Eligibility Determination Process in Family Centered Early Supports and Services

NH Rule He-M510
In General:

The purpose of a multidisciplinary evaluation is to determine a child’s eligibility or progress, redefine services and expected outcomes, or plan for future needs.
A Multidisciplinary Evaluation must:

1. Be conducted by a team composed of the family, other persons requested by the family, and professionals from 2 or more disciplines whose expertise most closely relates to the needs of the child and family

2. Include all components of the assessment as defined in He-M510

3. Be based on informed clinical opinion

4. Be carried out in a setting that is convenient to the family
5. Include the completion of either the HELP or the IDA

6. Include an evaluation of the child’s level of functioning in each of the following developmental areas: cognitive, physical (including vision and hearing), communication, social/emotional, and adaptive
7. A review of records related to the child’s current health status and medical history

8. Be timely, comprehensive, and multidisciplinary (at least two different disciplines who are trained to utilize appropriate methods and procedures)
9. Include a family-directed identification of the needs of each child’s family to appropriately assist in the development of the child

- Identified through the use of an assessment tool and a voluntary personal interview with the family

- Identify the family’s resources, priorities, and concerns

- Identify the supports and services necessary to enhance the family’s capacity to meet the developmental needs of the child
Assessment

Assessment means the procedures used by personnel, as identified in He-M 510, throughout the period of a child’s application and eligibility to identify:

- The child’s unique strengths and needs and the services appropriate to meet those needs; and

- The resources, priorities, and concerns of the family, as well as, the supports and services necessary to enhance the family’s capacity to meet the developmental needs of their infant or toddler with a disability or developmental delay.
Expected Practices:

- Multiple perspectives (more than one person and more than one place)
- Multiple techniques – formal, informal, observation, interviews
- Multiple occasions (more than one time)
- Informed clinical opinion
Recommended Practices include assessment of child’s attainment of function (functional competence) instead of developmental milestones.

Examples:

- communicating not necessarily speaking
- eating, not necessarily with a spoon
- finding a hidden object not necessarily visually
- walking with a walker not necessarily under one’s own power
Timelines

• The evaluation and initial assessment for each child (including the family assessment) must be completed within a reasonable time so that the IFSP can be signed within 45 days of the initial referral to ESS.
Differences between IDEA and State Rule He-M510:

New Hampshire has historically had a strong pro-family philosophy regarding the role that families play in their children’s supports and services.

- Family Support Law was established and continues to be featured in all legislation related to Developmental Services.

- Prominence of phrases such as ‘as requested by the family’ and ‘convenient to the family’, which is stronger language than that used in Part C of the IDEA.
New Hampshire’s eligibility definitions:

In He-M510 “Child” means an infant or toddler with a disability who is at risk for, or has a developmental delay, exhibits atypical behavior, or has an established condition.

Developmental delay means that a child, birth through age 2 with a 33% delay in one or more areas of development as determined through completion of the Multidisciplinary evaluation.
Atypical behavior means behavior documented by the family and documented by personnel authorized to provide early supports and services that includes:

- extreme fearfulness,
- self-injurious or extremely aggressive behaviors,
- extreme apathy,
- unusual and persistent patterns of inconsolable crying,
- persistent failure to initiate or respond to most social situations.
“At risk for substantial developmental delay” means a child, birth through age 2 who experiences 5 or more child or family factors, or a combination of both

(see He-M510.02 (d))

“Established condition” means a child, birth through age 2, with a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay even if no delay exists at the time of referral as documented by the family and ESS personnel

(see He-M510.02 (n))
Required evaluation tools

As of July 1, 2003, New Hampshire requires the use of the Hawaii Early Learning Profile (HELP) or the Infant-Toddler Developmental Assessment (IDA) during the initial evaluation and assessment process to assist in the determination of eligibility.
Hawaii Early Learning Profile (HELP)

- Curriculum based assessment
- Not standardized
- Defines age ranges
- Allows for flexibility in use of professional judgment
- Assists in building IFSP goals
- In NH, the policy of using the middle of the age range when calculating developmental age for eligibility determination has been established
Infant Toddler Developmental Assessment (IDA)

- Integrated clinical process
- Reliable and valid tool
- Designed for use by a team of two or more professionals
- Utilizes procedures that serve as a framework for review and integration of data from multiple measures
• Consists of six phases, each of which develops from the previous phase

• Follow the instructions in the manual and use the defined age range when calculating the developmental age for eligibility determination
Using either required evaluation tool:

* Follow procedures according to the manuals.

* For infants born prematurely, do not adjust for age.