Overview of Early Intervention

If you’re concerned about the development of an infant or toddler, or you suspect that a little one has a disability, this page will summarize one terrific source of help—the early intervention system in your state. Early intervention services can help infants and toddlers with disabilities or delays to learn many key skills and catch up in their development.

There’s a lot to know about early intervention. We present the “basics” here to get you started.

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What is early intervention?

*Early intervention* is a system of services that *helps babies and toddlers with developmental delays or disabilities*. Early intervention focuses on helping eligible babies and toddlers learn the basic and brand-new skills that typically develop during the first three years of life, such as:

- **physical** (reaching, rolling, crawling, and walking);
- **cognitive** (thinking, learning, solving problems);
- **communication** (talking, listening, understanding);
- **social/emotional** (playing, feeling secure and happy); and
- **self-help** (eating, dressing).

**Examples of early intervention services** | If an infant or toddler has a disability or a developmental delay in one or more of these developmental areas, that child will likely be eligible for early intervention services. Those services will be tailored to meet the child’s individual needs and may include:

- Assistive technology (devices a child might need)
- Audiology or hearing services
- Speech and language services
- Counseling and training for a family
- Medical services
• Nursing services
• Nutrition services
• Occupational therapy
• Physical therapy
• Psychological services

Services may also be provided to address the needs and priorities of the child’s family. Family-directed services are meant to help family members understand the special needs of their child and how to enhance his or her development.

Authorized by law | Early intervention is available in every state and territory of the United States. The Individuals with Disabilities Education Act (IDEA) requires it—Part C of IDEA, to be precise. That’s why you’ll sometimes hear early intervention referred to as Part C.

Who’s eligible for early intervention?

Early intervention is intended for infants and toddlers who have a developmental delay or disability. Eligibility is determined by evaluating the child (with parents’ consent) to see if the little one does, in fact, have a delay in development or a disability. Eligible children can receive early intervention services from birth through the third birthday (and sometimes beyond).

For some children, from birth | Sometimes it is known from the moment a child is born that early intervention services will be essential in helping the child grow and develop. Often this is so for children who are diagnosed at birth with a specific condition or who experience significant prematurity, very low birth weight, illness, or surgery soon after being born. Even before heading home from the hospital, this child’s parents may be given a referral to their local early intervention office.

For others, because of delays in development | Some children have a relatively routine entry into the world, but may develop more slowly than others, experience setbacks, or develop in ways that seem very different from other children. For these children, a visit with a developmental pediatrician and a thorough evaluation may lead to an early intervention referral.

Parents don’t have to wait for a referral to early intervention, however. If you’re concerned about your child’s development, you may contact your local program directly and ask to have your child evaluated. That evaluation is provided free of charge. If you’re not sure how to locate the early intervention program in your community—keep reading. We give that information a bit further down the page.

However a child comes to be referred, evaluated, and determined eligible, early intervention services provide vital support so that children with developmental needs can thrive and grow.

What’s a developmental delay?

The term “developmental delay” is an important one in early intervention. Broadly speaking, it means that a child is delayed in some area of development. There are five areas in which development may be affected:

• Cognitive development
Physical development, including vision and hearing
Communication development
Social or emotional development
Adaptive development

**Developmental milestones** | Think of all the baby skills that can fall under any one of those developmental areas! Babies and toddlers have a lot of new skills to learn, so it’s always of concern when a child’s development seems slow or more difficult than would normally be expected. The developmental milestones page outlines some of the typical skills that babies and toddlers learn by certain ages. It’s a good resource to consult if you’re concerned that a child may have a developmental delay.

**Definition of “developmental delay”** | Part C of IDEA broadly defines the term “developmental delay.” But the exact meaning of the term varies from state to state, because each state defines the term for itself, including:

- describing the evaluation and assessment procedures that will be used to measure a child’s development in each of the five developmental areas; and
- specifying the level of delay in functioning (or other comparable criteria) that constitutes a developmental delay in each of the five developmental areas.

**What’s your state’s definition?** | Clearly, it’s important to know how your state defines “developmental delay.” Find out more about that definition by visiting NECTAC, the National Early Childhood Technical Assistance Center, at: [http://www.nectac.org/~pdfs/topics/earlyid/partc_elig_table.pdf](http://www.nectac.org/~pdfs/topics/earlyid/partc_elig_table.pdf)

**If you’re concerned about a baby or toddler’s development**

It’s not uncommon for parents and family members to become concerned when their beautiful baby or growing toddler doesn’t seem to be developing according to the normal schedule of “baby milestones.”

