Slide 1:
No Narration

Slide 2:
No Narration

Slide 3:
The Individuals with Disabilities Education Act (IDEA) is a federal law that includes four main parts. Part B of the law assists states to make free, appropriate public education available to children with disabilities from age 3 through 21. Part C of the law grants funds to states that agree to implement and maintain a statewide early intervention system for infants and toddlers with disabilities and their families.

20 U.S.C. § 1431 (SEC. 631) (a) (1-5)

Slide 4:
The Congressional findings portion of Part C, demonstrates that lawmakers recognize that there is plasticity in development and that critical brain development occurs during the first few years of life. The law assumes that infants and toddlers normally develop within the context of their families, that families have the capacity to meet the needs of their children, and that the efforts of families may potentially be enhanced by social systems external to the family. The law incorporates people first language, and makes explicit the expectation that infants and toddlers with disabilities will later attend school and eventually will become adults who live in society.

20 U.S.C. § 1431 (SEC. 631) (b)

Slide 5:
Based on the findings of Congress, the policy of the United States is to provide states with financial assistance related to early intervention services. The federal assistance is to serve four major purposes.

20 U.S.C. § 1432 (SEC. 632) (3)

Slide 6:
Part C permits each state to define the meaning of the term “developmental delay” as it will be used by the state to determine which children are eligible for early intervention services.


Slide 7:
Having left the meaning of “developmental delay” to the states, the federal law defines “infant or toddler with a disability” in terms of developmental delay or diagnosed condition that has a high probability of resulting in delay. The statute does not list the diagnosed conditions that may be included in the definition. The law permits states to include children under age 3 who are “at-risk” of experiencing developmental delay if early intervention services are not provided. States also have the option to establish a policy to continue to provide early intervention services to children from age 3 until their entrance into elementary school.


Slide 8:
Implementation of the entire statewide system of services must be supervised by a public “lead agency” within the state.

Early intervention services are to be provided at no cost to families, except where Federal or State law provides for a system of payments by families, including a sliding scale.

Early intervention services must be designed to meet the child’s developmental needs as identified by the individualized family service plan team in any 1 or more of five areas of development.

Early intervention services must meet the standards that are established by the state.

Slide 9:
The statute lists 14 early intervention services.
20 U.S.C. § 1432 (SEC. 632) (4) (E) (i-xiv)

Slide 10:
The developmental needs of young children with disabilities are complex, and the expertise of qualified professionals from a wide range of disciplines may be needed. Therefore, the law provides a list of personnel who may provide Part C services.
20 U.S.C. § 1432 (SEC. 632) (4) (F) (i-xii)

Slide 11:
Part C requires that to the maximum extent appropriate, early intervention services are provided in natural environments – which include the home, and community settings in which children without disabilities participate. The law also stipulates that early intervention services must be provided in conformity with an individualized family service plan.
20 U.S.C. § 1435 (SEC. 632) (4) (G-H)

Slide 12:
To be eligible for Part C grants, states must demonstrate to the Secretary of the Department of Education that the State has (1) a policy that appropriate early intervention services are available to all infants and toddlers with disabilities and their families, including Indian infants residing on reservations, children and families who are homeless, and children who are wards of the state, and (2) a statewide system that includes all the components that requires.
20 U.S.C. § 1434 (SEC. 634) (1-2)

Slide 13:
Part C lists the 16 minimum components of a statewide system.
20 U.S.C. § 1435 (SEC. 635) (a) (1-16)

Slide 14:
Part C requires states to have in place a process for assessment and program development for each child and family who receive services. The law stipulates that parents are partners in the assessment process and in the program development team.
20 U.S.C. § 1436 (SEC. 636) (a) (1-3)

Slide 15:
To be effective, early intervention services must respond quickly to changes in the status of the child’s health and development as well as to changes that occur in the resources, priorities, and concerns of the family. Therefore, Part C requires the state to provide for annual evaluation and periodic reviews of Individualized Family Service Plan (IFSP) and prompt delivery of early intervention services identified in the IFSP.
20 U.S.C. § 1436 (SEC. 636) (b-c)

Slide 16:
Part C requires the IFSP to be documented in writing, and specifies components that must be included in each Individualized Family Service Plan.
20 U.S.C. § 1436 (SEC. 636) (d) (1-8)

Slide 17:
States must ensure that the contents of the IFSP are explained to parents and that services provided to children and families include only those to which the parents have given consent.
20 U.S.C. § 1436 (SEC. 636) (e)
Parents are full partners in the early intervention process and have specific rights under federal law. Part C requires that statewide system of early intervention services include minimum procedures to safeguard the rights of families and children who receive or may be eligible to receive services. The state is responsible for ensuring that families know their rights and understand what to do if they have complaints regarding their services.

