



## What Docs Should Know About...Part C Early Intervention Program

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### **The Part C Early Intervention Program provides family-centered services to infants and toddlers with special needs and their families.**

- While “special education” services for school-age children were first established in 1975, services for infants and toddlers up to age three with special needs were not added until the passage of the Education of the Handicapped Act Amendments of 1986.
- The Part C program is designed to assist states in developing comprehensive systems to provide early intervention services to children up to age three with special needs, along with their families. Almost 270,000 children participated in Part C in 2002.
- The goals of Part C are to enhance the development of infants and toddlers with disabilities; reduce later need for special education services; maximize the possibility of independent living for children with disabilities and their families; and increase families’ capacities for meeting their children’s needs.

### **Part C provides a wide range of services to eligible children and their families.**

- States are required to provide Part C services to two categories of children: children with developmental delays, and children with a diagnosed condition that has a high probability of resulting in developmental delay. At their option, states may also decide to serve children deemed “at risk” of substantial developmental delays.
- Under IDEA, a range of Part C early intervention services are available to families, including: assistive technology, audiology, behavior management, family training, health services, medical services, nursing services, nutrition services, occupational therapy, physical therapy, psychological services, respite care, service coordination, social work services, speech/language services, transportation, and vision services. Services are either provided at no cost to families or on a “sliding-scale” fee basis. Frequently, public or private health insurance will also cover services.

### **Early intervention services are designed to be individualized and flexible to meet the specific needs and characteristics of each family.**

- Part C mandates that children receive early intervention services in “natural environments” and, while the current trend is for more early intervention services to be provided in the home, children can also receive services in child care settings and other community settings.
- The centerpiece of early intervention service provision is the Individualized Family Service Plan (IFSP), which should be created collaboratively by parents and service providers to specifically address families’ concerns, needs, and strengths. Families should be considered integral parts of the IFSP team and must be able to fully understand their options in order to make informed decisions. This means that states must adopt family-friendly, culturally appropriate methods for sharing information with and involving families.<sup>1</sup>

### **Docs can get involved by helping families access Part C services and advocating for children with special needs and the Part C Early Intervention Program.**

- Eligibility for the Part C program varies by state. To find the lead agency in your state, contact the National Information Center for Children and Youth with Disabilities and request a *State Resource Sheet*, 1-800-695-0285 or at: <http://www.nichcy.org>. Families can request an evaluation and assessment for their child; no referral is necessary, and evaluations and assessments must be provided at no cost to families.
- The American Academy of Pediatrics highlights several things that pediatricians can provide and should ensure all young children with disabilities receive: a medical home; screening---for all children---, surveillance, and diagnosis; referral to early intervention programs and parent support groups; diagnosis and determination of eligibility; participation by the pediatrician in assessment; counsel and advice to families; assistance with creation of the IFSP; coordinated medical services; and advocacy.<sup>2</sup> Contact Docs For Tots ([dft@docsfortots.org](mailto:dft@docsfortots.org)) to become involved in advocating for Part C.

#### **Additional Resources for Docs**

- The National Early Childhood Technical Assistance Center, <http://www.nectac.org/>
- The National Early Intervention Longitudinal Study, <http://www.sri.com/neils/>
- The American Academy of Pediatrics, <http://www.aap.org>

Source: National Early Childhood Technical Assistance Center, <http://www.nectac.org/>

<sup>1</sup> Hurth, J.L. & Goff, P. (2002). *Assuring the family's role on the early intervention team: Explaining rights and safeguards* (2<sup>nd</sup> ed.). Chapel Hill, NC: National Early Childhood Technical Assistance Center. Available: <http://www.nectac.org/pubs/pdfs/assuring.pdf>

<sup>2</sup> American Academy of Pediatrics. (1999). *Pediatrics*, 104, 124-127.