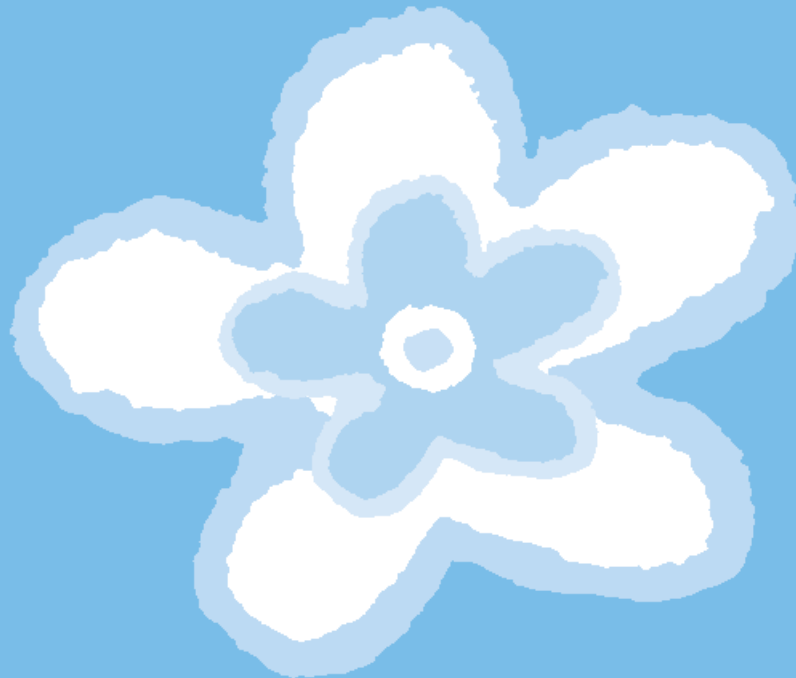


Revised July 2008

CONNECTICUT BIRTH TO THREE SYSTEM



# A Family Handbook

Guide II

**Orientation to Services**



# A Family Handbook

## Guide II: **Orientation to Services**

Revised July 2008

### **MY IMPORTANT INFORMATION**

Name of my program: \_\_\_\_\_

Others: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

My program's director: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

My service coordinator: \_\_\_\_\_

Phone: \_\_\_\_\_

IFSP Dates: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*This handbook & others are available at [www.birth23.org](http://www.birth23.org)*

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# Ten Things Every Parent Should Know About Birth to Three BEFORE They Begin Services

- 1. Birth to Three is not a medical program that treats your child.** You are an integral part of your child's Birth to Three program. While you may not be a trained specialist in the area of your child's delay, your team of professionals will demonstrate and show you techniques to use with your child. They will then coach you and your family on how to implement therapies into your child's daily routine.
- 2. The relationship that you develop with your Birth to Three team is an important relationship for both you and your child.** Don't be afraid to speak up if you think things are not going well. Communicate clearly to your team what you think your child needs. Collaborate with your team AND advocate for your child.
- 3. Based on your income you will be billed two months after services begin.** The cost reflects your income not the amount of services you receive. Birth to Three will also bill your health insurance plan. (see page 22)
- 4. All staff that work in Birth to Three are qualified professionals who must meet state personnel standards.** They are all carefully screened before hiring and closely supervised by their program.
- 5. You and your Birth to Three team create an individual family service plan that is tailor made for your child.** Your child's plan will not resemble anyone else's. It is completely individualized. It may also look different from what other states may offer.

Think honestly about what is **important** to you & what your child will need.



6. **Your doctor or specialist may prescribe a certain amount of hours of therapy for your child.** Keep in mind, Birth to Three uses a coaching model in working with children and families. Private therapists providing services in a clinical setting paid for by your insurance may work best for your family if you are interested in clinic-based services.
7. **More services do not necessarily mean you child will reach developmental milestones faster.** Every child's plan will reflect each unique situation.
8. **Sometimes a family and their Birth to Three team just don't click.** Birth to Three has at least two different programs in every town to give parents a choice. You may ask to transfer to a different program as soon as there is availability. If it is hard for you to share this with your service coordinator or program, contact the Family Liaison at 860-418-6136 or 866-888-4188, and she will help you make the change.
9. **Your Birth to Three team understands this may be a very emotional and stressful time for you and your family.** We will work hard to make things go as smoothly as possible for everyone. Sometimes it may seem that things are not happening as quickly as you would like them to. Be patient with us as we work to connect you to all the resources you and your child need.
10. **Never forget that as a parent you and your child have certain rights under federal law and Part C.** Please check the Parent Rights on page 37 to know what your rights are!



# Introduction

## *Welcome to the Connecticut Birth to Three System!*

Maybe you are relieved. Finally, the nagging feeling you had that your child was a little behind other children his age has been confirmed. Or maybe you have known since your child was born that he was going to face special challenges and need extra help. Right now you might be worried about whether he will ever catch up. One of the most wonderful things about **early intervention** is how rich and fertile your child's brain is right now. Your baby was born wired and ready to learn. Research has shown us that more learning and development occurs in a child's first three years than at any other time in their lives.

Getting early intervention supports will help your baby make all the powerful connections in his brain that will help improve his ability to learn and play. This is the

prime time for visual and auditory **development**, for language development and speech, for physical and motor development and for emotional and social development. Early help does make a difference!

This handbook will introduce you to the Connecticut Birth to Three System and be a guide and helpful resource throughout your time with us.

The mission of the Connecticut Birth to Three System is to strengthen the capacity of Connecticut's families to meet the

developmental and health-related needs of their infants and toddlers who have **delays** or **disabilities**. The System will ensure that all families have equal access to a coordinated program of comprehensive services and supports.

### Services & Supports . . .

- ✿ FOSTER COLLABORATIVE PARTNERSHIPS
- ✿ ARE FAMILY CENTERED
- ✿ OCCUR IN NATURAL SETTINGS
- ✿ RECOGNIZE CURRENT BEST PRACTICES IN EARLY INTERVENTION
- ✿ ARE BUILT UPON MUTUAL RESPECT AND CHOICE

**NOTE:** All **bold italic** words are explained in the glossary.

The Connecticut Birth to Three System may look different from what you or your medical provider may expect. It may also look very different from early intervention programs in other states. Birth to Three is not a medical program. Professionals will not work with your child while you watch or are in a nearby room. You are a very important part of your child's therapy team. The professionals working with your child will be including you in every session. They will coach you in ways to implement their therapies into your daily routines with your child. Research shows that children learn best with this method.

Our goal is to work closely with you to provide the kinds of supports that best meet your family's priorities and your child's needs. We will be talking about these supports throughout your time with Birth to Three. As your child grows and changes the kinds of supports your family will need may change as well.

Children learn best within their families.

## What is the Birth to Three System?



The Birth to Three System is an **entitlement** for Connecticut families whose children under three years of age have a significant developmental delay or disability and meet eligibility criteria. Early intervention services and supports for infants and toddlers are covered by a Federal law known as **Part C** of the **Individuals with Disabilities Education Act (IDEA)** which is under the U.S. Department of Education. The Connecticut Birth to Three System operates under State law 17a-248 and is operated by the Department of Developmental Services. Supports and services are provided by over fifty approved Birth to Three programs that work with families and caregivers throughout Connecticut. Each town is served by a minimum of two programs to give parents a choice within their community.

Birth to Three services and supports can begin at birth, if needed, and may last until your child no longer needs services or turns three years old. The Birth to Three System works with you so you can help your child make developmental progress in ways that are important for your child and your family.



## Why is my child *eligible*?

Your child was found to be eligible for the Birth to Three System in one of the following ways:

- ❁ A developmental delay was identified during a ***multidisciplinary evaluation*** of your child's abilities and needs in the areas of thinking, moving, communicating, relating to others, seeing or hearing.
- ❁ A specific medical diagnosis was identified by a professional that has a high likelihood of affecting your child's development, such as Down Syndrome or a hearing impairment.

## Why should I enroll in Birth to Three?

The first few years of your child's life are extremely important for brain growth and learning new skills. If your child is not developing as expected, early intervention offers:

- ❁ a valuable way for you to learn how to best help your baby grow and develop
- ❁ visits in your home from trained experts at predictable times; no traveling, no waiting rooms
- ❁ a multidisciplinary team that works together to support you in making daily routines a time for your baby to learn new skills
- ❁ a source of information about other valuable resources in your community.

Research has shown that not only do children and families benefit from effective early intervention, but enrolling as soon as a need is identified leads to better ***outcomes*** for your child and family. Children who receive early intervention are less likely to need special education in the future. Getting supports and services now will continue to help you and your child later.

