### North Carolina Infant-Toddler Program Procedural Safeguards Requirements Technical Assistance and Training Guide

North Carolina designed its Infant-Toddler Program (ITP) to maximize family involvement and ensure parental consent in each step of the process in the program. Rights and procedural safeguards have been established by Part C of the Individuals with Disabilities Education Act (IDEA) to protect parents and children and to ensure that parents have a leadership role in services for their children.

Under the NC ITP, parents have the general rights listed below. In addition to the general rights, families are entitled to be notified of specific procedural safeguards. An official notice and detailed definition of these procedural safeguards is found in the NC Infant-Toddler Program Notice of Child and Family Rights. Families should be provided with this document when they begin with the ITP and every year that their child is in the program. They should also be informed of their rights verbally during other key times during their involvement with the ITP.

### **GENERAL RIGHTS**

- A. The right to a multidisciplinary evaluation if needed for eligibility determination; and, if eligible, assessments and an Individualized Family Service Plan (IFSP) meeting within forty-five (45) calendar days from referral.
- B. If eligible under the ITP, the right to appropriate early intervention services for your child and family as identified in an IFSP.
- C. The right to evaluation; assessment; administrative and coordinative activities related to development, review, and evaluation of the IFSP; service coordination; and implementation of procedural safeguards at no cost.
- D. The right to accept or refuse evaluations for eligibility determination, child and family assessments, and Early Intervention services.
- E. The right to receive a written invitation to participate in all IFSP meetings.
- F. The right to receive prior written notice ten (10) calendar days before a change is proposed or refused in the identification, evaluation, or placement of a child, or in the provision of services to a child or family.
- G. The right to receive services in a child's natural environment to the maximum extent appropriate.
- H. The right to maintenance of the confidentiality of personally identifiable information.
- I. The right to review and, if appropriate, correct early intervention records.
- J. The right to receive a copy, at no cost, of each evaluation for eligibility determination, child and family assessments, and the IFSP as soon as possible after each IFSP meeting.
- K. The right to Due Process to resolve complaints regarding any matter related to the identification, evaluation, eligibility, placement, or the provision of early intervention services for your child.
- L. The right to voluntary Mediation to resolve any disputes involving any matter under Infant Toddler Program policies or Part C of IDEA regulations.
- M. The right to file a state complaint if the ITP, its local agencies (Children's Developmental Services Agencies), or an early intervention service provider has violated a federal or state Part C requirement.

- N. The right to timely resolution of state complaints.
- O. The right to obtain an initial copy of your child's early intervention record at no cost.

This TA and Training Guide for ITP staff outlines IDEA Part C procedural safeguards organized by the major components of the Infant-Toddler Program IFSP process from referral to transition. For each of these components, steps are provided for implementing any required procedural safeguards. In each component, the relevant procedural safeguard requirements are identified (using the lettered general rights above) along with the related NC ITP Policy/Procedural documents. When forms are referenced, the user should carefully review the instructions for using each form.

### REFERRAL

The 45-calendar day timeline for completion of eligibility and development of an IFSP begins once a referral has been received by a Children's Developmental Services Agency (CDSA).

### **STEP 1: Referral Received**

Referrals can be made by parents or other primary referral sources such as physicians, hospitals, childcare programs, public schools, and other social service or health care providers. The intake coordinator, or other CDSA staff person receiving the referral, should complete the *NC Infant-Toddler Program Referral Form* to ensure that all required information is obtained, and that the referral is documented.

Within two working days of receiving a referral, the CDSA must assign an Early Intervention Service Coordinator (EISC) to assist the child and family. The EISC must contact the parent immediately to introduce the Infant-Toddler Program, share information about early intervention services and supports, and schedule an initial meeting. Parents should be informed that they have the right to confidentiality and the right to proceed in order to meet the 45-day timeline, or they can proceed at a pace that meets the unique needs of their child and family. If the family is not interested in proceeding with eligibility determination, the CDSA documents this decision and notifies the referral source using the *NC ITP Referral Update* form. The EISC must assure that the parent is aware of the benefits of participation in the program and the opportunity to contact the CDSA in the future.

