

EarlySteps Practice Manual:

Chapter 3: Child Find and Referral

This chapter describes the child find activities used in EarlySteps to locate those children who may be eligible for the EarlySteps system of early intervention. Requirements for referral are also detailed.

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Louisiana’s State-Identified Measureable Result for Infants and Toddlers with Disabilities and Their Families:

The EarlySteps System will improve child outcomes through supports that are focused on family Concerns, Priorities and Resources and provided through a team-based approach.

Chapter 3 October 2023 Updates:

Chapter 3 Child Find/Referral	Previously referral in 2 days.	--From 2011 Regulations: added to list of primary referral sources -- From 2011 Regulations:—change referral from primary referral sources to 7 days --Updated SPOE (Referral) list --Added DEC Recommended Practices --not required to keep hard copy version if information entered in EarlySteps Online.
	Referral Form	--referral acknowledgement can be sent via email. --attempt to contact family—added texting when contacts unsuccessful.
	Performance Expectations	--General Supervision Requirements



DEC Recommended Practice: Leadership 6: Leaders establish partnerships across all levels and with their counterparts in other systems and agencies to create coordinated and inclusive systems of services and supports.

Child Find Procedures

Requirements for this chapter of the practice manual are taken from the IDEA, Part C regulations: 34 CFR 303.300-303.303 and EarlySteps Program Policies (2014).

The Louisiana Department of Health (LDH) is responsible for ensuring that a comprehensive Child Find system is in place to identify, locate and evaluate all infant and toddlers with disabilities across the state. The term “Child Find” refers to the process that EarlySteps and its agency partners use to find and enroll eligible children in the Part C system.

Child Find materials include information on:

- The purpose and scope of EarlySteps,
- The procedure for making referrals; how to make referrals,
- Developmental screening procedures,
- The method for gaining access to a comprehensive, multidisciplinary evaluation to determine eligibility and access to early intervention services,
- The family’s rights, opportunities, and responsibilities within the state’s Part C system, and
- Participation by primary referral sources, especially hospitals and physicians

Child Find efforts are conducted through the distribution of written materials as well as through oral communication (e.g., radio and television public service announcements, presentations to church or community groups, health fairs, etc.). Information is shared regarding the requirements of the Child Find system and where to refer children for eligibility determination. Child Find efforts focus on the early identification of infants and toddlers with disabilities. A major emphasis is the dissemination of materials to primary referral sources, especially hospitals and physicians, that inform parents with premature infants or infants with other developmental needs associated with learning or developmental complications, on the availability of early intervention services under IDEA, Part C. LDH will assist hospitals and physicians in disseminating this information to families who may meet the eligibility criteria. LDH will ensure rigorous standards for appropriately identifying infants and toddlers with disabilities to receive early intervention services are followed, to reduce the need for developmental, therapeutic and educational services in the future.

The Child Find System in Louisiana is coordinated with all other major early care and education efforts to locate and identify children who are eligible to receive early intervention services and supports. EarlySteps coordinates these efforts with the State Interagency Coordinating Council (SICC) and the Louisiana Department of Education to eliminate unnecessary duplication of effort and to implement the Child Find efforts in the most effective manner possible. Child Find efforts are conducted by state agencies responsible for administering the various education, health, and social service programs relevant to infant and toddlers with disabilities and their families. These coordinated efforts include the following Primary Referral Sources:

1. Child Find efforts authorized under IDEA, Part B through the Louisiana Department of Education and local school systems;
2. Maternal and Child Health program under Title V of the Social Security Act including the Maternal, Infant, and Early Childhood Home Visiting Program, the Nurse Family Partnership and Parents as Teachers;
3. Medicaid's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program under Title XIX of the Social Security Act implemented through the Healthy Louisiana Medicaid managed care networks;

4. Programs with the Developmental Disabilities Assistance and Bill of Rights Act of 2000, that is services provided through the human service districts/authorities and through the Office for Citizens with Developmental Disabilities;
5. Head Start Act, including Early Head Start programs,
6. Supplemental Security Income (SSI) program under Title XVI of the Social Security Act,
7. Child Protection and Child Welfare programs, including programs administered by, and services provided through, the foster care agency the Department of Children and Family Services (DCFS) responsible for administering the Child Abuse Prevention and Treatment Act (CAPTA and re-authorized in 2016 as CARA). CAPTA is the federal Child Abuse Prevention and Treatment Act. Congress has mandated that state child protection agencies make a referral to Part C for all cases involving substantiated child abuse or neglect and for children who are identified as being affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure related to legally prescribed substances and alcohol. For IDEA, Part C, this is only for children under the age of three years.
8. Child care programs in Louisiana in coordination with the Louisiana Department of Education,
9. Programs that provide services under the Family Violence and Prevention and Services Act,
10. Early Hearing Detection and Intervention (EHDI) systems (42 USC 280g-1) administered by the Centers for Disease Control and through LDH, Office of Public Health,
11. Children's Health Insurance Program (CHIP) authorized under Title XXI of the Social Security Act,
12. LDH is responsible for identifying and providing services to eligible children and their families of Native American descent who are living on a reservation within Louisiana. LDH has partnered with the Governor's Office of Indian Affairs, to target populations of Native Americans who are currently living on reservations, to increase the awareness of early intervention services and supports across the state.