“He hasn't rolled over yet.”

“The little girl next door is already sitting up on her own!”

“She should be saying a few words by now.”

Sound familiar? While it’s true that children develop differently, at their own pace, and that the range of what’s “normal” development is quite broad, it’s hard not to worry and wonder.

**What to do** | If you think that your child is not developing at the same pace or in the same way as most children his or her age, it is often a good idea to talk first to your child’s pediatrician. Explain your concerns. Tell the doctor what you have observed with your child. Your child may have a disability or a developmental delay, or he or she may be at risk of having a disability or delay.
You can also get in touch with your community's early intervention program, and ask to have your little one evaluated to see if he or she has a developmental delay or disability. **This evaluation is free of charge**, won't hurt your child, and looks at his or her basic skills. Based on that evaluation, your child may be eligible for early intervention services, which will be designed to address your child's special needs or delays.

**How to get in touch with your community's early intervention program** | There are several ways to connect with the EI program in your community. Try any of these suggestions:

- Contact the Pediatrics branch in a local hospital and ask where you should call to find out about early intervention services in your area.
- Ask your pediatrician for a referral to the local early intervention system.
- Visit **State Organizations** page, where you can search for the early intervention office in your state. You'll find early intervention under “State Agencies.” Contact that office and ask where, in your community, to connect with early intervention.

**What to say to the early intervention contact person** | Explain that you are concerned about your child's development. Say that you think your child may need early intervention services. Explain that you would like to have your child evaluated under Part C of IDEA.

**Referral** | Write down any information the contact person gives you. You will probably be referred to either your community's early intervention program or to what is known as **Child Find**. Child Find operates in every state to identify babies and toddlers who need early intervention services because of developmental delays or disability. You can use the **Parent's Record-Keeping Worksheet** to keep track of this important information. In fact, in general, it's a good idea to write down the names and phone numbers of everyone you talk to as you move through the early intervention process.

**The evaluation and assessment process**

**Service coordinator** | Once connected with either Child Find or your community's early intervention program, you'll be assigned a **service coordinator** who will explain the early intervention process and help you through the next steps in that process. The service coordinator will serve as your single point of contact with the early intervention system.

**Screening and/or evaluation** | One of the first things that will happen is that your child will be evaluated to see if, indeed, he or she has a developmental delay or disability. (In some states, there may be a preliminary step called screening to see if there's cause to suspect that a baby or toddler has a disability or developmental delay.) The family's service coordinator will explain what's involved in the screening and/or evaluation and ask for your permission to proceed. You must provide your **written consent** before screening and/or evaluation may take place.

The evaluation group will be made up of qualified people who have different areas of training and experience. Together, they know about children’s speech and language skills, physical abilities, hearing and vision, and other important areas of development. They know how to work with children, even very young ones, to discover if a child has a problem or is developing within normal ranges. Group members may evaluate your child together or individually. As part of the evaluation, the team will observe your child, ask your child to do things, talk to you and your child, and use other methods to gather information. These procedures will help the team find out how your child functions in the five areas of development.
Exceptions for diagnosed physical or mental conditions | It's important to note that an evaluation of your child won't be necessary if he or she is automatically eligible due to a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay. Such conditions include but aren't limited to chromosomal abnormalities; genetic or congenital disorders; sensory impairments; inborn errors of metabolism; disorders reflecting disturbance of the development of the nervous system; congenital infections; severe attachment disorders; and disorders secondary to exposure to toxic substances, including fetal alcohol syndrome. Many states have policies that further specify what conditions automatically qualify an infant or toddler for early intervention (e.g., Down syndrome, Fragile X syndrome).

Determining eligibility | The results of the evaluation will be used to determine your child's eligibility for early intervention services. You and a team of professionals will meet and review all of the data, results, and reports. The people on the team will talk with you about whether your child meets the criteria under IDEA and state policy for having a developmental delay, a diagnosed physical or mental condition, or being at risk for having a substantial delay. If so, your child is generally found to be eligible for services.