# What is a service coordinator and what can I expect from her?

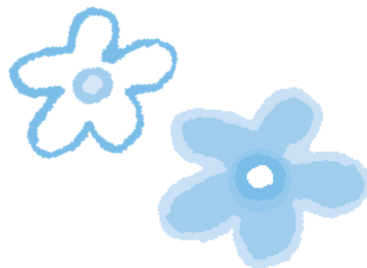
A service coordinator is someone on your **Birth to Three team** who will help you identify the resources you and your family need. She is responsible for bringing together the different people, information and resources that your child and family may work with. She is there to answer any questions you might have and to make what might seem confusing at first, more manageable.

## Your Service Coordinator Will . . .

- ❁ interpret evaluation, observations and results
- ❁ guide you in setting priorities for your child and family
- ❁ help coordinate services and information from different sources
- ❁ coach you on ways to teach your child new skills during your regular routines and activities
- ❁ help you find answers to questions you have about your child
- ❁ find opportunities for you to connect with other families
- ❁ help you talk with other specialists involved with your child and family, such as medical providers and childcare staff
- ❁ offer information on helpful state and community resources
- ❁ help with transition to preschool

Your service coordinator also has expertise in providing an early intervention service (such as physical therapy or special instruction), and has completed additional training to learn to coordinate that service with other services you receive.

Your service coordinator is the person on your Birth to Three team who will work closest with you to provide **service coordination**. You and the service coordinator are the team co-captains, while other members may include a teacher, physical therapist or speech pathologist, and your child's doctor. Your service coordinator will guide you through the early intervention system, and prepare you to leave it once services are no longer needed or your child turns three.





## How can I help my child?

You know your child best. Your Birth to Three team will enjoy learning from you about your child's interests, what helps him or her learn, and what he or she would rather avoid. Together, you will develop ways to help your child. You will learn from – as well as teach – the Birth to Three team working with your child.

Parenting is not always easy, especially when you may need some unique skills to help meet your child's special needs. You are your child's first and best teacher and **advocate**, with the passion, the dreams, and the commitment to guide your family through a series of decisions and special services.

As a parent advocate, you will have to understand and tell professionals, relatives, and friends about your family's priorities and concerns. Communicating with others about your child can sometimes be frustrating – especially when they have a different point of view or do not seem to understand you.

### Ways To Help People Understand Your Point of View

- ✿ have a sense of your priorities and those of your family
- ✿ have a clear idea about what you want for your child
- ✿ know what your child likes and dislikes
- ✿ share what makes you proud of him or her
- ✿ be aware of and understand your own feelings and those of others
- ✿ be open to working with your Birth to Three team on creating a plan for your child and family.

All children bring great joy to their families. But a child with special needs can also bring unique challenges. You and your family, together with your Birth to Three team, will talk about ways to meet those challenges. You will choose goals that fit your child and family and make sense to you. From these goals you and your team will develop a written plan called the **Individualized Family Service Plan (IFSP)**.

## What is an IFSP?

Your IFSP is an agreement between you and the Birth to Three program providing early intervention services and supports to your child and family. The agreement itself and the form it is written on are both called the IFSP.

Your plan is a legal document designed to help everyone on your team understand what is going to happen, who is going to be involved, when and where supports will take place and for how long. As your family changes, supports should also change to reflect your needs and choices. You and your service coordinator will check the IFSP at least every six months or as needed to make sure it still fits your priorities and your child's and family's needs.

## What is an IFSP meeting?

You, as the parent(s) or caregiver, and your service coordinator must be present at all IFSP meetings. The first IFSP meeting will also include a person who helped to gather and complete the developmental evaluation and assessment information about your child. You may invite oth-

ers to attend the meeting such as family members, your childcare provider, and any friend or provider that you feel should be involved. If they cannot attend, their information can still be shared and included in the plan. Another important person is your child's physician, who will be contacted for his or her input. Your child's physician must sign the IFSP before services can begin.

The more involved you and your family members are in the IFSP meeting, the more meaningful your plan will be. Think honestly about what is important to you and what your child will need. Read the evaluations and assessments describing your child before the meeting and ask any questions you have. Your service coordinator will ask you to share information about your child and family, so think about the questions on the next page before the IFSP meeting.



### Important Information About Your Child & Family

- ❁ What does your child like? Dislike?
- ❁ What frustrates your child?
- ❁ What does your child do during the day?
- ❁ Are there any significant changes in your life or your child's life that may contribute to behavioral changes in your child.
- ❁ What things do you like to do as a family? With friends?
- ❁ Which people and agencies do you find helpful?
- ❁ What are your family's strengths in meeting your child's needs?
- ❁ What else do you want the team to know about your child or family?
- ❁ What is there about your answers to these questions that you want early *intervention services* to help you change?

All team members, including you and your family will work together to develop the IFSP. This will be done by reviewing information, making choices, and developing IFSP outcomes. The outcomes are the changes that you and your family have decided you want to work towards achieving. During these discussions, you will agree on the strategies you will use to reach those outcomes. You will also decide on activities and early intervention services that will support your goals for your child and family.

The plan is tailor made to meet the needs of your child and your family. Your child's plan will not resemble anyone else's. It is completely individualized. It may also look very different from what other states have to offer you.



You and the other members of your team need to trust and respect each other's expertise when reaching an agreement about what should be included in the IFSP. All Birth to Three team members need to actively participate in sharing information and making decisions. The outcomes you want for your child and family are important to you. Your team will work hard to identify the strategies, activities, and early intervention services that will be put in place to address those outcomes.

**Think honestly about what is important to you and what your child will need.**

## Supports and Services Under IDEA, Part C

Your Birth to Three team will look at one or more of the following early intervention services and supports that may help you reach your IFSP outcomes:

### Early Intervention Services & Supports May Include . . .

- ✿ service coordination
- ✿ specialized instruction
- ✿ *speech and language services*
- ✿ audiological services
- ✿ *physical therapy (PT)*
- ✿ *occupational therapy (OT)*
- ✿ family training, counseling, and home visits
- ✿ health services necessary to benefit from other *early intervention services*
- ✿ medical services for Birth to Three diagnostic or evaluation purposes only
- ✿ nutrition services
- ✿ *assistive technology* devices and services
- ✿ psychological services
- ✿ social work services
- ✿ vision and mobility services
- ✿ transportation or mileage reimbursement when necessary to receive other *early intervention services*

NOTE: *italicized* services and supports are explained in the Glossary



# What will the IFSP look like?

## Cover Page

This page contains information about your child, family, health care provider, school district, and service coordinator. Information is often gathered ahead of time and filled in on the form before the meeting. Your service coordinator will use the bottom of the page to record information about your local school district. This includes the name of your school district, a contact person and telephone number, and a suggested date for you to refer your child if you feel that your child may need special education services at age three.

**INDIVIDUALIZED FAMILY SERVICE PLAN**

\*Date: \_\_\_\_\_ \*Type of meeting:  Intermittent IFSP  Initial IFSP  Annual  Review

  
Connecticut  
Birth to Three  
System

\*Child's Name: \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_  Male  
 Female

Parent/Foster Parent/Guardian/Family Member (circle one)			Parent/Guardian/Family Member (circle one)		
*Name			*Name		
*Address			*Address		
*City	*State	*Zip	*City	*State	*Zip
*Phone (day)	(Evening)		*Phone (day)	(Evening)	
*Primary Language			*Primary Language		

\*Surrogate Parent: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*Service Coordinator/Program: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*Physician/Health Care Provider: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*School District: \_\_\_\_\_ Contact Person/Phone: \_\_\_\_\_

\*Recommended school district referral date, no later than \_\_\_\_\_ (Refer the child any time after the 2<sup>nd</sup> birthday. The decision to refer must be made no later than age 2 1/2.)  date  \*Check if release to LEA (form 3-3) is on file

\*Denotes part of the electronic record.  date  \*Check if referral to LEA (form 3-4) is on file

Connecticut Birth to Three Form 3-1 (Revised 7/1/06) BirthOrder Document



## What will the IFSP look like? CONTINUED

### Summary of Family's Concerns, Priorities, and Resources as They Relate to Enhancing Their Child's Development (Section II.)

This section identifies your concerns, priorities, and resources so that the IFSP can best reflect your individual family. The information is used to develop outcomes that you want for your family and to plan services that make sense for your child and family. For instance, many parents of young children would like additional sources of information or support. Your service coordinator is available to discuss this and work with you to identify resources that might be helpful.

### Other Services That Are in Place or Are Needed (Section III.)

This section lists other services that are not early intervention services covered by the Birth to Three System. This includes services that your family is already using or seeking. Some examples are medical, recreational, religious, or social services.

