cardiology service for child | Dr. I.M. Heart

8. Name of family's service coordinator: H | Barbara Belt—Phone, email, address given below.

4 | IFSP is Implemented ASAP After Parental Consent

IDEA states that "[e]ach early intervention service must be provided as soon as possible after the parent provides consent for that service" [§303.342(e)]. While this makes evident good sense, there are a number of points you might consider adding, depending on the needs of your audience and the amount of training time you have available.

Consent for <u>*each*</u> **EI service and ability to decline any service** | IDEA requires that, before an EI service listed into the IFSP may be provided to the child, parents must give their informed written consent for that early intervention service.⁷ The regulations also give parents the right to accept or decline any early intervention service, at any time (even after first accepting it), without jeopardizing their ability to receive other EI services listed in the IFSP. (See the box at the right for the verbatim Part C regulations.)

The meaning of ASAP | After parents have given their consent for an early intervention service, that service must be provided "as soon as possible." Participants may wonder



what ASAP actually means—within a day, within a week, within a longer period of time?

First of all, the timeline for ASAP begins when the parents have given their consent for a service. While IDEA does require the IFSP to include the "projected date for the initiation of each early intervention service,"⁸ such dates are just that *projected* dates. As the Department of Education observes, "a parent may not have provided consent to the service and, therefore, the service may not be provided."⁹

So it makes sense to begin the timeline for ASAP once parental consent is obtained. The Department goes on to say:

Currently, most States have adopted a 30day timeline that commences from the date of parental consent to the date the services in the IFSP are provided with some States adopting a shorter timeline and only a few States adopting a slightly longer timeline (e.g., 45 days), which timeline \$303.420 Parental consent and the ability to decline services.

(a) The lead agency must ensure parental consent is obtained before—

(1) Administering screening procedures....

(2) All evaluations and assessments...

(3) Early intervention services are provided to the child under this part...

[...]

(d) The parents of an infant or toddler with a disability—

(1) Determine whether they, their infant or toddler with a disability, or other family members will accept or decline any early intervention service under this part at any time, in accordance with State law; and

(2) May decline a service after first accepting it, without jeopardizing other early intervention services under this part.

also commences from the date of parental consent to the date the services in the IFSP are provided.

We do not believe it is appropriate to adopt a time period more specific than "as soon as possible" for the provision of all early intervention services identified in an IFSP. While each State must ensure that services in an IFSP are provided as soon as possible after receiving parental consent, we believe that "as soon as possible" may vary depending on a number of factors, such as the availability of qualified personnel in a State, the number of children to be served, and the location of those children. While we give States some flexibility in implementing this provision, we also monitor, through the SPP/APR, data on when each State initiates services for each child. Thus, we decline to adopt... a timeline more specific than "as soon as possible."10

References

- ⁷ §303.342(e)—Procedures for IFSP development, review, and evaluation: Parental consent.
- ⁸ §303.344(f)(1)—Content of an IFSP: Dates and duration of services.
- ⁹ 76 Fed. Reg. 60202.
- ¹⁰ 76 Fed. Reg. 60202.



Pertinent Handouts:

• Handout 8 | The IFSP

Let's move on to important IFSP timelines. There dare three of note, as depicted simply on the slide:

- the timeline for holding the meeting to <u>develop</u> an eligible child's IFSP;
- how often a periodic <u>review</u> of the IFSP needs to take place; and
- the annual meeting that must be held to <u>evaluate</u> and (as necessary) revise the IFSP.

These three timelines can be reviewed quickly with participants, especially if you are using this module to present the basics about IFSPs. Still, there are elements on which you may wish to elaborate, which we identify below.

Meeting to Develop the IFSP

Once an infant or toddler is found eligible for early intervention services because of a disability or developmental delay, the lead agency is responsible for convening a meeting in which that child's IFSP will be developed. As the slide indicates, this meeting must be held within the 45-day postreferral timeline. This is stated in the Part C regulations as follows:

\$303.342 Procedures for IFSP development, review, and evaluation.

(a) *Meeting to develop initial IFSP-timelines.* For a child referred to the Part C program and determined to be eligible under this part as an infant or toddler with a disability, a meeting to develop the initial IFSP must be conducted within the 45-day time period described in §303.310.

What's the 45-day post-referral timeline? | Many participants may not know what the "45-day post-referral timeline" is, so a quick explanation is in order. The 45-day time period is described at \$303.310. We've provided the verbatim text of \$303.310 in the box on the next page for your convenience.