In Louisiana, there are four Native American Tribes who are federally recognized and eleven Native American Tribes who are state recognized. With assistance from the Governor's Office of Indian's Affairs, EarlySteps focuses efforts on developing partnerships with the Tribal Social Services Directors, Tribal Councils and Elders, throughout the state, to raise awareness, ensure access and provide early intervention services to the Native American population residing on reservations.

13. In order to target children who are homeless, LDH provides information on EarlySteps to individuals who work or who reside in homeless shelters to the directors of homeless programs coordinated through the Louisiana Department of Education. Furthermore, LDH will continue to provide resources to Regional Administrators for each Department of Children and Family Services (DCFS) region and develop partnerships with Homeless Liaisons within school systems statewide in order to increase accessibility of early intervention services among Louisiana's homeless population

EarlySteps provides information to families of infants and toddlers with disabilities about the availability of services under IDEA, section 619, not fewer than 90 days before a child's third birthday. This is accomplished through:

- A list of children between 2 years, 2 months and 2 years, 9 months of age provided to the Louisiana Department of Education monthly to facilitate timely transition at age 3 for children who may be Part B eligible.
- Local school system referral information provided to families when a child is referred for early intervention 90 days before their 3rd birthday.
- As part of transition planning, through IFSP team meetings and a transition conference held for eligible children when the child is 2 years, 3 months to 2 years, 9 months of age. More information about transition planning can be found in Chapter 8 of the Practice Manual.

Residency Requirements

Regarding residency requirements to receive early intervention services and supports in Louisiana, the Lead Agency established the following:

- A child must live in Louisiana.
- A child living with a parent, legal guardian, or person “acting as a parent” in the State of Louisiana is considered a resident.
- Native American infants and toddlers with disabilities and their families residing on a reservation geographically located in the state are considered residents of the state.
- Infants and toddlers who are homeless or in the custody of the state are considered residents of the state.

Referral Procedures

Forms that support the Referral Process located in Practice Manual Chapter 14

- **Referral Form**
- **Acknowledgement of Referral Letters**
- **Record Access Log**

A **referral source** is the individual or agency that first referred the child to the System Point of Entry (SPOE). The EarlySteps **Referral Form** is used to make referrals and may be faxed, mailed or called in to the local SPOE. Referral is the first “service” that a potentially eligible child and his/her family receive from the EarlySteps System. The ten SPOE offices located around the state are listed at the end of this chapter.

Primary referral sources (as identified in the partial list in the previous section) are mandated to refer any child suspected to be eligible for EarlySteps, as soon as possible and no later than 7 days after the child is identified. Parental consent or knowledge of the referral is not required, but best practice dictates that the parent should be informed of the referral.

Other possible primary referral sources include hospitals, physicians, parents and family members, school systems, public health and social services agencies, homeless shelters and domestic violence shelters and agencies.

Children referred to EarlySteps under CAPTA/CARA must meet the EarlySteps eligibility criteria as outlined in Chapter 5, to receive services in EarlySteps. The referral process, intake process, and eligibility determination for children referred from child protection agencies follow the same procedures as all other EarlySteps referrals.

Step 1: Receipt of Referral

Upon receipt of the referral, the SPOE will open both the paper and electronic early intervention records and assign an Intake Coordinator, who must contact the family within 3 working days. With the upgrade to EarlySteps Online, the SPOE is not required to maintain a hard copy of the referral form. Information from other referral formats may also be transferred to the EarlySteps referral form if the SPOE elects to maintain a hard copy version in the child’s record.

If the child is fewer than 45 calendar days from turning 3 years of age, the child should be referred to the Local Education Agency (LEA) for evaluation and assessment with parent consent. The intake coordinator will assist the family with the referral if consent is given. The intake coordinator and LEA will also assist the family with any referrals to the regional Human Services Authority or District (HSA/D), also known as the Local Governing Entity (LGE).

If the child is between 45-90 calendar days from turning age three the child will continue with the referral process and eligibility is conducted jointly with the LEA (with consent from the family). The intake coordinator and LEA will also assist the family with any HSA/D referrals. The LEA should participate in the initial IFSP meeting, if the child is eligible, which can also serve as the transition conference.