20 U.S.C. § 1439 (SEC. 639) (a) (1-8)

Part C requires states to assure that in situations where a dispute about services is being processed, the child will begin or continue to receive early intervention services that are not in dispute.

Legal and political action by parents of children with disabilities and their allies, culminated in federal legislation that ensured rights and established systems of services. Some fundamental philosophical and theoretical perspectives have been incorporated into the provisions and requirements of Part C. Perhaps you can identify still other ways in which Part C provisions and requirements reflect the influence of ideas such as the plasticity of intellectual development, the social model of disability, normalization, and the ecological and family systems perspectives.

References and Resources:
IDEA Reauthorized Statute: Part C Amendments in IDEA 2004
Office of Special Education and Rehabilitative Services (OSERS) United States Department of Education Washington, D. C. Available 24FEB2009:  

P.L. 108-446 Title I Amendments to the Individuals with Disabilities Education Act
U.S. Copyright Office, Washington, D. C.

Council of Parent Attorneys and Advocates, Towson, MD
Early Intervention Foundations

Chapter 3: Legal Foundations of Early Intervention
Lesson 2: Part C Provisions and Requirements

IDEA: An Act in 4 Parts

A. General Provisions
B. Assistance for Education of All Children with Disabilities
C. Infants and Toddlers with Disabilities
D. National Activities to Improve Education of Children with Disabilities

It is the policy of the United States to provide financial assistance to States--

1. to develop and implement a statewide, comprehensive, coordinated, multidisciplinary, interagency system of early intervention services;
2. to facilitate coordination of payment for early intervention services from Federal, State, local, and private sources;
3. to enhance State capacity to provide quality early intervention services and expand and improve existing services; and
4. to encourage States to expand opportunities for children under age 3 who would be at risk of having substantial developmental delay.

Congress Finds that there is an urgent and substantial need--

1. to enhance the development of infants and toddlers with disabilities, to minimize their potential for developmental delay, and to recognize the significant brain development that occurs during a child's first 3 years of life;
2. to reduce the educational costs to our society, including our Nation's schools, by mitigating the need for special education and related services after infancy and toddlerhood;
3. to maximize the potential for them to live independently in society;
4. to enhance the capacity of families to meet the special needs of their infants and toddlers with disabilities; and
5. to encourage States to expand opportunities for children under age 3 who would be at risk of having substantial developmental delay.

What is a “Developmental Delay”? The term “developmental delay,” when used with respect to an individual residing in a State, has the meaning given such term by the State under section 635 (a)(1).
What Does the term “Infant or Toddler with a Disability” Mean?

- An individual under 3 years of age who needs early intervention services because the individual:
  - is experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures in 1 or more areas of cognitive development, physical development, communication development, social or emotional development, and adaptive development; or
  - has a diagnosed physical or mental condition that has a high probability of resulting in developmental delay.
- States may also include at-risk infants and toddlers, and children who are eligible for services under section 619.

“Early Intervention Services” Means Developmental Services That:

- Are provided under public supervision
- Are provided at no cost except where Federal or State law provides for a system of payments by families
- Are designed to meet the needs of the child in:
  - Physical development
  - Cognitive development
  - Communication development
  - Social or emotional development
  - Adaptive development
- Meet the state standards

Early Intervention Services Include:

1. Family training, counseling, and home visits
2. Special instruction
3. Speech-language pathology and audiology services, and sign language and oral language services
4. Occupational therapy
5. Physical therapy
6. Psychological services
7. Service coordination services
8. Medical services only for diagnosis or evaluation
9. Early identification, screening, and assessment
10. Health services necessary to enable the child to benefit from other services
11. Social work services
12. Vision services
13. Assistive technology devices and assistive technology services
14. Transportation and related costs

Who Provides Early Intervention Services?

