1.B.7  Timely, Comprehensive, Multidisciplinary Evaluation and Assessment

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II Purpose:

The purpose of this policy is to describe how the Baby Watch Early Intervention Program (BWEIP) and its early intervention (EI) programs shall ensure timely, comprehensive, multidisciplinary evaluations, and assessments of the child and the child’s family.

III Definition(s):

Assessment:
Assessment means the ongoing procedures used by qualified personnel to identify the child’s unique strengths and needs and the EI services appropriate to meet those needs throughout the child’s eligibility. These procedures include the assessment of the child and the family.

Consent:
Consent consists of the following:
- The parent has been fully informed of all information relevant to the activity for which consent is sought and in the parent’s native language when possible;
- The parent understands and agrees in writing to the carrying out of the activity for which the parent’s consent is sought;
- The parent understands that the granting of consent is voluntary on the part of the parent and may be revoked at any time; and
- If a parent revokes consent, that revocation is not retroactive (i.e., it does not apply to an action that occurred before the consent was revoked).

Day:
Day means calendar day, unless otherwise indicated.

Early Intervention (EI):
Early Intervention (EI) refers to programs or services which are selected in collaboration with parents, and are designed to meet the developmental needs of a child and the needs of the family to assist in the child’s development.
Early Intervention (EI) Records:
Early Intervention (EI) records are all records regarding a child that are required to be collected, maintained, or used under part C and Federal regulations. EI records are also referred to as “education records”.

Evaluation:
Evaluation means the procedures used by qualified personnel to determine a child’s initial and continuing eligibility under part C, consistent with the definition of infant or toddler with a disability and Utah’s eligibility criteria.

Individualized Family Service Plan (IFSP):
An Individualized Family Service Plan (IFSP) is a written document identifying appropriate EI services for a child and their family agreed upon by the IFSP Team. The IFSP is based on the evaluation and assessments completed for the child and the family.

Infant or Toddler with a Disability (Child):
A child under three (3) years of age who needs EI services because s/he is experiencing a developmental delay in one or more of the following areas:
• Cognitive development;
• Physical development, including vision and hearing;
• Communication development;
• Social or emotional development;
• Adaptive development; or
• Is diagnosed with a physical or mental condition that has a high probability of resulting in a developmental delay.

Initial Assessment:
Initial assessment refers to the assessment of the child and the family assessment conducted prior to the child’s first IFSP meeting.

Initial Evaluation:
Initial evaluation refers to the child’s evaluation to determine his or her initial eligibility under part C.

Local Education Agency (LEA):
A Local Education Agency (LEA) refers to the public school district (Part B Preschool Program) where the family resides.

Multidisciplinary:
Multidisciplinary refers to the involvement of two (2) or more individuals from separate disciplines or professions conducting evaluations and assessments.

Native Language:
The language normally used by that individual, or, in the case of a child, the language normally used by the parents of the child.

Parent:
A biological or adoptive parent of a child, a foster parent, a guardian generally authorized to act as the child’s parent or authorized to make EI, educational, health, or developmental decisions for the child, an individual acting in the place of a biological or adoptive parent with whom the child lives or an individual who is legally responsible for the child’s welfare, or a surrogate parent, as assigned by the BWEIP.
**Qualified Personnel:**
Personnel who have met state approved or recognized certification, registration, licensing, or other comparable requirements that apply to the areas in which the individuals are conducting evaluations, assessments, or providing EI services.

**State Education Agency (SEA):**
The State Educational Agency (SEA) is the Utah State Office of Education.

**IV Principles and Procedures:**

**A. Post-Referral Timeline (45 Day Timeline Requirement):**

1. The initial evaluation and the initial assessments of the child and family and the initial IFSP meeting shall be completed within forty-five (45) days from the date the EI program receives the referral of the child (See BWEIP policy 1.B.3 Individualized Family Service Plan (IFSP) Development, Implementation, and Review).

**B. Prior Written Notice and Consent:**

1. Written prior notice shall be given to parents prior to conducting evaluations and assessment of a child.

2. Signed parental consent shall be obtained prior to conducting evaluations and assessments of a child.

   a. If a parent does not give consent, the EI program shall make reasonable efforts to ensure that the parent:
      1) Is fully aware of the nature of the evaluation and assessment of the child that would be available; and
      2) Understands that the child will not be able to receive the evaluation or assessment unless consent is given.

   b. BWEIP may not use the due process hearing procedures to challenge a parent’s refusal to provide consent for evaluation and assessment.

3. Prior written notice shall be provided to parents a reasonable time before the EI program proposes, or refuses, to initiate the evaluation of their child.

4. The notice shall be in sufficient detail to inform parents about the action that is being proposed or refused, the reasons for taking the action, and all procedural safeguards that are available; including:

   a. A description of mediation;

   b. How to file a written complaint;

   c. How to file a due process complaint; and

   d. Any timelines under those procedures.