Step 2: Acknowledgement of Referral

An **Acknowledgement of Referral** is sent to the referral source, following the receipt of referral. It does not mean contact with the family has occurred. This acknowledgement includes the child’s name, but no other personally identifiable information, unless the parent has given consent to include it. The Intake Coordinator may contact the referral

source to obtain additional information (i.e., another telephone number, directions to the home, clarification of reason for referral, etc.). Further information regarding screening results, test results or eligibility can be shared with informed written consent from the parent(s) and is encouraged.

The Intake Coordinator sends a completed **Acknowledgement of Referral Letter** to the referral source no later than 5 working days following the date of receipt of referral at the SPOE. The referral letter includes the process for obtaining consent in order to share information. Electronic referral acknowledgement is acceptable via fax or email.

Step 3: Contacting the Family

An Intake Coordinator is required to contact the family by telephone or in person within 3 working days from receipt of the referral. A face-to-face intake meeting must occur with the family no later than 10 working days from the receipt of the referral.

If the family is unable to be contacted by telephone, the Intake Coordinator will complete the following steps:

1. If the phone number has been disconnected, call the referral source and ask for additional contact information.
2. If there is no answer, leave a message if an answering machine or voice mail is available. Send a text requesting contact when other means have failed.
3. Call the referral source; ask if they have suggestions on how to contact the family.
4. Document all attempts to contact the family.

Note: The SPOE will proceed to Step 5 below if unable to contact the family after three good faith attempts.

Good faith attempts:

- All telephone contacts with a family resulting in a message with person/machine,
 - Contacts with the referral source or to alternate number that result in a message with person or on machine,
 - All letters whether certified mail or not,
 - Written correspondence, hand delivered to the address on the referral form,
 - A face to face contact with the family.
5. Send the family a letter, via certified mail, stating that the child's referral record will be closed if the family does not contact the SPOE within 7 calendar days from the date of the letter. Inform the referral source that EarlySteps was unable to contact the family, especially when the referral was sent from DCFS for a child with a substantiated case of abuse or neglect. Additionally, the family letter must outline the steps a family can take to contact the SPOE in the future. The letter must also contain information concerning the procedural safeguards for families relevant to referral.
 6. If a family has not responded within the timelines stated in certified letter, close the electronic file. If any authorizations have been issued (interpreters, for example), contact the interpreter before closing the file.

<p>Federal Performance Indicator # 7: Percent of Infant/Toddler's with an IFSP in 45-day timeline following referral. Target: 100%</p>

Referral Process

The flowchart below illustrates the timelines for the referral process.

Referral
received at the
SPOE
Day 1

Intake
Coordinator
makes Initial
contact with
family by
Day 3
(working days)

Schedule a
meeting for an
interview at the
family's
convenience
(within 10
working days)

Acknowledge
the referral in
writing by
Day 5
(working days)

Develop the
Electronic Early
Intervention
Record

Develop the
hard copy of the
Early
Intervention
record

If family is not
interested,
provide contact
information for
the SPOE for
future referral.

DEC Recommended Practice – Leadership 14: Leaders collaborate with other agencies and programs to develop and implement ongoing community-wide screening procedures to identify and refer children who may need additional evaluation and services.



System Points of Entry (SPOE) Offices to make referrals

<u>LDH</u> Region	<u>SPOE</u>	<u>Parishes</u>	<u>Contact Information</u>
1	Easter Seals of Louisiana	Orleans, St. Bernard, Plaquemines	Program Director, Holly Bell 935 Gravier, Suite 720 New Orleans, LA 70112 Phone (504) 595-3408 Fax (504) 523-3465 Toll Free: (877) 595-3408 Email: earlysteps@laeasterseals.com or hbell@laeasterseals.com
2	Southeast Louisiana Area Health Education Center	East Baton Rouge, West Baton Rouge, East Feliciana, West Feliciana, Pointe Coupee, Iberville, Ascension	Brian Jakes Jr., Program Manager 4324 S. Sherwood Forest Blvd, St. C-155 Baton Rouge, LA 70816 Phone (225) 925-2426 Toll Free 1-866-925-2426 Fax (225) 925-1370 E-mail: brian.jakes2@selahec.org
3	Southeast Louisiana Area Health Education Center	Assumption, St. John, St. Charles, St. James, Terrebonne, Lafourche, St. Mary	Brian Jakes Jr., Program Manager 602 Parish Road Thibodaux, LA 70301 Phone (985) 447-6550 Toll Free 1-866-891-9044 Fax (985) 447-6513 or (866)897-9044 E-mail: brian.jakes2@selahec.org
4	First Steps Referral and Consulting LLC	Lafayette, Iberia, St. Martin, Vermillion, St. Landry, Evangeline, Acadia	Mary F. Hockless, CEO 138 East Main Street New Iberia, LA 70560 Phone (337) 359-8748 Toll Free 1-866-494-8900 Fax (337) 359-8747 E-mail: teamfsrc@bellsouth.net
5	First Steps Referral and Consulting LLC	Beauregard, Jefferson Davis, Allen, Cameron, Calcasieu	Mary F. Hockless, CEO 138 East Main Street New Iberia, LA 70560 Phone (337) 359-8748 Toll Free 1-866-494-8900 Fax (337) 359-8747 E-mail: teamfsrc@bellsouth.net
6	Easter Seals of Louisiana	Vernon, Rapides, Winn, Grant, LaSalle, Catahoula, Concordia, Avoyelles	Dana McNeal, Program Director 2840 Military Hwy Pineville, LA 71360 Phone: (318) 704-1038 Fax: (318) 640-4299 Email: earlysteps6@gmail.com
7	Families Helping Families at the Crossroads of Louisiana	Caddo, Bossier, Webster, Claiborne, Bienville, Natchitoches, Sabine, DeSoto, Red River	Kim Williams, Program Supervisor 2620 Centenary Blvd. Bldg. 2 Suite 249 Shreveport, LA 71104 Phone (318) 226-8038 Toll Free 1-866-676-1695 Fax (318) 425-8295 E-mail: kim.spoe@gmail.com