2 Clicks

Simply put, starting from the date when the lead agency or EIS provider receives the referral of a child to the Part C program, a number of things need to occur within 45 days:

- screening of the child (if the State has adopted screening procedures) to see if the child might have a disability or delay, which would trigger the indepth evaluation and assessment process;
- the initial evaluation and assessments of the child and family; and
- the meeting to develop the initial IFSP, if the child is found eligible for Part C. [\$303.310(a)]

There are two limited exceptions to this timeline:

(a) when the child or parent is unavailable to complete the screening (if applicable), initial evaluation and assessment process, or the initial IFSP meeting "due to exceptional family circumstances that are documented in the child's early intervention records" and

(b) when the "parent has not provided consent" [\$303.310(b)(1) and (2)].

To summarize | All this is to say, for training purposes, that the initial IFSP meeting must be held within 45 days of the child's referral to the Part C program. This is only necessary, of course, if the child has been found eligible for early intervention services.

Periodic Review of the IFSP

Recognizing the rapid developmental changes common to infants and toddlers, IDEA requires periodic review of the IFSP—specifically, at least every six months. The IFSP may also be reviewed more frequently if conditions warrant or if the family asks for such a review. The periodic review was mentioned under Slide 5.

The regulations governing this timeline can be found at §303.342(b); refer participants, as appropriate, to **Handout 8** (page 1). We've provided these regulations to the right.

Discussion continues on next page

(b) *Periodic review*. (1) A review of the IFSP for a child and the child's family must be conducted every six months, or more frequently if conditions warrant, or if the family requests such a review. The purpose of the periodic review is to determine--

(i) The degree to which progress toward achieving the results or outcomes identified in the IFSP is being made; and

(ii) Whether modification or revision of the results, outcomes, or early intervention services identified in the IFSP is necessary.

(2) The review may be carried out by a meeting or by another means that is acceptable to the parents and other participants.

§303.310 Post-referral timeline (45 days).

(a) Except as provided in paragraph (b) of this section, any screening under §303.320 (if the State has adopted a policy and elects, and the parent consents, to conduct a screening of a child); the initial evaluation and



the initial assessments of the child and family under §303.321; and the initial IFSP meeting under §303.342 must be completed within 45 days from the date the lead agency or EIS provider receives the referral of the child.

(b) Subject to paragraph (c) of this section, the 45-day timeline described in paragraph (a) of this section does not apply for any period when—

(1) The child or parent is unavailable to complete the screening (if applicable), the initial evaluation, the initial assessments of the child and family, or the initial IFSP meeting due to exceptional family circumstances that are documented in the child's early intervention records; or

(2) The parent has not provided consent for the screening (if applicable), the initial evaluation, or the initial assessment of the child, despite documented, repeated attempts by the lead agency or EIS provider to obtain parental consent.

(c) The lead agency must develop procedures to ensure that in the event the circumstances described in (b)(1) or (b)(2) of this section exist, the lead agency or EIS provider must—

(1) Document in the child's early intervention records the exceptional family circumstances or repeated attempts by the lead agency or EIS provider to obtain parental consent;

(2) Complete the screening (if applicable), the initial evaluation, the initial assessments (of the child and family), and the initial IFSP meeting as soon as possible after the documented exceptional family circumstances described in paragraph (b)(1) of this section no longer exist or parental consent is obtained for the screening (if applicable), the initial evaluation, and the initial assessment of the child; and

(3) Develop and implement an interim IFSP, to the extent appropriate and consistent with \$303.345.

(d) The initial family assessment must be conducted within the 45-day timeline in paragraph (a) of this section if the parent concurs and even if other family members are unavailable. **Purpose of the review** | The regulations also state the purpose of the periodic IFSP review— which is to determine:

- the degree to which the child is making progress toward achieving the results or outcomes identified in the IFSP; and
- whether elements of the IFSP (i.e., the results, outcomes, or early intervention services) need to be revised or modified.