If the CDSA is unable to locate the parent after multiple and varied attempts and coordination with the referral source, the CDSA sends the *Rights at Referral Letter* to the child's address on file and includes the <u>NC Infant-Toddler Program Notice of Child and Family Rights</u>. The CDSA also completes and sends the *NC ITP Referral Update* form to the referral source.

## RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS: Procedural Safeguards Policy and Notification of Child and Family Rights □ Review and explain Child and Family Rights during initial contacts and when ITP is being explained. [General Rights to emphasize: A, B, C, D, H] □ Inform parents during initial contacts that ITP is a voluntary program and that they may decline to participate.

### **STEP 2 - Determination of Surrogate Parent:**

The CDSA appoints a surrogate parent if:

- No parent can be identified.
- Reasonable efforts to locate a parent are unsuccessful; or
- The child is a ward of the state as determined by North Carolina's laws.

A "surrogate" parent is a person appointed to serve in the role of parent and protect the rights of a child participating in the Infant-Toddler Program. Assignment of such a person must follow specific procedures, which include methods for determining the child's need for a surrogate parent as well as steps for assigning a surrogate parent to the child. The CDSA will make reasonable efforts to ensure a surrogate parent is assigned within 30 days of determining that need.

### RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS:

### <u>Procedural Safeguards Policy - Confidentiality and - Written Parental Consent</u>

A surrogate parent is afforded all rights given to any parent under the ITP, and they have the same access to a child's record and other written information as does any parent. The Surrogate should represent the child in all matters related to the referral and enrollment in the ITP- including all consents for evaluations, assessments, provision of services, and release of personally identifiable information.

### <u>Procedural Safeguards Policy – Surrogate Parent</u>

CDSA Responsibilities Include:		
	Identify Need for Surrogate Parent (Use the Surrogate Parent Identification of Need form).	
	Appoint a Surrogate Parent within 30 calendar days after identification of need (Use the	
	Surrogate Parent Identification of Need and Surrogate Parent Appointment Letter).	
	Notify biological or adoptive parent of surrogate parent appointment if appropriate (use the <i>Biological Parent Notification Letter</i> ).	
	Maintain an agency list of appointed surrogate parents.	
	Remove surrogate parents when no longer appropriate (use the <i>Surrogate Parent Termination Letter</i> ).	

### INTAKE

### **STEP 1 - Intake Procedure**

The EISC meets with the parent(s) for the first time to:

- further explain the ITP and provide a copy of the NC Infant-Toddler Program Parent Handbook;
- explain that participation is voluntary on the part of the parent;
- explain parent rights and procedural safeguards, including the right to decline participation, the right to dispute resolution, and all safeguards. Provide parent(s) with a written copy of those rights using the NC Infant-Toddler Program Notice of Child and Family Rights;

- assure awareness of the benefits of participation in the program and opportunity to contact the CDSA in the future:
- explain system of payment and obtain consent for the use of Medicaid and/or other public or private insurance as appropriate. Use the <u>NC ITP Procedure Guidelines Related to Financial Policy</u> as a guide for completing and sharing forms, documents, and rights related to billing and payment for ITP services;
- listen and note parent's concerns and preferences;
- determine the availability of existing current evaluation and assessment information and obtain parental consent for receipt of this information; and
- obtain parental consent to share information with the primary referral source or other information sources using the *Authorization to Disclose Health Information* form.

RE	RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS:		
Procedural Safeguards Policy - Notice of Child and Family Rights			
	Review and explain the NC ITP Notice of Child and Family Rights. All written and oral notification of rights should also be documented in a progress note. [General Rights to emphasize: A, B, C, D, E, F, G, H, I, J, K, L, M, N, O.]		
Procedural Safeguards Policy - Confidentiality and - Written Parental Consent			
	Parents who do not speak English must be given consent and authorization forms in their native language or mode of communication.		
	Parents must give written consent for the disclosure, receipt, and exchange of personally identifiable information related to their child and family (use the <i>Authorization to Disclose Health Information</i> form).		
	Inform parents of their right to restrict types of information released or to revoke an authorization to release information at any time (use the <i>Request for Restriction on Use and Disclosure of Health Information</i> form).		
	Obtain written parental consent before the initial evaluation and child assessment (use the <i>Prior Written Notice and Consent for Evaluation and Assessment</i> form).		
<u>Procedural Safeguards Policy – Prior Written Notice</u>			
	Provide prior written notice for the initial eligibility determination and the initial child assessment (use the <i>Prior Written Notice and Consent for Evaluation and Assessment</i> form).		
	Inform parents of their right to proceed sooner than the 10-day prior written notice requirement in order to expedite proposed actions.		