**NOTE:** All **bold italic** words are explained in the glossary.

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION II. SUMMARY OF FAMILY'S CONCERNS, PRIORITIES, AND RESOURCES AS THEY RELATE TO ENHANCING THEIR CHILD'S DEVELOPMENT - Family Outcome**

1. Information about our family for the IFSP: (Suggestions)

- Things we like to do as a family
- Who is part of our family?
- Important events that have occurred
- People and agencies we find helpful
- Our family's strengths in meeting our child's needs
- How our child's current needs affect our family

2. What would be helpful for our family in the months and year ahead? (Family Outcome)

3. What assistance or information will we need to achieve this outcome? (Strategies)

**SECTION III. OTHER SERVICES THAT ARE IN PLACE OR ARE NEEDED**  
Services such as medical, recreational, religious, social and other child related services, not covered by the CT Birth to Three System, that contribute to the plan.

Resource/Program/Support Service	# of Needed	Payment Source

Connecticut Birth to Three Form 3-1 (Revised 7/1/06) Confidential Document



## Plan for Transition from the Birth to Three System (Section IV.)

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ Date \_\_\_\_\_

**SECTION IV. PLAN FOR TRANSITION FROM THE BIRTH TO THREE SYSTEM TO PRESCHOOL SPECIAL EDUCATION OR OTHER APPROPRIATE SERVICES**

1. Information that would be helpful for our child and family to plan for the future. \*Community program options \*LEA information \*Referral process \* Rights and responsibilities \*Parent training \*Visiting community programs \*Adaptive equipment \*Transportation \*Time with other children \* Information sharing.

2. What are the next steps? | Who will be involved? | Date to be completed?

2. What are the next steps?	Who will be involved?	Date to be completed?

After the initial IFSP meeting, this plan may only be modified at an IFSP periodic review meeting or annual IFSP meeting.

Connecticut Birth to Three Form 3-1 (Revised 7/1/06) Confidential Document

This section helps to remind you and your service coordinator that Birth to Three services will eventually end for you and your child. Leaving the Birth to Three System and moving on to other services or resources is called **“transition.”** Transition may happen when your child has achieved the outcomes selected by you and your Birth to Three team, or it may happen when your child turns three. This section prepares you for a smooth transition to other activities so they can be ready to start when you need them.





## Early Intervention Services and Supports (Section VI.)

This section names the early intervention services and supports that will be used to work on the outcomes in Section V. As each service is listed, you will discuss and agree on who will provide it, where, how often, and for how long. This section indicates any payment sources for these services other than the Birth to Three System (which includes insurance and parent fees).

It is important that these supports fit within your child's typical daily routines across different **natural learning opportunities** (including various activities and places in your home, your child's day care, a neighborhood play group,

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ Date \_\_\_\_\_

**SECTION VI. EARLY INTERVENTION SERVICES AND SUPPORTS**

*What is going to happen (including assistive technology)	*Delivered by: (Discipline responsible)	*Location	*How Often	*How Long	*Start Date	*End Date

Check here if additional pages are attached to list or clarify the services being provided or the schedule of services.

Primary service location codes: \*Home (parenting designed for typical children), \*Hospital (inpatient), \*Residential facility, \*Service provider office, \*In-home designed for children with delays, \*Other

\*Check if any early intervention service cannot be achieved satisfactorily in a natural environment and attach a justification for each service.

Informed Consent by Parents. Check and sign below:  
Under IDEA Part C: **and**

1: \_\_\_\_\_ I understand my rights under this program and received a written copy of Parent Rights  
**OR**

2a: \_\_\_\_\_ I give permission to carry out this Individualized Family Service Plan as written.  
**OR**

2b: \_\_\_\_\_ I do not accept this Individualized Family Service Plan as written, however I do give permission for the following services to begin:

Services are paid for by the Birth to Three System unless otherwise indicated:  
Service Coordinator/ Disciplinary Program Name/phone #: \_\_\_\_\_  
Service Coordinator is provided to all families at least monthly and is met after part of the early intervention visit.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_ Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

I have reviewed this Individualized Family Service Plan, which is based in part on an evaluation in all areas of development. I confirm the appropriateness of the diagnosis(es) as stated by the diagnostician (CCD-3) code and the recommendations for the treatment services as they are written.

Physician Signature \_\_\_\_\_ LIC# \_\_\_\_\_ Date \_\_\_\_\_  
\*Print Name \_\_\_\_\_ \*CCD-3 Code(s) \_\_\_\_\_

\*Denotes part of the electronic record

Connecticut Birth to Three Form 3-1 (Revised 1/1/06) Confidential Document



## What will the IFSP look like? CONTINUED

or other places where your child spends his days) so that the places are comfortable and familiar for you and your child. If there are special reasons why services cannot take place in your natural environments, your service coordinator will write this on the IFSP and must attach a page that explains and describes the reason.

### Informed *Consent* by Parents

Under Federal law, you must indicate that you understand your rights and give permission before services can begin. Your signature on the IFSP will indicate that you agree with the entire IFSP, or you give permission to begin one or more early intervention services as written while disagreeing about, or declining others. If you do not fully accept a new IFSP, you and the team need to try to resolve the issue. You may request the support of a neutral facilitator, at no cost to you. Contact the Birth to Three Office at 1-866-888-4188 for more information. In the meantime, the services that are agreed upon must be delivered



If you would like more information on your rights, please see pages 33-35 or refer to the brochure **Parent Rights Under IDEA Part C** given to you by your service coordinator.



DATE: \_\_\_\_\_ CHILD'S NAME: \_\_\_\_\_ CHILD'S ID: \_\_\_\_\_

SECTION VII - PHYSICIAN SIGNATURE

The following individuals have participated in the development of the IFSP and/or its implementation. There will be ongoing verbal communication between the IFSP team members listed below to assure the implementation of the IFSP.

Name	Relationship	Phone	Method of contact
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Meeting Notes: (discussion, specific scheduling issues, and any other issues)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Physician Signature

After you sign the IFSP, your child's physician will be sent a copy for his or her signature indicating agreement with the services and ICD-9 codes. ICD-9 codes give information about your child's medical condition(s), as required by health insurance plans.

## IFSP Team Members (Section VII.)

This section serves as a record of each person who participated in the development of the IFSP. This includes people who were at the meeting as well as those who provided information but did not attend.



# How can I change my supports and services?

## Review: Outcomes (Section R-1.)

As your child and family change, you will also want to change the outcomes you are working toward. Your service coordinator may suggest an IFSP review, or you may request a review at any time, even if your IFSP was recently completed. You and your service coordinator will look at your current IFSP, discuss what has changed and how this affects your child's and family's outcomes. Progress toward current outcomes and any new outcomes are recorded on Section R-1 of your IFSP.

**Section R-1: Individualized Family Service Plan (IFSP) Review: Outcomes**

Child's Name \_\_\_\_\_ COE \_\_\_\_\_ Review Date \_\_\_\_\_  Periodic review  
 Annual review

Date of IFSP being reviewed \_\_\_\_\_ Reason for review \_\_\_\_\_

Outcome #	Outcome(s)	Progress towards reaching family outcomes	Status

Outcome #	Outcome(s)	Progress towards reaching child outcomes	Status

Progress on Transition Plan: \_\_\_\_\_

Attach additional pages as needed and additional outcomes if developed.  
Connecticut Birth to Three Form 3-1 (Revised 7/1/06) Confidential Document



## Review: Services and Supports (Section R-2.)

Sometimes new outcomes are likely to be achieved by changing the specific techniques you learn to teach your child, without any change to your Birth to Three team members, or the type, frequency, or location of supports.

Other times, you may add or delete a certain service, or plan to have it more or less often. This review of services and supports is recorded on Section R-2 of your IFSP. Your consent must be given before any services change.