Additional details | Although you may not choose to mention this to participants at this time, it's useful to know that the periodic review of the IFSP is "less formal than the initial or annual IFSP meeting and may be done through a teleconference, a face-to-face meeting or other means acceptable to the parents and other participants."¹¹

Also, as first mentioned under Slide 5, the list of required attendees at the periodic review is different from those required at the initial or the annual IFSP meeting. Unless conditions warrant, the periodic review doesn't require the invitation or attendance of either:

- individuals directly involved in conducting evaluations and assessment; or
- individuals who provide early intervention services. [\$303.343(b)]

Requiring the attendance of these individuals at a periodic review would be burdensome and unnecessary, according to the Department, because periodic reviews "are usually limited to reviewing the child's progress towards the measurable results or outcomes."¹² However, sometimes conditions *do* warrant the attendance of either or both of these types of individuals, and the lead agency remains responsible for ensuring they participate, if needed. For example:

- A reevaluation of the child has taken place, and the results of that evaluation will be discussed at the periodic review.
- The child's progress in a particular developmental area will be discussed at the periodic

review, requiring the participation of the EI provider(s) in that area.¹³

Meeting to Evaluate the IFSP

The 3rd element on the slide focuses on the annual meeting that must be held to evaluate the IFSP, which is required at §\$303.342(c), as follows:

(c) Annual meeting to evaluate the IFSP. A meeting must be conducted on at least an annual basis to evaluate and revise, as appropriate, the IFSP for a child and the child's family. The results of any current evaluations and other information available from the assessments of the child and family conducted under §303.321 must be used in determining the early intervention services that are needed and will be provided.

As you can see, the annual meeting gives the IFSP Team (which includes the parent) a formal opportunity to revisit the IFSP and revise it, as appropriate, using any current evaluations or other information about the child and family to determine what EI services are needed and will be provided.

References

- ¹¹ 76 Fed. Reg. at 60203.
- ¹² 76 Fed. Reg. at 60203.
- ¹³ 76 Fed. Reg. at 60203.





Pertinent Handouts:

• Handout 8 | The IFSP



This slide focuses on the specific procedures that lead agencies and early intervention providers must follow with respect to scheduling and holding IFSP meetings. It's divided into three parts with the text covered by pictures. The first picture lifts away automatically, to get the discussion started. With a CLICK, another picture will lift away, showing the text beneath and allowing you to discuss another of the required procedures. One more CLICK, and the remaining text (required procedure) is revealed.

Required Procedure | Accessibility and Convenience of Meetings

Each lead agency and early intervention provider must take steps to ensure that parents of a child eligible for Part C services are present at each IFSP Team meeting or are afforded the opportunity to participate. One of those steps is to ensure that IFSP meetings are held in places and at times that are convenient to the family. Lead agencies and early intervention providers must make the meeting arrangements with the family (and other participants) early enough before the meeting date to ensure they will be able to attend.

Additionally, the meeting must also be conducted in the family's <u>native language</u> or <u>other</u> <u>mode of communication</u> (e.g., sign language), unless it is clearly not feasible to do so. This will be discussed more fully under the last bullet on the slide, but its purpose is to ensure that the family can understand what is being said at the meeting and can participate in discussions and decision making.

The regulations setting forth these requirements can be found at \$303.342(d), on **Handout 8**, and in the box at the right.

Required Procedure | Parent Notification

As you know, each lead agency and early intervention provider must notify parents of the IFSP meeting early enough to ensure they have the opportunity to attend. Specific information must be included in the lead agency's notification to parents, such as:

- the purpose, time, and location of the meeting;
- who will be at the meeting; and
- that the parents may include and/or invite other family members, advocates, or another person outside of the family to participate in the meeting.

(d) Accessibility and convenience of meetings. (1) IFSP meetings must be conducted—

(i) In settings and at times that are convenient for the family; and

(ii) In the native language of the family or other mode of communication used by the family, unless it is clearly not feasible to do so.

(2) Meeting arrangements must be made with, and written notice provided to, the family and other participants early enough before the meeting date to ensure that they will be able to attend. [§303.342(d)]

Does the notice to parents have to be in writing? | Yes. It is not sufficient for the lead agency or EI provider to notify parents of an upcoming IFSP meeting solely by email or by documenting a phone call where the meeting was arranged



with parents. As the Department of Education observes:

Nothing in the regulations prohibits States from providing additional notice of the IFSP meeting by, for example, electronic mail or phone call, but, at a minimum, it must provide written notice to the family and other participants to ensure that they can attend the IFSP meetings.14

Required Procedure | Making Sure that Parents Understand and Can Participate

For obvious reasons, it is extremely important for the lead agency or EIS provider to ensure that parents of the child can understand what's being said at the IFSP meeting and contribute their own perspectives and knowledge. Therefore, unless it's clearly not feasible to do so, IFSP meetings must be conducted in the parent's native language or typical mode of communication (e.g., sign language, braille).15