### STEP 2 - Determining How to Proceed with Eligibility Determination:

### a. Eligibility Determination by Review of Records / Documented Evidence

A child 's medical or other records may be used to establish eligibility (without conducting an evaluation of the child) if those records indicate that a child has a developmental delay or established condition that would meet the state's eligibility criteria. Following eligibility determination, the EISC makes arrangements for child and family directed assessments to gather information for

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intervention planning and IFSP development (see *Individualized Family Service Plan* section below).

### b. Evaluation for Eligibility Determination:

If written evidence is not available or is not sufficient for determining eligibility, the CDSA makes arrangements for an initial ITP evaluation to assist with eligibility determination.

RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS:		
Procedural Safeguards Policy - Notice of Child and Family Rights		
	Review and explain Child and Family Rights when the eligibility determination is made. [General Rights to emphasize: A, D, F, K]	
Procedural Safeguards Policy - Prior Written Notice		
	Send prior written notice for eligibility determination status (use the <i>Prior Written Notice</i> form).	

### INITIAL ITP ELIGIBILITY EVALUATION

### STEP 1 – Scheduling the Initial Eligibility Evaluation

The EISC assists the family in scheduling the initial ITP eligibility evaluation. The evaluation team includes at least two qualified personnel from different disciplines (or one qualified professional from two disciplines). The evaluation process must include:

- Administering one or more of the following evaluation instruments:
  - Brigance Inventory of Early Development II (IED II)
  - The Battelle Developmental Inventory-Second Edition (BDI II)
  - The Bayley Scales of Infant and Toddler Development- Fourth Edition (Bayley IV)
  - The Developmental Assessment of Young children (DAYC)
  - The Mullen Scales of Early Learning (MSEL).
- Obtaining the child 's history by interviewing the parent.
- Identifying the child 's level of functioning in each of the developmental areas (Cognition, Communication, Adaptive, Social-Emotional, and Physical), including vision and hearing.
- Gathering information from other sources such as family members, other caregivers, medical
  providers, social workers, and educators, if necessary, to understand the full scope of the child 's
  unique strengths and needs; and
- Reviewing medical, educational, or other records.

The evaluation process involves the synthesis of all relevant information, and no single procedure may be used as the sole criterion for determining a child 's eligibility. Informed clinical opinion must be included in evaluation and assessment procedures, since it is a necessary safeguard against eligibility determination based upon isolated information or test scores alone. Informed clinical opinion makes use of qualitative and quantitative information to assist in forming a determination regarding difficult-to measure aspects of current developmental status and the potential need for early intervention. Informed clinical opinion may

be used by qualified personnel to establish a child's eligibility for services under Part C of the IDEA even when other instruments do not establish eligibility. Informed clinical opinion cannot be used to negate evaluation results that find a child eligible for the program.

RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS:		
Procedural Safeguards Policy – Notification of Child and Family Rights		
	Review and explain Child and Family Rights when the initial evaluation is proposed. [General Rights to emphasize: A, C, D, F, H, J, K, L]	
Pr	ocedural Safeguards Policy – Prior Written Notice	
	Send prior written notice for the initial evaluation (use the <i>Prior Written Notice and Consent for Evaluation and Assessment</i> form).	
Procedural Safeguards Policy - Written Parental Consent		
	Parents who do not speak English must receive consent and authorization forms in their native language or mode of communication.	
	Obtain written parental consent for the initial evaluation (use the Prior Written Notice and Consent for Evaluation and Assessment form).	
	After the evaluation, obtain consent from the parents as to which parties the CDSA is authorized to release the evaluation information (use the <i>Authorization to Disclose Information</i> form).	