Initial assessment of the child | With parental consent, indepth assessment must now be conducted to determine your child's unique needs and the early intervention services appropriate to address those needs. Initial assessment will include reviewing the results of the evaluation, personal observation of your child, and identifying his or her needs in each developmental area.

Initial assessment of the family | With approval of the family members involved, assessments of family members are also conducted to identify the resources, concerns, and priorities of the family related to enhancing the development of your child. The family-directed assessment is voluntary on the part of each family member participating in the assessment and is based on information gathered through an assessment tool and also through an interview with those family members who elect to participate.

Who pays for all this? | Under IDEA, evaluations and assessments are provided at no cost to parents. They are funded by state and federal monies.

Writing the IFSP

Having collected a great deal of information about your child and family, it's now possible for the team (including you as parents) to sit down and write an individualized plan of action for your child and family. This plan is called the Individualized Family Service Plan, or IFSP. It is a very important document, and you, as parents, are important members of the team that develops it. Each state has specific guidelines for the IFSP. Your service coordinator can explain what the IFSP guidelines are in your state.

Guiding principles | The IFSP is a written document that, among other things, outlines the early intervention services that your child and family will receive. One guiding principal of the IFSP is that the family is a child's greatest resource, that a young child's needs are closely tied to the needs of his or her family. The best way to support children and meet their needs is to support and build upon the individual strengths of their family. So, the IFSP is a whole family plan with the parents as major contributors in its development. Involvement of other team members will depend on what the child needs. These other team members could come from several agencies and may include medical people, therapists, child development specialists, social workers, and others.

What info is included in an IFSP? | Your child's IFSP must include the following:

Your child’s present physical, cognitive, communication, social/emotional, and adaptive development levels and needs
Family information (with your agreement), including the resources, priorities, and concerns of you, as parents, and other family members closely involved with the child

The major results or outcomes expected to be achieved for your child and family

The specific services your child will be receiving

Where in the natural environment (e.g., home, community) the services will be provided (if the services will not be provided in the natural environment, the IFSP must include a statement justifying why not)

When and where your son or daughter will receive services

The number of days or sessions he or she will receive each service and how long each session will last

Who will pay for the services

The name of the service coordinator overseeing the implementation of the IFSP

The steps to be taken to support your child’s transition out of early intervention and into another program when the time comes.

The IFSP may also identify services your family may be interested in, such as financial information or information about raising a child with a disability.

**Informed parental consent** | The IFSP must be fully explained to you, the parents, and your suggestions must be considered. *You must give written consent for each service to be provided.* If you do not give your consent in writing, your child will not receive that service.

**Reviewing and updating the IFSP** | The IFSP is reviewed every six months and is updated at least once a year. This takes into account that children can learn, grow, and change quickly in just a short period of time.

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**Timeframes for all this**

When the early intervention system receives a referral about a child with a suspected disability or developmental delay, a time clock starts running. Within 45 days, the early intervention system must complete the critical steps discussed thus far:

- screening (if used in the state),
- initial evaluation of the child,
- initial assessments of the child and family, and
- writing the IFSP (if the child has been found eligible).

That’s a tall order, but important, given how quickly children grow and change. When a baby or toddler has developmental issues, they need to be addressed as soon as possible. So—45 days, that’s the timeframe from referral to completion of the IFSP for an eligible child.

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**Who pays for the services?**
Whether or not you, as parents, will have to pay for any services for your child depends on the policies of your state. Check with your service coordinator. Your state’s system of payments must be available in writing and given to you, so there are no surprises or unexpected bills later.

**What’s free to families** | Under Part C of IDEA, the following services must be provided at no cost to families:

- Child Find services;
- evaluations and assessments;
- the development and review of the IFSP; and
- service coordination.

**When services are not free** | Depending on your state’s policies, you may have to pay for certain other services. You may be charged a “sliding-scale” fee, meaning the fees are based on what you earn. Some services may be covered by your health insurance, by Medicaid, or by Indian Health Services. The Part C system may ask for your permission to access your public or private insurance in order to pay for the early intervention services your child receives. In most cases, the early intervention system may not use your health care insurance (private or public) without your express, written consent. If you do not give such consent, the system may not limit or deny you or your child services.

Every effort is made to provide services to all infants and toddlers who need help, regardless of family income. Services cannot be denied to a child just because his or her family is not able to pay for them.