"Unless it's clearly not feasible" | Because Part C makes it clear that involvement of the family in the IFSP process is critical, lead agencies must take whatever action is necessary to ensure that the parent understands the proceedings of the IFSP team meeting, including considering the "availability of native language resources" such as bilingual staff, arranging for an interpreter to be present at IFSP meetings, or utilizing available telephonic interpreter services. Nonetheless, as the Department acknowledges:

[G]iven that the U.S. Census Bureau recognizes over 300 languages used in the United States (not including dialects), it may not be feasible, in every instance, to

provide interpreter services with respect to a particular native language because an interpreter of that language may not be available.16

Definition of native language | For your convenience, we've provided the regulatory definition of the term "native language" below, should you need to share this information with the audience.

§303.25 Native language.

(a) Native language, when used with respect to an individual who is limited English proficient or LEP (as that term is defined in section 602(18) of the Act), means—

(1) The language normally used by that individual, or, in the case of a child, the language normally used by the parents of the child, except as provided in paragraph (a)(2) of this section; and

(2) For evaluations and assessments conducted pursuant to §303.321(a)(5) and (a)(6), the language normally used by the child, if determined developmentally appropriate for the child by qualified personnel conducting the evaluation or assessment.

(b) Native language, when used with respect to an individual who is deaf or hard of hearing, blind or visually impaired, or for an individual with no written language, means the mode of communication that is normally used by the individual (such as sign language, braille, or oral communication).

References

- 14 76 Fed. Reg. at 60202.
- ¹⁵ §303.342(d)(ii)—Procedures for IFSP development, review, and evaluation: Accessibility and convenience of meetings.
- ¹⁶ 76 Fed. Reg. at 60202.

Slide 10



See discussion on next page

Handout 8 | The IFSP

You're almost done with this module on the L basics of IFSP procedures for developing, reviewing, and evaluating the IFSP. There are several final points to be made, however.

Point I | More on Ensuring that **Parents Understand**

The bullet on the slide states that "The contents of the IFSP must be fully explained to parents." Clearly, this provision interconnects with other provisions in the Part C regulations with respect to ensuring parents understand and can participate in the IFSP process. The audience can see the provision on Handout 8, under §303.342(e), which reads as follows:

(e) Parental consent. The contents of the IFSP must be fully explained to the parents and informed written consent, as described in §303.7, must be obtained, as required in 303.420(a)(3), prior to the provision of early intervention services described in the IFSP. Each early intervention service must be provided as soon as possible after the parent provides consent for that service, as required in §303.344(f)(1).

The regulations do not specify who is responsible for explaining the IFSP to parents, but in practice it tends to be the family's service coordinator. This is the person who is responsible for helping parents understand and be actively involved in the early intervention process.

Whoever explains the contents of the IFSP to the parents in the end and answers any questions they may have, this step is meant to ensure that parents have the understanding they need to make an

informed decision about providing consent for EI services or not. Which just happens to be our next bullet!

Point 2 | Informed Written Consent

Parents will be asked to provide their informed written consent for each of the early intervention services specified in their child's IFSP. No services

may be provided without parental consent in writing. The provision that sets forth this requirement is found at §303.342(e), which was just quoted above and discussed more extensively under Slide 7.

Point 3 | Can the Lead Agency Challenge the Parents' Refusal to Give Consent?

This point focuses on whether or not the lead agency is permitted to use IDEA's due process procedures to challenge parental refusal of consent—which, if successful, would mean that the lead agency could override the parent's refusal and provide EI services to the child without the parent's consent.

In short, the lead agency may NOT challenge a parent's refusal to provide consent, according to \$303.420(c), which reads:

(c) The lead agency may not use the due process hearing procedures under this part or Part B of the Act to challenge a parent's refusal to provide any consent that is required under paragraph (a) of this section.

At this moment we're talking about parental consent for EI services to be provided to the child. But §303.420(c) is also referring to several other





points in time when parents' refusal to give consent may not be challenged by the lead agency. Those times are:

- before screening a child (if an option in the State);
- before conducting all evaluations and assessment of the child;
- before using the family's public benefits or insurance or private insurance (if such consent is required in the State); and
- before disclosing personally identifiable information about the child or family.