Section R-2 Individualized Family Service Plan (IFSP) Review: Services and Supports						
Child's Name _____ DOB: _____ Date of IFSP being reviewed: _____ Review Date: _____						
Result of Review: _____						
<b>SUMMARY OF REVISED EARLY INTERVENTION SERVICES AND SUPPORTS</b> (To be completed after review of outcomes)						
*What is going to happen (including assistive technology)	*Delivered by: (Discipline responsible)	*Location	*How Often	*How Long	*Start Date	*End Date
<input type="checkbox"/> Check here if additional pages are attached to list or clarify the services being provided or the schedule of services. <small>Primary service location codes: *Home (preparing designed for typical children) *School (inpatient) *Educational facility *Service provider office (preparing designed for children with delays/travel)</small>						
<input type="checkbox"/> *Check if any early intervention service cannot be achieved satisfactorily in a natural environment and attach a justification for each service.						
<b>Informed Consent by Parents. Check and sign below:</b>			<b>Services are paid for by the Birth to Three System unless otherwise indicated:</b>			
1. _____ I understand my rights under this program and received a written copy of Parent Rights Under IDEA Part C <b>and</b>			<b>Service Coordinator/Program/Discipline/Phone#:</b>			
2a: _____ I give permission to carry out this Individualized Family Service Plan as written <b>OR</b>			Service Coordinator is provided to all families at least monthly and is present after part of the early intervention visit			
2b: _____ I do not accept this Individualized Family Service Plan as written, however I do give permission for the following services to begin:						
Parent Signature _____ Date _____ Parent Signature _____ Date _____						
I have reviewed the revisions made to this Individualized Family Service Plan. I confirm the appropriateness of the diagnostic (ICD-9) code and the recommendations for the treatment services as they are written.						
Physician Signature _____			LIC# _____		Date _____	
*Print Name _____			*ICD-9 Code(x) _____			
*Denotes part of the electronic record						
Connecticut Birth to Three Form 3-1 (Revised 7/1/06) <span style="float: right;">Service Provider Document</span>						



## How much will I have to pay for these services?

The cost of services is almost entirely covered by state and federal dollars. However, in order to defray some of the cost to the state, the State Legislature made the decision to require insurance company billing and family contributions. By making these changes, the state is able to continue to provide services and supports to all eligible children and their families receive supports without delay.

There are two ways that you participate in helping to cover the costs: authorize billing of your health insurance company and make monthly payments on a sliding fee scale.



### Authorize Billing of Your Health Insurance Company

State law requires insurance companies to reimburse for early intervention services and guarantees that these payments are not counted against your child's annual or lifetime benefit caps. The Birth to Three System absorbs the cost of all insurance **copayments** and deductibles. Even if you receive an Explanation of Benefits letter from your insurance company showing a copay or **deductible** is owed, you **do not owe** a deductible.

If you have health insurance you will be asked to sign a form allowing your Birth to Three program to bill for reimbursement of services. If you have "**self-funded**" **health insurance** (where your employer pays the actual bills) or an out-of-state plan you will be asked for special permission to bill your plan. Self-funded and out-of-state health insurance plans are not required to follow the specific terms of Connecticut's insurance law, therefore your annual and lifetime caps are not automatically protected. Families with this type of health insurance are encouraged to talk with their plan administrator or employer to know how their child's annual and lifetime benefit caps may or may not be affected.

## Two Possible Insurance Payment Problems are:

**#1: You receive one or more Explanation of Benefits forms from your insurer indicating a balance owed to Birth to Three. *What do you do?*** Don't worry. This is an error made by your insurance company. Do not send a payment to your Birth to Three program. This insurance balance is absorbed by the Birth to Three System. The only payments (if any) you will ever make for Birth to Three supports will be sent to our billing contractor, Benefits Processing Services, after you receive your monthly bill.

**#2: You receive an insurance reimbursement check for Birth to Three services. *What do you do?*** You must repay your Birth to Three program because they should have received the payment, not you. If you do not return the payment to your Birth to Three program, the amount of the payment will be added to your balance owed to the Birth to Three System.


### Make Monthly Payments

According to federal law, you cannot be charged for:

- ❁ referral to the Birth to Three System
- ❁ the evaluation and assessment of your child to determine eligibility and needs
- ❁ the development of your child's plan (IFSP)
- ❁ the availability of a process to settle disagreements
- ❁ service coordination

You may request to receive only these services without paying a fee. However, state law requires that in order to receive any other early intervention services (e.g., specialized instruction – see page 11 for a complete list), you must make monthly payments as listed on page 26. You will complete a Family Cost Participation form that gives Birth to Three your income information before or at your first service visit. If you decline to provide your income information, indicate that on the form and you will be billed the highest amount on the appropriate scale. If you decline to fill out the form, no services will be delivered. It is important that every family contributes their share to cover the cost of services.





## How much will I have to pay for these services? CONTINUED

**Table One** tells you the amount you will need to pay if you give **consent** to have your insurance billed for reimbursement or if your child has no health insurance.

**Table Two** tells you the higher amount you will need to pay if you do not authorize insurance billing. For both tables, find your federal **adjusted gross annual family income** in the left-hand column, then look across that line to find your family size. Your family size is the number of people related by birth, marriage or adoption who live together in your home. You will receive a monthly bill from our billing contractor, Benefits Processing Services, for that amount. Payments may be made by check, VISA, MasterCard, American Express or Discover and help to cover the cost of services provided to your family during the previous month.

You make only one payment per month, even if you have more than one child enrolled in Birth to Three. Payments are based on your income, family size, and ability to pay – not on the number of services your family receives in a month. If there are no services for an entire month, no bill is sent, unless you cancelled a

scheduled visit with less than 24 hours notice. You are billed only for full months of enrollment beginning after the second full month of enrollment. No bill is sent if you started receiving Birth to Three visits after the first day of the month or your child exited before the last day of the month.

Birth to Three has the ability to check the information you provide on your Family Cost Participation Form with your most recent state tax return. If your current family income is significantly different than last year, please report your current income and write a note explaining this on the form.

If you feel that your adjusted gross annual income is not a true reflection of your family's ability to pay due to specific extraordinary expenses, you may request an adjustment to your payment obligation. Talk with your service coordinator for assistance in completing **Form 1-9b, Application for Income Adjustment**. Attach documentation for each item you list as an extraordinary expense, and a copy of your most recent federal income tax return. Send it to the Birth to Three Benefits Processing (see page 53) and describe that documentation on the form. Missing or incomplete documentation for an expense will delay any adjustment for that

item. Any other expenses with complete documentation will be reviewed for possible adjustment. Within one week of receiving your application, they will respond in writing with the decision.

If you disagree with the decision or the amount of the adjustment, you may appeal within 30 days and an administrative review hearing will be scheduled. You must personally appear at this hearing or the appeal will be cancelled.

If your allowable extraordinary expenses reduce your adjusted gross family income enough to lower your monthly payments, the letter will tell you the amount of your future payments. Approved adjustments apply to future payments only and may not be retroactive, so it is important to complete and submit your application with all documentation as soon as possible.

### **Allowable Extraordinary Expenses**

❁ Please see the Appendix on page 47 for a description of allowable extraordinary expenses and required documentation.

If your family income or extraordinary expenses change, tell your service coordinator that you need to file a new financial information form or application for income adjustment form or both, because either one may affect your payment obligation.

If you fall behind in your payments and the amount you owe equals three monthly payments or more, you and your Birth to Three program will be notified that most services are suspended. Service coordination, periodic assessment, IFSP development and evaluation, and procedural safeguards can continue to be provided at no cost.

### **An Important Point**

❁ Tell your service coordinator if your health insurance coverage or income changes since this will affect your cost participation.





## How much will I have to pay for these services? CONTINUED

### Monthly Family Cost Participation

Family Adjusted Gross Income	TABLE #1*				TABLE #2**			
	Family Size				Family Size			
	3 or fewer	4	5	6 or more	3 or fewer	4	5	6 or more
Less than \$45,000 (or Medicaid eligible) . . . . .	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
\$ 45,000 – \$ 55,000 . . . . .	\$ 15	\$ 10	\$ 5	\$ 5	\$ 30	\$ 20	\$ 10	\$ 10
\$ 55,001 – \$ 65,000 . . . . .	\$ 20	\$ 15	\$ 10	\$ 5	\$ 40	\$ 30	\$ 20	\$ 10
\$ 65,001 – \$ 75,000 . . . . .	\$ 25	\$ 20	\$ 15	\$ 10	\$ 50	\$ 40	\$ 30	\$ 20
\$ 75,001 – \$ 85,000 . . . . .	\$ 35	\$ 30	\$ 25	\$ 20	\$ 70	\$ 60	\$ 50	\$ 40
\$ 85,001 – \$ 95,000 . . . . .	\$ 65	\$ 60	\$ 55	\$ 50	\$130	\$120	\$110	\$100
\$ 95,001 – \$105,000 . . . . .	\$ 75	\$ 70	\$ 65	\$ 60	\$150	\$140	\$130	\$120
\$105,001 – \$125,000 . . . . .	\$ 95	\$ 90	\$ 85	\$ 80	\$190	\$180	\$170	\$160
\$125,001 – \$150,000 . . . . .	\$120	\$115	\$110	\$105	\$240	\$230	\$220	\$210
\$150,001 – \$175,000 . . . . .	\$145	\$140	\$135	\$130	\$290	\$280	\$270	\$260
\$175,001 and over . . . . .	\$170	\$165	\$160	\$155	\$340	\$330	\$320	\$310
I do not wish to disclose our income . . . . .	\$170	\$165	\$160	\$155	\$340	\$330	\$320	\$310

\*TABLE #1 applies to families who consent to health insurance billing or who have no health insurance.