### **STEP 2 - Documentation of Eligibility**

Eligibility determination can occur immediately following the initial eligibility evaluation or at another agreed upon time. If eligible, parents may then choose whether or not they wish to proceed with child and family assessments, an IFSP meeting and enrollment in the Infant-Toddler Program. When a parent chooses not to enroll their child in the ITP, the parent is informed that he/she will not be entitled to receive appropriate early intervention services if they choose not to proceed with IFSP development and enrollment in the program.

If not eligible, families may be referred to other appropriate community programs, with written consent from the family.

Parents must be notified in writing of the eligibility decision using the *Prior Written Notice* form. Eligibility determination is documented on the *Eligibility Determination Documentation* form.

With written parental consent, referral sources should be notified of the referral disposition using the *NC Infant-Toddler Program Referral Update* form.

Explain the right to decline participation in the ITP even if found eligible. Assure parent awareness of the benefits in participating in the program and the opportunity to contact the CDSA in the future. Document family's decision to accept or decline enrollment in a progress note.

RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS:		
Procedural Safeguards Policy – Notice of Child and Family Rights		
	Review and explain Child and Family Rights when the eligibility determination is made. [General Rights to emphasize: A, B, D, F, H, K, L]	
<u>Pr</u>	ocedural Safeguards Policy – Prior Written Notice	
	Send prior written notice for the eligibility determination decision (use <i>Prior Written Notice</i> form).	
Pr	ocedural Safeguards Policy - Written Parental Consent	
	Parents who do not speak English must be given consent and authorization forms in their native language or other mode of communication used by the parent, unless clearly not feasible to do so.	
	With parental consent using the <i>Authorization to Release Health Information</i> form, send the <i>NC Infant-Toddler Program Referral Update</i> form to referral source.	
Dispute Resolution Policy – Mediation and Due Process		
	If the child is not eligible, inform the parent in writing and orally of their right to dispute the decision and their right to refer the child again for eligibility determination at a future date.	
	As part of the review and explanation of rights throughout the eligibility and enrollment process, parents should be informed that they have a right to mediation and due process if they disagree with the Infant-Toddler Program on any aspect of their child's identification, evaluation, placement, the provision of appropriate early intervention services.	

### CHILD AND FAMILY-DIRECTED ASSESSMENTS

The IFSP must contain a statement of the family's resources, priorities, and concerns related to enhancing the development of their child. Some of this information may have been obtained earlier in the intake process but is required to be documented in Sec. II of the IFSP form. The family-directed assessment must be completed prior to the initial IFSP meeting and is completed through personal interview with the family and by using approved family-directed assessment tools. Any information a family chooses to share as part of the family-directed assessment is voluntary.

An initial child assessment must be conducted in order to identify the child 's unique strengths and needs within the routines of the family and the early intervention supports appropriate to meet those needs. The initial assessment of the child must include: a review of the results of the evaluation conducted (if a child's eligibility is not established through a review of medical or other records); personal observations of the child; and the identification of the child's needs in each of the developmental areas (Cognition, Communication, Adaptive, Social-Emotional, and Physical), including vision and hearing, as they relate to the child's participation in the routines of the family. Results of the initial child assessment are documented in Sec. III of the IFSP form.

### INDIVIDUALIZED FAMILY SERVICE PLAN

Once eligibility is established, and after initial child and family-directed assessments, an IFSP meeting is held and the initial IFSP is developed. The IFSP includes the child's unique strengths and areas of need, outcomes and strategies to address those needs, including parent(s) concerns and priorities, and the nature and extent of early intervention services that are needed by the child and family to accomplish these outcomes are determined through the IFSP process.

### **STEP 1 – Initial IFSP Meeting**

A meeting to develop the initial IFSP must be held within 45 calendar days of receipt of referral by the CDSA. The EISC must provide written notice (included in the invitation to the meeting) to the family and other participants early enough before the Individualized Family Service Plan (IFSP) meeting date, using the *NC Infant-Toddler Program Meeting Invitation* form, so that the family and other members of the IFSP team can participate. The EISC must remind parents that they have the right to proceed in order to meet the 45-day timeline or proceed at a pace that meets the unique needs of their child and family. IFSP meetings are held in the native language of the parent(s) or other mode of communication used by the parent, unless clearly not feasible to do so. Written documentation of efforts to locate interpreter services for the parent(s) must be filed in the child's early intervention record.