Other requirements when parents refuse to give consent | Okay, it's clear that the lead agency may not challenge a parent's refusal to provide consent for specific things. However, in the face of a parent's refusal to give consent, the lead agency *does* have an obligation, as follows:

(b) If a parent does not give consent under paragraph (a)(1), (a)(2), or (a)(3) of this section, the lead agency must make reasonable efforts to ensure that the parent—

(1) Is fully aware of the nature of the evaluation and assessment of the child or early intervention services that would be available; and

(2) Understands that the child will not be able to receive the evaluation, assessment, or early intervention service unless consent is given. [§303.420(b)]

In this particular case (the consent that's needed before early intervention services may be provided to the child), the lead agency would make reasonable efforts to ensure that the parent:

- if fully aware of the early intervention services that would be available; and
- understands that the child will not be able to receive those EI services unless consent is given.



Point 4 | Providing Parents with Copies of Key Documents

As the final bullet states and as \$303.409(c) requires, a copy of each evaluation, assessment, and IFSP must be provided to parents <u>at no cost</u> as soon as possible after each IFSP meeting. This is a new requirement in the Part C regulations, and it's intended "to help parents to be full and equal participants in the IFSP process."¹⁷

At no cost | The fact that these documents must be provided at no cost to parents is consistent with the fact that many other things in early intervention must be provided at no cost to parents, including conducting evaluations and assessments, developing and reviewing IFSPs, and implementing procedural safeguards. As the Department observes:

Requiring States to provide a copy of evaluations, assessments, and IFSPs to parents, from the child's early intervention record, should not be a burden to States. As a standard practice, most States already provide these documents at no cost to parents.¹⁸

References

¹⁷ 76 Fed. Reg. at 60210.
¹⁸ 76 Fed. Reg. at 60210.



Pertinent Handouts:

• Activity Sheet 8 | Case Study: Extended Family Participation in the IFSP Meeting (optional)

And you're done! Well, almost...

Use this slide for a review and recap of your own devising, open the floor up for a question and answer period, or have participants complete Activity Sheet 8 (described below) and discuss in the large group afterwards.

Emphasize the local or personal application of the information presented here.

Closing Activity

Total Time Activity Takes: 15-20 minutes.

Group Size: Work individually, then share in pairs or groups of 4, then share in the large group.

Materials: Activity Sheet 8: Case Study: Extended Family Participation in the IFSP Meeting

Instructions:

1. Refer participants to Activity Sheet 8. Indicate that this activity sheet provides a case study for them to analyze individually. They'll have 5 minutes. Let them dig in.

- 2. When the 5 minutes are up, have participants get into pairs or groups of 4, where they share their answers with each other.
- 3. Give the groups 5 minutes to share and compare their answers, then call the audience back to large-group focus. Share people's learning experience on the IFSP in the full group, taking notes on a flipchart, if desired.

Possible responses are given on the next page.

Possible Responses to the Activity Sheet

1. What's the point of this story? Summarize the point as you see it in 1-2 sentences.

Answers will vary, but should fall somewhere in the range of "Many parents will want family members to be involved on the IFSP Team, because they can offer critical support to the IFSP process and to the parents and child."

2. How does Jayden's story relate to IFSP procedures?

Again, answers will vary, but may include mention of:

- the lead agency's contacting the parents to schedule the IFSP meeting at a time and place convenient to them;
- letting the parents know that they could invite friends and family to the IFSP meeting;
- listening to and valuing the input of family members as to the child's development and the family's needs.

3. Think about how you might use the information in this case study personally or professionally. Jot down one or two ideas.

Answers will vary by participant, but may include:

• *For professionals providing EI services* | To ensure in the future that, when parents would like to invite family members to participate on the IFSP Team, their participation is welcomed and valued

For parents | To recognize that:

- they have the right to invite family members (and friends) to participate on the IFSP Team
- family members can be a strong source of support and input

4. How does the image at the top of this page relate to Jayden's story?

Answers will vary, but may include that many people take part in putting together the pieces of the puzzle, just as many people will be involved in putting together a solid IFSP for a child and family.



This training curriculum is designed and produced by NICHCY, the National Dissemination Center for Children with Disabilities, at the request of our funder, the Office of Special Education Programs (OSEP) at the U.S. Department of Education.

NICHCY Lead: Lisa Küpper

OSEP Lead: Rhonda Spence

OGC Lead: Kala Surprenant

Funding for NICHCY officially ended on September 30, 2014. All training materials in this Part C training curriculum are now available at the website of the Center for Parent Information and Resources, at:

http://www.parentcenterhub.org/repository/legacy-partc/