\*\*TABLE #2 applies to families who have health insurance but who do not consent to billing.

# What are my responsibilities?

As the most important member of your child's Birth to Three team, it is your responsibility to be an active participant in every visit. Your Birth to Three team members will involve you by demonstrating new skills and techniques they are working on with your child. They will make sure you understand everything they are doing

## The following are some ways you can actively participate during a visit

- ✿ Share any relevant information that happened since the last Birth to Three visit that might impact your child.
- ✿ Hold or sit close to your child and practice new teaching techniques and ways of learning together.
- ✿ If the television is on, turn it off so you can focus on learning how to teach your child new skills.
- ✿ Do not plan to take care of chores, return phone calls, or be in another room while the early interventionist is in your home

and that you feel comfortable practicing these new skills with your child both during and between visits.

Early intervention visits are like coaching sessions where Birth to Three staff teach you new ways of teaching your child. You can then work on goals with your child during playtime, meals, bath time, and other daily activities. Try to make learning fun for your child!

If you cannot be available for a visit, call at least 24 hours ahead to cancel. Then you can reschedule at a time that is convenient for both you and the provider.

It is also important to remember that services and supports are flexible and adjustable. If your child is not making the progress you expect and have planned for, discuss this with your service coordinator.

It is your responsibility to talk with her or him about new things you see your child doing, or things you expected to see that he is not yet doing, so that you can plan together for changes.





# How do I get the most out of my visit?

## BEFORE Your Visit:

- ❁ **Be prepared.** Make sure you schedule your visit when you can be there and not have a lot of distractions. Decide how brothers and sisters will be involved or plan an activity for them.
- ❁ **Turn off your phone, television, radio** and anything else that might distract you from your visit. Let family and friends know that during your child's visit, you won't be available.
- ❁ **Make sure to choose a time where your child is alert and well rested.**
- ❁ **Plan the agenda.** Let the Birth to Three staff know what you want to discuss at your visit. Remember or write down any questions that you may have since your last visit.
- ❁ **Be ready to share what has happened since your last visit.** Think about or make a list of anything you think is important to share such as a trip to the doctor or changes in routine. Think about what suggestions have worked well and those that have not worked so well.





### DURING Your Visit:

- ❁ **Ask questions.** Make sure you understand what is being said. If you are not sure why something is being done, just ask. If it helps, ask for things in writing.
- ❁ **Ask for another demonstration.** Ask to be shown again, anything you don't understand. Practice strategies together during the visit. Hands-on instruction is the best way to learn.
- ❁ **Discuss ideas for carry over between visits.** Practice time between visits is just as important as the visit itself. Be sure to talk about ways to use the strategies and activities during everyday family activities.

### AFTER Your Visit:

- ❁ **Try things out.** Try out the suggested activities. What is working? What isn't?
- ❁ **Make a note of it.** Remember to make a mental note or keep a notebook for questions that may come up between visits.
- ❁ **Have fun.** The best teaching and learning occurs when you and your child are having fun.



**Celebrate  
Successes!**

Even the  
tiny ones!!

Look at **playing** with your child as an opportunity to practice new skills. Try to make learning fun!



## Frequently Asked Questions

**Q** How do we decide how often my child will need services?

**A** How often you and your child are coached by your early intervention team depends on a number of things:

- ❁ Your child's individual needs
- ❁ How long your child can practice new skills before getting tired
- ❁ How quickly your child learns new things, since some children need more practice than others before fully mastering a new skill

The visit schedule may change over time. You and your Birth to Three team will measure your child's progress and make changes to your IFSP when needed.

**Q** My doctor and the team of specialists who have worked with my daughter in New York have prescribed specific amounts of times they feel my child should receive OT, PT and speech. Shouldn't my Birth to Three team honor these prescribed amounts?

**A** Doctors' suggestions are certainly considered when you and your Birth to Three team sit down to an IFSP meeting. However, you and your team will discuss your child's individual needs and abilities and develop an IFSP based on that. You may decide on a different amount of services. The decision is based on your child's unique situation, with input from you, your Birth to Three team and your medical providers. Your doctor may not be aware that Birth to Three services are carried out during daily routines. When your doctor and Birth to Three provider have different recommendations, it is helpful for them to talk with you and each other.

**Q** Why is my child's teacher talking with me about his speech needs? Don't I need someone who is an expert in speech and language?

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**A** Your program's staff "team" with you and each other to reduce the number of people with whom you need to coordinate services and recommendations. Your service coordinator's job is to make sure that information gets shared across everyone on your team who is listed on your IFSP. Everyone on your team must periodically spend time with you and your child, but this transdisciplinary teaming across professional specialties cuts down on the number of phone calls you need to make and receive, and reduces the number of different people you and your child need to get used to and fit into your schedule. Your child and family still get the special knowledge of all the different professionals on your team with fewer demands on your time.

**Q** Would my child improve faster if he got services five times a week instead of once a week?

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**A** Imagine that you are learning to play a musical instrument. You would quickly learn the importance of practicing between your lessons. Taking three or even five lessons each week would not speed up your learning process without practice. Children also develop by using new skills over and over during their daily lives. Time between visits is the most important time for learning. During visits, you and your Birth to Three staff choose the skills you will work on and figure out how you can practice them during mealtimes, bath times, and other daily activities. This helps your child work on new skills many times each day. *It is this practice that counts!*





## Frequently Asked Questions CONTINUED

**Q** If my child doesn't seem to be making progress, does that mean that he needs more services?

**A** Sometimes children seem to pause in their development in one area while they focus on growth in another. When your child's progress appears to have slowed it is time for your team to talk about what is happening, and

- ❁ Look at the strategies that are being used
- ❁ Consider what is working and what is not
- ❁ Talk with your team about how progress toward achieving the outcomes is being measured.

This is often more effective than increasing the frequency of services.

**Q** What if my doctor and Birth to Three provider have different recommendations on how often my child needs services?

**A** Sometimes your provider and doctor may have different recommendations because they are familiar with different ways of evaluating children and delivering services. The provider's job is to help your family understand and meet your child's *developmental* needs throughout everyday activities. The medical doctor may be looking for a provider or therapist to treat a *physical* or health problem directly. The doctor may not be aware that Birth to Three services are carried out during daily routines. When your doctor and Birth to Three provider have different recommendations, it is helpful for them to talk with you and each other.

**Q** Do we need to get therapy in a clinic, where there are fewer distractions and more specialized equipment?

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**A** A clinic setting is only used when specific equipment that is not transportable is necessary to achieve an outcome, for example ongoing audio-logical services. Children learn best when they are comfortable and happy. When children learn skills in a clinic, they may not be able to use those skills outside of the clinic. It is important for children to learn new skills in many places and with different people. Therapy that “fits” your own home and routine is easier to practice during everyday life.

**Q** Who Me? How can I be expected to practice physical therapy (for example) if I am not trained as a physical therapist?

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**A** Everyone who works in Birth to Three, including physical therapists, has expertise in their specialty, but you are the expert on your child and his life. The therapist’s role is to teach you ways to help your child grow and develop. The practicing you do with your child during your daily time together is more important than the brief therapist’s visit for helping your child really learn new skills.

**Q** I work all day. Can my program’s staff work with my babysitter or childcare center teacher?

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**A** It is important that everyone who takes care of your child knows how to meet his special needs and teach him new skills, including people who care for him while you are at work. Your involvement as his parent is most important, so building in a method for you to receive the information shared with other caregivers is critical for your





## Frequently Asked Questions CONTINUED

child's success. Birth to Three staff will work with all of you to help your baby learn – at home, at the babysitter's, and in the community.

**Q** My son has been using a stander (a piece of assistive technology equipment) while in Birth to Three, but we're getting ready to transition in a few months when he turns three. Do I get to keep his equipment?


**A** All **assistive technology** devices should be listed on your IFSP, including who paid for it. If you or your insurance company paid 51% or more of the cost for the item, it belongs to your family and you keep it. If Birth to Three paid 51% or more, it belongs to the Birth to Three System. You may continue to use the item, even after your child turns three, but when it is no longer needed or is outgrown, please return it to your Birth to Three program.