### STEP 2 – Obtaining Parent Consent

Explain *system* of payment information again to the family. Use the <u>NC ITP Procedure Guidelines Related to Financial Policy</u> as a guide for completing and sharing forms, documents, and rights related to billing and payment for ITP services. The parent(s) determines whether to accept or decline any specific early intervention service(s). They may decline an early intervention service, without jeopardizing other early intervention services. If a parent later revokes consent, it is not retroactive (it does not apply to any action that occurred before the consent was revoked). The parent has a right to accept a service in the future, after declining the service initially.

### a. Parent Consent for All Early Intervention Services Recommended:

If the parent agrees with the specific early intervention services recommended by the IFSP team, including the frequency, intensity, length, location, anticipated duration, method of delivering services and cost, then the parent's signature on the *VIII. IFSP Agreement* page serves as consent for implementation of these early intervention services.

### b. Parent Request for More Time Before Consenting:

If members of the IFSP Team agree that a service is needed but the parent requests more time before consenting, the service is not placed on **Sec. V. Service Delivery Page of the IFSP** because the parent has not given written consent. If the parent later decides he/she is ready to provide written consent for the service, the EISC adds the service to **Sec. V of the IFSP** (as previously discussed by the IFSP team), obtains the parent's signature giving consent for the service on a new **Sec. IX. IFSP Review** page. The date the parent provides written consent starts the 30-day timeline by which the service must start.

### c. Parent Declining a Service:

If members of the IFSP Team agree that a service would benefit the child and family, but the parent wishes to decline the service at the time the initial IFSP is developed, the appropriate box is checked on *Sec. VIII. IFSP Agreement* page and parent signature is obtained. All other services and activities listed on the IFSP will be carried out except for those declined.

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### d. Parent Declining Participation in the ITP:

If, after consenting to the services on the IFSP, the parent(s) declines participation in ITP altogether, the EISC must ensure that the parent(s) understands the services being offered and that their child and family will not be able to receive services being offered without written consent. Assure the parent is aware of the benefits of participating in the program and the opportunity to contact the CDSA in the future and document in a progress note. (Use *Declining Early Intervention Services* form).

### **STEP 3 – Periodic IFSP Reviews**

A periodic review of the IFSP, including progress toward outcomes and the need for modification or revision of outcomes of services, must be conducted at a time and place convenient to the family at least every six months. The EISC must provide written notice of the meeting to the family and other participants early enough before the IFSP review so the family and providers can participate (Use the *NC Infant-Toddler Program Meeting Invitation*). Any changes in early intervention services, including the frequency, intensity, location, duration, method of delivering services and/or other IFSP action(s), are accomplished through the periodic IFSP review process. Documentation of IFSP review meetings is reported on *Sec. IX. IFSP Review* form. Steps 2b., 2c., and 2d. above also apply to periodic reviews.

### STEP 4 – Annual IFSP Review Meeting

An annual meeting to review and revise the IFSP must be conducted at a time and place convenient to the family. The EISC must provide written notice to the family and other participants early enough before the IFSP meeting so the family and providers can participate (Use the *NC Infant-Toddler Program Meeting Invitation*). Any changes in early intervention services, including frequency, intensity, location, duration, and method of delivering services and/or other IFSP action are accomplished through the IFSP review process. Documentation of IFSP review meetings is reported on *Sec. IX. IFSP Review* form. Steps 2b., 2c., and 2d. above also apply to annual IFSP reviews.

### **STEP 5 – Continuing Eligibility Determination:**

If a child is found to be no longer eligible for the ITP, the CDSA must provide prior written prior notice of the eligibility decision to the parents (Use the *NC ITP Prior Written Notice* form). The EISC is responsible for explaining rights related to the eligibility decision to the parent and documenting the discussion in a progress note.

RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS:  Procedural Safeguards Policy - Notice of Child and Family Rights				
				Review and explain Child and Family Rights during periodic and annual and IFSP reviews. [General Rights to emphasize: B, C, D, E, F, G, H, I, J, K, L, M, N, O]
Pr	Procedural Safeguards Policy - Prior Written Notice			
	Provide written notice to the family and other participants early enough before the IFSP meeting date (Use the <i>NC Infant-Toddler Program Meeting Invitation</i> form).			
	If the IFSP Review determines that additional assessment and /or service is needed, provide prior written notice to the parent (use the <i>IFSP Review</i> page).			
	If the IFSP Review and related evaluation determine that the child is no longer eligible for ITP, provide prior written notice (use the <i>NC ITP Prior Written Notice</i> form).			
Procedural Safeguards Policy - Written Parental Consent				
	Obtain written parental consent on the <i>IFSP</i> form (Section VIII or IX).			
Pr	ocedural Safeguards Policy - Native Language / Other Mode of Communication			
	IFSP meetings should be held in the native language of the parent or other mode of communication used by the parent, unless clearly not feasible to do so.			
Dispute Resolution Policy - Mediation and Due Process				
	As part of the review and explanation throughout enrollment within the program, parents should be informed that they have the right to mediation and due process if they disagree with the Infant-Toddler program on any aspect of their child's evaluation, placement, or provision of appropriate early intervention services			

### TRANSITION ACTIVITIES

From age two to age three, there are important events that should happen so that a child's and family's services and supports are not disrupted once the child ages out of the program. Through the transition planning process, the IFSP team will develop ways to make sure that a family's needs are being met and that the transition will be successful.

### **STEP 1 – Transition Planning:**

Around a child's second birthday, the IFSP team will begin working on a transition plan (*IFSP Section VII*). Because transition happens over time, the IFSP team will discuss and project several activities that will be completed over the next year. The transition plan should include important time frames for helping map out the transition, such as referrals, evaluations and assessments, and individual transition planning conferences or meetings.

### a. Notification to Preschool Program (Part B of IDEA)

The CDSA is required to notify the Preschool Program at the Local Education Agency (LEA) for the area in which a child resides, that the child will soon reach the age of eligibility determination for preschool services under Part B of IDEA. Notification information that can be released to Part B without parental consent includes child's name, child's date of birth, and parent's name and contact information (address / phone number).

Notification must occur not fewer than 90 days prior to the child's third birthday for each child enrolled in the ITP more than 90 days before his/her third birthday. For children enrolled in the ITP the CDSA transmits the notification not fewer than 90 days but no earlier than 9 months from the child's third birthday. If the ITP determines that a toddler is eligible for early intervention services more than 45 days before the child's third birthday, but less than 90 days before the toddler turns three (3), the ITP must, as soon as possible, notify the SEA and the LEA where the toddler resides that the toddler on his or her third birthday will reach the age of eligibility for services under Part B. If a child is referred to ITP fewer than 45 days before the toddler's third birthday, the ITP is not required to conduct an evaluation, assessment, or initial IFSP meeting. If that child may be eligible for preschool services under Part B of the IDEA, the CDSA, with parental consent (using the *NC Infant-Toddler Program Authorization to Disclose Health Information* form), must refer the toddler to the appropriate LEA.

### b. Transition Planning Conference and Meeting to Develop Transition Plan

Since all children enrolled in the ITP are potentially eligible for Preschool Program services under Part B of IDEA, the EISC, with the approval of the family, convenes a transition planning conference including CDSA staff, the family, and the LEA representative not fewer than 90 days, and, at the discretion of all parties, not more than 9 months before the toddler's third birthday to discuss any services the toddler may receive in the Preschool Program Part B of IDEA. Written notice of the meeting must be provided using the *NC ITP Meeting Invitation* form.

The EISC, along with other required members of the IFSP team, develops a transition plan in the IFSP not fewer than 90 days, and, at the discretion of all parties, not more than 9 months before the toddler's third birthday. The EISC confirms that referral information about the child has been transmitted to the LEA Preschool Program in accordance with the required notification provisions. If any additional information is sent to the LEA to ensure continuity of services, including a copy of most recent evaluation and assessment information and a copy of the IFSP, parental consent is required (using the *NC Infant-Toddler Program Authorization to Disclose Health Information* form).