<u>LDH Region</u>	<u>SPOE</u>	<u>Parishes</u>	<u>Contact Information</u>
8	Easter Seals of Louisiana	Ouachita, Union, Jackson, Lincoln, Caldwell, Morehouse, West Carroll, East Carroll, Richland, Franklin, Tensas, Madison	Pam Newton, Director 1103 Hudson Lane Suite 3 Monroe, LA 71201 Phone (318) 322-4788 Toll Free 1-877-322-4788 Fax (318) 322-1549 Email: pnewton@laeasterseals.com
9	Southeast Louisiana Area Health Education Center	St. Tammany, Livingston, St. Helena, Tangipahoa, Washington	Brian Jakes Jr., Program Manager 1302 J.W. Davis Drive Hammond, LA 70403 Phone (985) 429- 1252 Toll Free 1-866-640-0238 Fax (985) 340-7996 Email: brian.jakes2@selahec.org Melissa.Waddell@selahec.org
10	Southeast Louisiana Area Health Education Center	Jefferson	Brian Jakes, Jr., Program Manager 1321 26th St. Kenner, LA 70026 Phone (504) 496-0165 Fax (504) 496-0167 Toll Free 1-866-296-0718 Email: brian.jakes2@selahec.org

General Supervision Performance Expectations

The following are performance expectations for the Child Find and Referral requirements of EarlySteps. Failure to meet requirements will result in findings of noncompliance, corrective action and possible sanctions.

Performance Expectation	Monitoring/Source	Responsibility
Primary referral sources are aware of and able to make referrals to EarlySteps.	Early Intervention Data System (EIDS) Primary Referral Source Report	Community Outreach Specialists, Regional Coordinators, All EarlySteps practitioners
Referral Acknowledgement Letter sent	Chart Review	SPOE Staff
Families contacted within required timelines	Chart Review	SPOE Staff
All referrals entered in EarlySteps Online	EIDS Referral report Child-specific look ups in EIDS	SPOE Staff
Data entry is accurate	SPOE has Data Quality Review Plan Errors in Data Entry observed in EIDS	SPOE Staff
Notice of Action and Parent Consent and Rights	Chart Review <ul style="list-style-type: none"> • Notice of Action and consent <ul style="list-style-type: none"> ○ Screening ○ Eligibility Determination ○ IFSP • Parent Rights provided 	SPOE Staff
Families provided copies of records	Documentation in Chart Review: <ul style="list-style-type: none"> • Evaluation/Assessment • Family Assessment • IFSP 	SPOE Staff
Indicator 1: IFSPs for eligible children complete within 45 days following referral	Early Intervention Data System 45-Day Timeline Report	SPOE Staff
Indicator 8: Transition	EIDS Report and Transition Conference Dates: <ul style="list-style-type: none"> • IFSP Section 5:Transition completed with appropriate transition steps and services documented • Transition Conference date within timelines-entered on IFSP form and in EIDS • LEA notified for IFSP if Transition Conference timeline will occur before IFSP 6-month review. • Family wants transition to OCDD + documented in EarlySteps Online • Documents sent to LGE when family indicates “yes” on referral to OCDD service system. 	SPOE Staff
Referrals to community agencies when child does not qualify	Case closure for child who does not qualify: <ul style="list-style-type: none"> • includes referral to community agencies • includes next two age-appropriate ASQs for families if concerns continue • LEA referral information if child might qualify for IDEA,Part B 	SPOE staff
Confidentiality of Information	SPOE policy on records maintenance	SPOE staff

Performance Expectation	Monitoring/Source	Responsibility
maintained	Access to Records forms available in child chart—Child Specific Access Access to file cabinet forms available- General Access	