**Q** I already pay state and federal taxes, so why do I have to pay the state again for early intervention?

**A** Payments for early intervention are not a tax, but a fee for receiving services. This is similar to other fees that the state collects for items such as licenses, permits, registrations, or inspections.

**Q** My friend gets twice as many early intervention visits per month as I do, yet our income and family size are the same so we pay the same monthly fee. Why doesn't she need to pay more?

**A** The frequency of early intervention visits is based on the child and family's needs, while the monthly fee is based on the family's ability to pay which is determined by income and family size. Your friend's child or family may have more significant needs requiring more frequent service visits.



**Q** Since I'm paying for early intervention, can I ask for more early intervention visits?

**A** The decision about whether more visits are recommended is not related to payments in any way. You can talk with your service coordinator at any time about reviewing your IFSP due to changes in your child's or family's needs. However, making monthly payments does not entitle you to more frequent visits.

**Q** Is the state trying to make a profit by collecting from both families and health insurance companies?

**A** No. The costs of providing early intervention are always greater than the funds collected from these two sources. The annual cost to the State is at least \$8,112 per child per year. Total income from a family's health insurance reimbursements cannot be more than \$3,200 per calendar year under state law. A parent's monthly payments cannot be more than \$2,040 over twelve months. This leaves a gap of almost \$3,000 for every child per year.

**Q** I don't like the person who is coaching me and my child. Can I get a different provider?

**A** You can always talk with your provider about your concerns, or the program director may be able to have a different team member work with you and your child. Keep in mind that your team is made up of people with specific kinds of training and expertise to match your objectives for your child and family. Your Birth to Three program may or may not have a second qualified staff person to accommodate your request.



## Frequently Asked Questions CONTINUED

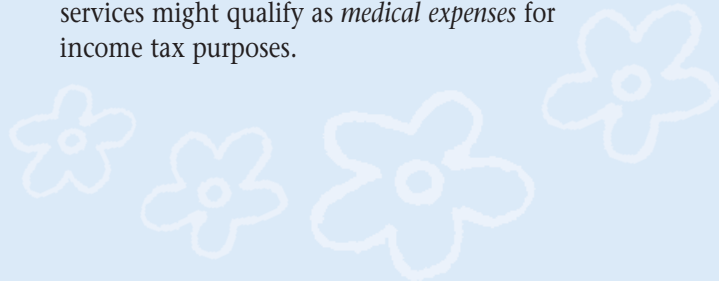
**Q** My family is planning to move next month. How will this affect our early intervention sessions?

**A** Tell your service coordinator if you are moving so they can help you prepare for this change in your family life. If moving out-of-state, your service coordinator can help put you in contact with that state's early intervention system. If you are moving to a new town in Connecticut that is served by your current program, you may not need to change anything on your IFSP. If your current program does not serve your new hometown, your service coordinator will contact the Child Development Infoline to see which programs have an opening to work with families in that town. Once you choose a new program and give written permission, your current service coordinator will transfer your early intervention records to the new program. Then the new program will contact you to schedule an IFSP review so that you can make decisions with your new team members about your goals for your child

and family and how best to meet them. Your IFSP outcomes and strategies probably won't change very much, but the exact service schedule and personnel probably will change. Telling your service coordinator about a family move as soon as it is decided can help prevent a long delay between your last session from your current provider and the first session with your new provider.

**Q** Are my monthly early intervention payments tax deductible?

**A** They may be, but individual circumstances vary widely and the IRS tax code is subject to change. Please consult with your tax preparation professional to determine whether your child's particular services might qualify as *medical expenses* for income tax purposes.

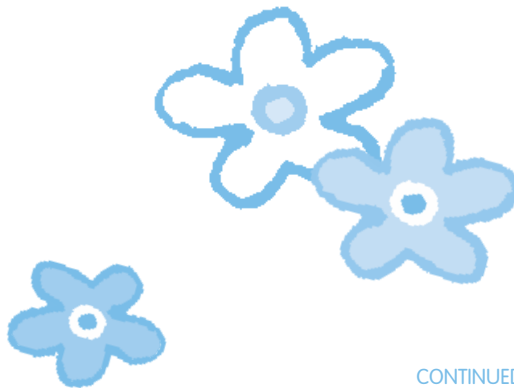


# What are my rights?

The IDEA gives you certain rights under the Birth to Three System beginning immediately with your first contact with Birth to Three, whether you called to refer your child or someone else did. If at any time you are not sure of your rights, please talk with your service coordinator, program director, or call the Birth to Three Family Liaison or the Child Development Infoline. Your service coordinator should also give you a brochure called, Parent Rights Under IDEA Part C, that describes your rights in more detail. Here is a brief summary:

- ❁ **You have the right to give written permission before your child is evaluated**, before services begin or change, and before any information about your child or family is shared with anyone.
- ❁ **You have the right to be notified** before any action takes place. You must be told in advance about any meetings, evaluations, services, or actions affecting your child under the Birth to Three System. This is called prior written notice. You will be asked to sign forms given to you by your service coordinator to show you agree. You can change your mind at any time.

- ❁ **You have the right to an Individualized Family Service Plan (IFSP) delivered by a team that includes you and anyone you want to invite.** Meetings to develop or review an IFSP should be at a convenient time and place for you and your family. IFSP meetings must be held in your native language or other mode of communication you need, such as Braille or sign language, unless it is not possible to do so. You may ask for an interpreter to help you understand and actively participate in the IFSP discussion. You have the right to request an IFSP meeting at anytime to review, change, discontinue or add a different service that will help you and your family reach your outcomes. You also have the right to postpone a meeting in progress if needed.





## What are my rights CONTINUED

- ❖ **You have the right to privacy.** Information about your child or family is ***confidential***. Only select Birth to Three staff, ***Lead Agency*** auditors, and ***accrediting agencies*** can review your child's record without your specific written consent.
- ❖ **You have the right to examine your child's record.** An electronic record is begun at the time your child is referred, and is updated until you exit. Your service coordinator also maintains a folder with important papers. You may schedule an appointment to examine these records at any time. If you do not understand anything in the record, it will be explained to you. If you do not agree with something in the record, you can request to have it changed.
- ❖ **You have the right to disagree with the Birth to Three System.** There are four ways to do this.
  1. Very often the quickest and most satisfying way to resolve a concern is to talk with your service Coordinator. If you feel uncomfortable doing this you can also speak to the program director of your Birth to Three program. If you are uncomfortable

doing this or you feel the problem has not been resolved you may contact the Family Liaison at Birth to Three Central office. She will try to understand the problem and work with you and your Birth to Three program to make adjustments to meet the needs of the situation. In many situations a simple explanation of why something is usually done in a certain way is all that is needed to resolve the problem.

2. If this is not successful or if you choose, you may also file a written complaint. The letter should be addressed to:

Linda Goodman, Director  
CT Birth to Three System  
460 Capitol Avenue  
Hartford, CT 06106-1308

and must include your name, address, and phone number; the name and address of the program or person that you are complaining about; plus a statement of what the complaint is about. It would be helpful to also include the best days and times that you can be reached by telephone.

The Director will then ask a Birth to Three manager



or an independent person to investigate your charges. That person will contact you to see if you have any additional information that you want to submit. The Director will send you a written response within sixty calendar days that will include:

- The facts and conclusions
  - The reason for the decision
  - The corrective actions, if needed, that will be taken
3. Another way to resolve a disagreement is to write to the director to request **mediation**. Mediation allows you and your program's staff to talk about the details of your disagreement with an impartial, trained mediator. The mediator will work with you and your program to find a solution that suits both of you, then write up the terms of your agreement. Mediation works well in many situations, and you are encouraged to consider this option, but you are not required to use mediation.
4. You may also write to the Family Liaison to request a **due process hearing**, a more formal process conducted before an impartial hearing officer. You would usually have legal counsel or another person

with professional knowledge of your child represent you. The Birth to Three System would be represented by an Assistant Attorney General.

Witnesses are called to testify and are cross-examined, evidence is presented, and shortly after the hearing ends, the hearing officer issues a written decision. The hearing is provided at no cost to you, but you must pay for any professionals that represent you.

You can request a brochure on mediation or due process hearings from the Family Liaison.

While a complaint is being resolved in any of these ways, you have the right to continue receiving services not in dispute until your child turns three or unless you and Birth to Three agree that this is not in your child's best interest.



Visit us on the web!