Qualified personnel, including:

1. Special educators
2. Speech-language pathologists and audiologists
3. Occupational therapists
4. Physical therapists
5. Psychologists
6. Social workers
7. Nurses
8. Registered dieticians
9. Family therapists
10. Vision specialists, including ophthalmologists and optometrists
11. Orientation and mobility specialists
12. Pediatricians and other physicians

Early Intervention Services Must Be Provided:

- In natural environments
- In conformity with an Individualized Family Service Plan (IFSP)

The State is Eligible to Receive Part C Grants if:

- It has a policy that early intervention services are available to all infants and toddlers with disabilities and their families, including:
  - Infants residing on a reservation located within the state
  - Homeless
  - Wards of the state
- It has a statewide system that meets Part C requirements
16 Minimum Components of a Statewide System

1. Rigorous definition of "developmental delay"
2. Assurance that appropriate early intervention services based on scientifically based research are available to all
3. Timely, comprehensive, multidisciplinary evaluations and family directed identification of needs of family
4. IFSP and service coordination services for each child and family
5. Child find system
6. Public awareness program
7. Central directory
8. Comprehensive system of personnel development
9. Personnel qualifications
10. Lead agency
11. Policy for contracting with early intervention service providers
12. Procedures for timely reimbursement of funds
13. Procedural safeguards
14. System for compiling data
15. State Interagency Coordinating Council
16. Policies and procedures to ensure that, to the maximum extent appropriate, services are provided in natural environments

Assessment and Program Development

A statewide system must provide at a minimum for each infant or toddler with a disability, and the infant’s or toddler’s family to receive--

1. A multidisciplinary assessment of the child’s strengths and needs
2. A family-directed assessment of their resources, priorities, and concerns and identification of necessary supports and services
3. A written individualized family service plan developed by a multidisciplinary team, including the parents...including a description of the appropriate transition services for the infant or toddler

Review and Promptness

The statewide system must provide for:
- Annual evaluation of the IFSP
- Periodic review of the IFSP
  - At 6-month intervals or more often where appropriate based on child or family needs
- Prompt development of the IFSP after assessment
  - With parental consent services may commence prior to completion of assessment

The IFSP shall be in writing and contain--

- Child’s present levels of development
- Family’s resources, priorities, and concerns
- Measurable results
  - Including pre-literacy and language skills
- Necessary services -- frequency, intensity, and method
- Natural environments -- or justification for services in other environments
- Projected dates for initiation of services, and anticipated length, duration and frequency of services
- Name of service coordinator
- Steps toward transition to preschool or other services

Parental Consent

- Contents of the IFSP must be fully explained to the parents.
- Informed written consent obtained prior to provision of services described in IFSP
- Only those services to which consent is given shall be provided.

Procedural Safeguards

1. Timely administrative resolution of complaints by parents.
2. Right to confidentiality of personally identifiable information.
3. Right to accept or decline any early intervention services without jeopardizing other early intervention services.
4. Right to examine records relating to assessment, screening, eligibility determinations, and IFSP.
5. Procedures to protect the rights of the child whenever the parents are unknown, cannot be found or the child is a ward of the State. Procedures for assigning a surrogate parent to the child.
6. Written prior notice to the parents whenever the State agency or service provider proposes or refuses to initiate change in the identification, evaluation, or placement of the child or the provision of appropriate early intervention services to the child.

7. Procedures to ensure that parents are fully informed in their native language.

8. The right of parents to use mediation.

During the pendency of any proceeding or action involving a complaint by the parents, unless the State agency and the parents otherwise agree, the child shall continue to receive the appropriate early intervention services currently being provided or, if applying for initial services, shall receive the services not in dispute.

Philosophical and theoretical influences incorporated into provisions and requirements of Part C

<table>
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<th>Social Model of Disability</th>
<th>Normalization</th>
<th>Ecological &amp; Family Systems</th>
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<td>Experiences during early years can enhance individual development and promote positive outcomes</td>
<td>Families are empowered as decision-makers</td>
<td>Intervention occurs in natural environments</td>
<td>Both public and private resources address challenges</td>
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<td>People First language</td>
<td>Transition to preschool or kindergarten is planned</td>
<td>Family priorities, resources, concerns, culture and language are honored</td>
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