5. The notice shall be written in a language understandable to the general public and provided in the native language of the parent or other mode of communication used by the parent, unless it is clearly not feasible to do so.
6. If the native language or other mode of communication of the parent is not a written language, the EI provider shall take steps to ensure that:
   
a. The notice is translated orally or by other means to the parent in the parent’s native language or other mode of communication;

b. The parent understands the notice; and

   c. There is written evidence that these requirements have been met.

C. Evaluation of the Child:

1. Each child under the age of three (3) who is referred for evaluation or EI services in the BWEIP and suspected of having a disability (See BWEIP policy 1.B.10 Transition To Preschool and Other Programs) for procedures for children older than thirty-four-and-one-half (34 ½) months receives:
   
a. A timely, comprehensive, multidisciplinary evaluation, unless eligibility is established based on medical and other records.

2. An evaluation for a child shall include:
   
a. Administering an appropriate evaluation instrument;

b. Collecting the child’s history (including interviewing the parent);

c. Identifying the child’s level of functioning in each of the developmental areas:
   1) Cognitive development;
   2) Physical development, including health, hearing, and vision;
   3) Expressive and receptive communication development;
   4) Social or emotional development; and
   5) Adaptive development.

d. Gathering information to understand the full scope of the child’s unique strengths and needs from other sources such as:
   1) Family members;
   2) Other care-givers;
   3) Medical providers;
   4) Social workers; and
   5) Educators.

e. Reviewing medical, educational, or other records.

3. In conducting an evaluation, no single procedure may be used as the sole criterion for determining a child’s eligibility.

4. A child’s medical and other records may be used to establish eligibility (without conducting an evaluation of the child) in the BWEIP, if those records indicate that the child’s level of functioning in one or more of the developmental areas constitutes a developmental delay or that a child has a diagnosed condition that may result in a developmental delay according to the BWEIP Approved Diagnosis/Conditions List.

5. A written informed clinical opinion may be used as the basis to establish a child’s eligibility, even when other instruments do not support eligibility.
a. Eligibility established through a written informed clinical opinion shall be determined by at least two professionals representing different disciplines who have knowledge and expertise in the areas of concern, and;

b. At least one professional shall hold an EI Specialist II credential.

6. In no event may written informed clinical opinion be used to reverse or negate the results of evaluation instruments that have established a child’s eligibility.

7. Families will receive a family assessment for children determined eligible.

D. Procedures for Assessment of the Child and Family

1. A multidisciplinary assessment of each child shall be conducted by qualified personnel to identify appropriate EI services to meet his or her unique strengths and needs and the early intervention services appropriate to meet those needs.

2. The assessment of the child shall include the following:

   a. A review of the results of the evaluation conducted to determine eligibility;

   b. Personal observations of the child; and

   c. The identification of the child’s needs in each of the developmental areas:

      1) Cognitive development;
      2) Physical development, including health, hearing and vision;
      3) Expressive and receptive communication development;
      4) Social or emotional development; and
      5) Adaptive development.

3. A family-directed assessment tool shall be used by qualified personnel in order to identify the family’s resources, priorities, and concerns; and the supports and services necessary to enhance the family’s capacity to meet the developmental needs of the child.

4. The family-directed assessment shall:

   a. Be voluntary on the part of each family member participating in the assessment;

   b. Be based on information obtained through an assessment tool and an interview with those family members who elect to participate in the assessment; and

   c. Include the family’s description of its resources, priorities, and concerns related to enhancing the child’s development.

5. The assessments of the child and family may occur simultaneously with the evaluation, provided the requirements for the evaluations and assessments are met.

6. All evaluations and assessments of the child and family shall be conducted in a nondiscriminatory manner, and selected and administered not to be racially or culturally discriminatory.

7. All evaluations and assessments of a child and family assessments shall be conducted in the native language of the family members being assessed unless clearly not feasible to do so.
a. The language normally used by that individual, or, in the case of a child, the language normally used by the parents of the child, or

b. The language normally used by the child, if determined developmentally appropriate for the child by qualified personnel conducting the evaluation or assessment.

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

V Authority:
34 CFR §303.24 Multidisciplinary
34 CFR §303.321 Evaluation of the child and assessment of the child and family;
34 CFR §303.340 Individualized family service plan – general;
34 CFR §303.400 General responsibility of lead agency for procedural safeguards;
34 CFR §303.420 Parental consent and ability to decline services; and
34 CFR §303.421 Prior written notice and procedural safeguards notice.

VI Related Directive:
BWEIP policy 1.B.10 Transition To Preschool and Other Programs

VII Revision Log:
April 2013: New policy.
June 2013: Added language concerning native language and mode of communication, medical records, and child’s level of functioning and “appropriate early intervention services to meet those needs.”

Susan Ord, BWEIP Program Manager

7-01-13
Date