[www.birth23.org](http://www.birth23.org)



## How can I get more involved?

There are many ways that you and your family can get involved with the Birth to Three System beyond the service and support activities specifically designed for you. The Birth to Three System depends on your ideas and information to keep supports and services family-centered. Think about what is important to you, when you are available, and the kinds of activities you are interested in. Here are some examples:

- ✿ serving on committees or task forces created to address a specific topic
- ✿ reviewing written materials
- ✿ responding to surveys or phone interviews about Birth to Three
- ✿ participate with your State or Local Interagency Coordinating Council

To find out more about these and other possibilities, contact the Support Line at 1-866-888-4188.

### CT Family Support Network

Birth to Three enjoys partnering with the Connecticut Family Support Network (CTFSN), which is a network of families who have children with disabilities that work to:

- provide telephone support
- provide opportunities to meet other parents
- advocate for local and state program and services
- help with preparation for your IFSP
- hold parent support group meetings
- connect families with their local legislators
- help transition to special education
- provide access to informational workshops and statewide resources

To join a parent listserv and connect with other families, contact the CTFSN at this toll free number 1-877-376-2329 or [jtcarroll@cox.net](mailto:jtcarroll@cox.net). More information is available at [ctfsc.org](http://ctfsc.org).

# When is it time to leave Birth to Three?

It is good to think about and plan for the future every step of the way through your family's Birth to Three experience. Just as supports and services are adjusted when your child makes developmental gains, these early intervention activities will be replaced by other community activities at some point. You may notify your service coordinator that you wish to transition out of Birth to Three at any point, or your service coordinator may discuss ending Birth to Three visits if your child no longer needs early intervention. By law, Birth to Three services and supports will end when your child turns three years old. New partners will enter your life as you plan to say good-bye to Birth to Three.

If your child leaves before age three or if your child will not be receiving preschool **special education**, your service coordinator will work with you to identify other available activities in your community.

## Community Activities

- 🌸 library story hours
- 🌸 local play groups
- 🌸 recreational programs
- 🌸 Head Start
- 🌸 community nursery schools
- 🌸 childcare centers

There are many community options to choose from that you and your child may enjoy. If you would like, your service coordinator can help you collect information about how to enroll in a program and possible funding or scholarship information. You will receive prior written notice that Birth to Three services are ending and a transition conference will be held to develop your transition plan.

The Birth to Three System is required to provide local school districts with information about children receiving early intervention so that they can plan ahead for when these children are old enough to be receiving their educational services. If you sign the written consent form, whatever information you specify will be given to the school district. If you decide that you do not want to sign "Yes" on the form, you must sign the "No" section. If there is no decision recorded by the time your child turns 33 months old, the Birth to Three System is legally obligated to release your directory information to your local school district. This includes your child's name, age, service coordinator's name and agency, and other required information.





## When it is time to leave Birth to Three

CONTINUED

If your child needs special education services beyond age three, your service coordinator will help you to work with your local public school system to determine your child's eligibility for preschool special education and related services. Planning for this transition may begin anytime, but usually increases during the nine months before your child turns three.

## How does a transition to school happen?

All families go through similar steps when their child is ready for transition to preschool special education:

### STEP 1: Notification

Your service coordinator will assist you in notifying your Local Educational Agency (**LEA**) about your child at any

#### Transition Steps

1. **Notification**
  2. **Referral**
  3. **Conference**
- AND, IF ELIGIBLE,
4. **Develop IEP**

time with your written permission. Letting the school district staff know about your child helps them plan for future needs and numbers of students. It also allows you to get to know the people you will be working with if your child transitions to preschool special education at age three.

### STEP 2: Referral

Even if you have already notified your school district about your child, a formal referral must be made if you are interested in preschool special education. You may choose to either refer your child to your LEA yourself or have your service coordinator refer your child. You will receive a transition handbook that is similar to this, but has more detailed information specifically about the transition, and your service coordinator will loan you the Birth to Three System movie called Transition to School Services. Formal referral must include completion of a referral form that is sent to the LEA, preferably at least six months before your child turns three. Families who decide to refer before their child reaches two and a half report that the process is completed more easily. Each LEA has a procedure in place to determine eligibility.

They all use several methods to learn about your child's abilities. For a variety of reasons, not all children who were eligible for Birth to Three will be eligible for preschool special education.

### STEP 3: Transition Conference

At least three months (90 days) before your child turns three, you will meet with your Birth to Three team to develop your child's transition plan. The plan outlines the steps that you and your family, Birth to Three, and your LEA will follow in the next few months. It will include a plan to determine your child's eligibility for special education services through your LEA if you request this.

This next step only takes place if your child has been determined to be eligible and will definitely be moving on to preschool special education services.

### STEP 4: Developing an IEP

If your child will be enrolling in a special education program, you and your child's Planning and Placement Team (**PPT**) will develop an Individualized Education Program (**IEP**). The IEP is a written plan for providing special education to your child during the school year including annual goals and objectives, and the methods and people who will help your child achieve them in the Least Restrictive Environment (**LRE**).

We hope that the Birth to Three experience gives you new ways of shaping your child's life, and that this family handbook makes it easier.

#### Best Wishes

as we start our work together, and as you move on to future partnerships!

Ask your service coordinator for a copy of the **transition handbook**.



## Glossary

**accrediting agencies:** national organizations that give an “approved” status to those programs that meet their standards for excellence

**adjusted gross annual family income:** the total amount of money you (and your spouse) earn before any taxes and after allowed adjustments. IRS allowed adjustments may include certain retirement fund contributions, student loan interest, moving expenses, alimony paid, medical savings account deduction, and others.

**advocate:** a person who speaks for the best interests of another person

**assistive technology:** devices or services that allow or improve your child’s independence in daily activities (for example, a curved handle on a spoon for easier self-feeding; wheelchair; communication device)

**Birth to Three program:** an agency approved by the Birth to Three System to provide any of the possible services and supports listed on page 11 that your child and family may use to reach your IFSP outcomes

**Birth to Three team:** people who have specialized knowledge about what works to reach developmental outcomes; always includes your family, and may include one or more therapists, a teacher, and other professionals who match your goals and needs

**confidential:** private; cannot be shared without your permission

**consent:** the approval that you give for someone to do something; consent in Birth to Three is always voluntary and may be cancelled at any time

**co-payment:** the part of the total cost of a medical bill that you are responsible for paying

**deductible:** the amount of money that you must pay each year before your health insurance will begin to pay for services

**development:** the process of learning and mastering new skills over time; includes ability to move, communicate, think, see, hear, and play with toys or other people

**disabilities:** conditions that limit or slow down one or more kinds of development

**due process hearing:** the most formal way to resolve a disagreement between an enrolled family and the Birth to Three System; usually used after verbal discussion, written complaint, and/or mediation have not successfully resolved the complaint

**early intervention:** supports and services offered to an eligible child and family, early in the child’s life, in order to improve the child’s ability to live, learn, and play in their community



**eligible:** meeting the requirements to participate

**entitlement:** all eligible children will receive services regardless of any other factor (such as family income, birth country, etc.)

**IDEA (Individuals with Disabilities Education Act):** a federal law that guarantees certain educational rights for all people, including those with disabilities. Part C covers birth up to three; Part B covers ages three to twenty-one

**IEP (Individualized Education Program):** a written education program for each student in special education developed by a team of professionals (teachers, therapists, etc.) and the child's parents

**IFSP (Individualized Family Service Plan):** a written plan describing the outcomes you want for your child and family, the Birth to Three services and supports used to reach those outcomes, as well as where and when they take place and who will work with you

**LEA (Local Educational Agency):** your local public school district

**Lead Agency:** the state agency that operates or contracts with the programs that are approved to provide Birth to Three services, assures quality, and conducts billing audits in order to maintain compliance with all applicable laws; the Lead Agency in Connecticut is the Department of Mental Retardation

**LRE (Least Restrictive Environment):** a legal term meaning that each child with a disability has a right to be educated with their nondisabled peers when appropriate and should remain in a regular education setting unless it is not appropriate to do so


**mediation:** a way to settle a conflict so both sides win. Parents and professionals discuss their differences and, with the help of a trained mediator, reach a settlement that both sides accept.

**multidisciplinary evaluation:** having professionals with different kinds of training (e.g., a speech pathologist and a physical therapist) use tests to identify your child's abilities and needs

**natural learning opportunities:** the everyday routines and activities of life that can be used to teach and practice new skills (for example, snack time, diaper changing, bath time)

**OT (occupational therapy):** activities designed to improve fine motor skills (finger, hand, or arm movements) and oral-motor (eating, swallowing) abilities

**outcomes:** the changes that a family wants to work toward achieving



**Part C:** Part of the Individuals with Disabilities Education Act providing funds to state lead agencies to assist in the provision of early intervention services to infants and toddlers with disabilities, ages birth through two.