A transition planning conference and meeting to develop the transition plan may be combined into one meeting as long as it takes place not fewer than 90 days, and, at the discretion of all parties, not more than 9 months before the toddler's third birthday.

Completion of the transition plan portion of the *IFSP* (Section VII) and service notes reflect documentation of these efforts. The parent's signature on the *IFSP* agreement page (Section VIII) or review page (Section IX) documents that the parent was given prior written notice, the parent's rights were explained, and the parent gives informed consent to carry out the activities listed in the transition plan (along with other services listed on the *IFSP* form). The EISC should give the parent the NC Infant-Toddler Program Notice of Child and Family Rights. Provide prior written notice and obtain written parental consent for any assessments needed to assist with Child Outcome exit ratings and/or transition planning by using the *Prior Written Notice and Consent for Evaluation and Assessment* form.

### STEP 2 – Referral to Other Community Programs

Whether or not the parent is interested in Preschool Program services through the LEA, the service coordinator must also discuss other community options and, with informed written parental consent, refer the child to these programs. Service notes as well as completion of the Transition Plan page of the *IFSP* form (Section VII) and the parent's signature on the *IFSP* agreement page (Section VIII) or IFSP review page (Section IX) serve as documentation of these efforts. In addition, informed, written parental consent for transferring information to these community programs is also required using the *NC ITP Authorization to Disclose Health Information*.

RF	RELEVANT PROCEDURAL SAFEGUARDS DOCUMENTS:		
Pro	Procedural Safeguards Policy - Notification of Child and Family Rights		
	Review and explain Child and Family Rights during all transition planning events and before a child exits the Infant-Toddler Program. [General Rights to emphasize: B, D, E, F, H, K, L, M]		
Pro	Procedural Safeguards Policy - Prior Written Notice -Written Parental Consent		
	Send prior written notice of IFSP reviews which may involve developing or editing the transition plan (use the <i>NC Infant-Toddler Program Meeting Invitation</i> form).		
	Send prior written notice before a child exits the Infant-Toddler Program before age three (use the <i>NC Infant-Toddler Program Meeting Invitation</i> form or <i>Prior Written Notice</i> form).		
	Parents who do not speak English must be given consent and authorization forms in their native language or mode of communication.		
	Written consent is not required to release Notification information to Part B (LEA). Obtain written parental consent to convene a transition planning conference (using the <i>IFSP</i> form) and to disclose any additional information about the child / family to the LEA (using the <i>Authorization to Disclose Health</i>		
	Information form).		
	Provide written prior notice and obtain written parental consent for any assessments that may be completed by the CDSA or providers to assist with Child Outcome exit ratings and / or transition planning (use the <i>Prior Written Notice and Consent for Evaluation and Assessment</i> form).		
	After evaluations and assessments, obtain consent form the parents as to which parties the CDSA is authorized to release the evaluation information (using the <i>Authorization to Disclose Health Information</i> form).		

### RELATED RECORD KEEPING REQUIREMENTS

The Infant-Toddler Program has established and implemented procedures for ensuring confidentiality of information consistent with FERPA and Part C of IDEA. This includes originals of all completed and signed procedural safeguards forms, signed IFSPs, and service or progress notes that must be maintained in the child's early intervention record.

# Procedural Safeguards Policy – Confidentiality ☐ The ITP shall ensure that the parents of a child enrolled in the ITP are afforded the right to confidentiality of personally identifiable information, including the right to written notice of, and written consent to, the exchange of that information among agencies, consistent with Federal and State laws. [General Rights to emphasize: H, I, J] ☐ Each participating agency must protect the confidentiality of personally identifiable information at the collection, maintenance, use, storage, disclosure, and destruction stages. ☐ Parents have the opportunity to inspect and review all early intervention records about their child and family that are collected, maintained, or used by the Program. ☐ Parents have a right to receive, at no cost, a copy of each evaluation, assessment of the child, family assessment, and IFSP as soon as possible after each IFSP meeting.