**PT (physical therapy):** activities designed to improve gross motor skills (leg, back, or whole body movements)

**PPT (Planning and Placement Team):** a group of professionals from your LEA who will determine your child's eligibility for preschool special education after age three, and help to develop your child's IEP.

**“self-funded” health insurance:** insurance coverage in which actual medical bills are paid by an employer who contracts with an agency to manage those payments (rather than the more common type of health insurance in which an employer pays a flat fee per employee to a health plan).

**speech and language services:** activities or materials designed to improve your child's ability to understand and express ideas and information

**service coordination:** a way to bring together the different people, information and resources that your child and family may work with as a team. Your service coordinator is the person who will help the most to make these connections and identify resources

**special education:** programs, services or specially designed instruction to meet the unique needs of children over three years of age with special needs who are found to be eligible; these include special learning methods or materials in the regular classroom, and special classes and programs if the child requires them

**transition:** the process or period in which a family and Birth to Three team discuss possible future supports and services a child will need as he leaves Birth to Three services.

**transition conference:** a meeting with the family, service coordinators and program staff who work with the family to discuss community services and supports that are available for young children and their families. When a child is referred to preschool special education, the meeting will include your family, Birth to Three staff and preschool special education staff. By federal law this meeting can take place up to 9 months before, but no later than 90 days before your child's third birthday.

**transition plan:** the transition plan outline the steps that your family, your Birth to Three program staff and school district staff will take to address the end of Birth to Three services and the transition to new programs, services and people.

# Appendix



## Allowable Extraordinary Expenses for Possible Income Adjustment

### May Include:

### Documentation Required:

#### MEDICAL EXPENSES GREATER THAN 6% ADJUSTED GROSS ANNUAL INCOME

**Unreimbursed Expenses for the Enrolled Child:** prescription diets, durable medical equipment (the portion that is not reimbursed by your insurance plan), unreimbursed dental or orthodontia expenses; could also include ramps, lifts, or other accessibility modifications that are required for your child who is receiving early intervention services.

**For the Immediate Family (parents and brothers and sisters of the enrolled child):** Unreimbursed medical expenses, unreimbursed prescription medications, health insurance premiums and deductibles

Copies of bills or receipts and an explanation of each. The total amount must be greater than 6% of your adjusted gross annual income. Only the portion that is more than 6% will be deducted.

#### PAYMENTS MADE TO SUPPORT FAMILY MEMBERS LIVING OUTSIDE YOUR HOME

Payments to support immediate family members who do not live at your address, including parents, siblings, and other children.

Copies of cancelled checks and an explanation of the purpose, or a copy of the child support agreement.



## Allowable Extraordinary Expenses for Possible Income Adjustment (continued)

<b>May Include:</b>	<b>Documentation Required:</b>
<b>HOME REPAIRS NECESSARY TO MAINTAIN YOUR HOME IN A LIVABLE CONDITION</b>	
<p>Out-of-pocket, current year expenditures not covered by your home owners insurance that are necessary to allow you to continue to live in your home or would be required for a Certificate of Occupancy. Examples might be repairs to the roof, plumbing, and electrical wiring, or replacing a broken furnace or water heater. It does not include normal home maintenance, home additions, general home improvements, landscaping, or decorative improvements.</p>	<p>Invoices, cancelled checks, and an explanation of the purpose of the repair.</p>
<b>EDUCATIONAL EXPENSES (UP TO \$10,000 PER YEAR)</b>	
<p>Tuition, books, room and board for college or technical schools and tuition for non-public schools up to a yearly maximum of \$10,000 for you as a parent or any sibling of the child receiving early intervention services. Only payments made in the current year are considered allowable. This does not include repayment of student loans.</p>	<p>Tuition or room and board bills, or cancelled checks, or textbook receipts. No more than \$10,000 will be deducted.</p>



## Allowable Extraordinary Expenses for Possible Income Adjustment (continued)

### May Include:

### Documentation Required:

#### JOB-RELATED NECESSITIES

Required purchases of tools, equipment, uniforms or materials for your job that are not furnished or reimbursed by your employer. Only purchases made during the current year are considered allowable. This does not include wage earners who are self-employed.

Your job title plus a copy of your IRS 1040 form or receipts plus an explanation of each.

#### MANDATORY PAYMENTS ON LARGE ACCUMULATED DEBTS

Court-ordered payments, payments negotiated between you and various creditors, or payments negotiated by a debt-counseling service. This does not include making any payments on your credit card balance, mortgage or rent payments, car payments or payments to a line of credit or other bank loans.

Copy of Court Order, written payment plan, or written agreement with creditor(s).



## Allowable Extraordinary Expenses for Possible Income Adjustment (continued)

### May Include:

### Documentation Required:

#### CHILD CARE EXPENSES WHEN CHILD'S PRIMARY CAREGIVER IS EMPLOYED

(UP TO \$20,000 PER CHILD INCLUDING THE ENROLLED CHILD OR SIBLINGS OF THE ENROLLED CHILD)

The annual cost of child care as long as the parent who could look after the child is prevented from doing so due to employment outside the home or active searching for employment that removes the parent from the home on a regular basis.

IRS 1040 form, or a copy of a fee schedule, or one-month invoice from the child care provider, or a cancelled child care payment check.



# What I wish I had known –

## Advice from a Mom who has been there

- 1. There is no crystal ball, and that is a good thing.** You may wish you could know now what things will be like in a month, a year, 10 years. Your child will grow and develop in ways that will amaze you. Enjoy today and do not worry about tomorrow.
- 2. Trust the coaching model.** I worried about my ability to follow through successfully with all that I was trying to learn from my Birth to Three team. Looking back, everything my husband and I did within our daily routine was valuable and helped our son's development.
- 3. My service coordinator was as much a resource to me as she was for my son.** My service coordinator became a trusted advisor, active listener and loyal supporter. She helped connect us to all the resources we needed outside our home and understood that all members of our family counted.
- 4. Transition to preschool special education is not as scary as it seems.** The school system has well-trained partners who will guide you. There are people to help each step of the way by answering questions and developing a plan for the years ahead. Communicate with them and be an active member of the team.
- 5. It is important to involve the whole family in the Birth to Three process.** Siblings, grandparents and anyone who is part of the family is impacted by the Birth to Three process and the needs of the child receiving services. For some people these needs will be lifelong. All members of the family have a role to play.



## What I wish I had known CONTINUED

6. **There are times when we just needed to “be”.** I was taught to use opportunities throughout the day, such as diaper changes, bath time, playtime and mealtime to apply strategies to help my son’s development. There were times when I needed a break from that, too. I learned that it was ok, once in a while, to enjoy the bath, the game or even the diaper change for what it was and to give us both a break.
7. **There are other parents out there who know what this experience is like.** There are people in your community, your neighborhood, your faith-based organization who you can connect with. Talk to your service coordinator or the Connecticut Family Support Network to find out about ways to connect with other families.
8. **You have a voice!** You are the expert on your child. Be an active participant in the Birth to Three process and communicate with your team. Share your thoughts, concerns, progress you see and your ideas. Your input helps ensure your child has the most appropriate and valuable supports and services. It is important now, will be important for the school years and always!
9. **Celebrate your child’s strengths and interests.** Your child has strengths and interests that are important. Though he or she may be receiving services and supports because of a disability or developmental delay, it will always be important to highlight the positives – celebrate their strengths and their successes!
10. **You will have your days . . .** It is important to keep in mind that as a primary caretaker of your child, you can only do that successfully by taking care of you. Your time, your ability to nurture yourself, your marriage, your friendships and other relationships will be fueled when you take care of your needs, too. You will be more valuable to your child and your family.

# Connecticut Birth to Three Contact Information

## Family Liaison

**FOR INFORMATION ABOUT BIRTH TO THREE SERVICES**

**Phone: 1-866-888-4188 Fax: 1-860-418-6003**

**Phone: 1-860-418-6136**

460 Capitol Avenue, Hartford, CT 06106

## Fiscal Office

**Phone: 860-418-6146 Fax: 860-418-6003**

460 Capitol Avenue, Hartford, CT 06106

**Email: [kathy.granata@ct.gov](mailto:kathy.granata@ct.gov)**

## Benefits Processing Services

**Phone: 860-659-5805**

Addresses subject to change.

Please call to confirm before mailing any important documents.

# Other Sources of Information



The Birth to Three website is a great source of information that is updated often. You will be able to download a copy of the Birth Through Five News, discover the skills that other children your child's age are also learning, connect with other families, and more.



Visit us at:

**[www.birth23.org](http://www.birth23.org)**



**Support Line**

1-866-888-4188

**[www.birth23.org](http://www.birth23.org)**

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