

#### Providing Services for Children with VI/DHH Birth to 3 in an Early Childhood Program



Region One ESC
Workshop # 125319 (AM Session) & 122446 (PM Session)
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# Early Childhood Programs Serving Districts/Charter Schools in Region One ESC

#### Easter Seals Rio Grande Valley

- McAllen Office 1217 Houston McAllen, TX (956)-631-9171
- Harlingen Office 2422-C E. Tyler Ave. Harlingen, TX (956)-423-9171

**Project Ninos** 5709 Springfield Ave, Laredo, TX (956) 728-1769

#### **Region One ESC**

- Edinburg Office 1900 W. Schunior Edinburg, Tx (956) 984-6131
- Brownsville Office 405 E Levee St, Brownsville, TX (956) 504-9422

### Where do we





Note
Determine if the referral was from
Tx. Early Detection and Intervention
(TEHDI)
and obtain consent.
More information on future slide

#### **First Phone Call**

Enrollment Coordinator (EC), at initial phone call, will determine if DHH/VI red flags are identified. EC will schedule to complete the Release of Information (ROI) for the Local Education Agency (LEA) so that DHH/VI evaluation can be scheduled prior to the initial Individual Family Service Plan (IFSP).

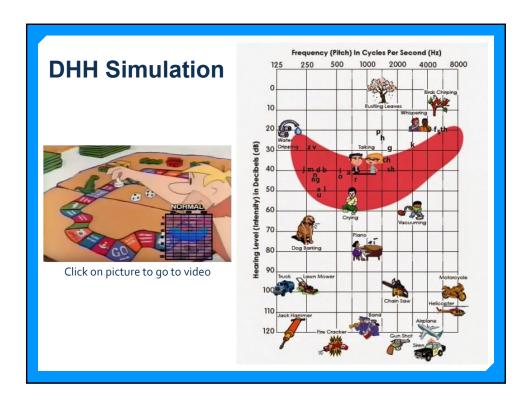
## **DHH/VI Eligibility**





If a child has been identified as having DHHI/VI red flags, a teacher of the Deaf and Hard of Hearing (DHH) and/or aTeacher of the Visually Impaired (VI) must be present with ECI staff to determine DHH/VI eligibility.

ECI staff must have an ROI for the LEA prior to notifying the DHH/VI teacher.



## **ECI's Responsibility**

- \* If there are red flags and no medical records available, complete the ROI for the specialist/s while at the same time getting the ROI for the LEA.
- $\boldsymbol{*}$  If the family has concerns, but the child does  $\underline{not}$  have:
  - a medical specialist and/or
  - a financial barrier

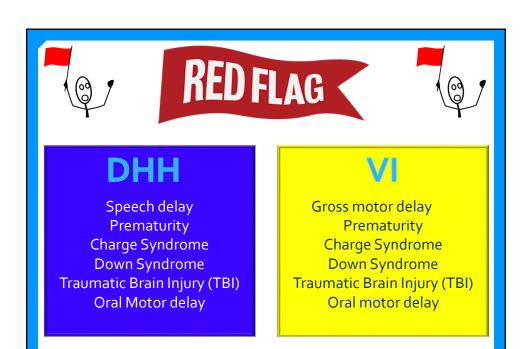


Then, service coordination should be provided to assist the family in accessing both.

ECI staff is ultimately responsible for:



Ensuring child is seen by a specialist and services are paid for. Getting all medical records and submitting those to the LEA.



# Texas Early Hearing Detection and Intervention (TEHDI)

- Newborn hearing screening is mandated by health and safety code chapter 47.
- Optimum time for initial birth screening is after 12 hours of age using Auditory Brainstem Response (ABR) and/or Otoacoustic Emission Screens (OAE).

https://www.dshs.texas.gov/tehdi/ でよう TEHDI

# Texas Early Hearing Detection and Intervention (TEHDI)

NICU infants who do not pass their hearing and screening have a 10 day waiting period for follow up to allow debris in the canal to resolve and late responding hearing mechanisms time to activate.

<sup>©</sup>℃<sup>®</sup> TEHDI.

https://www.dshs.texas.gov/tehdi/

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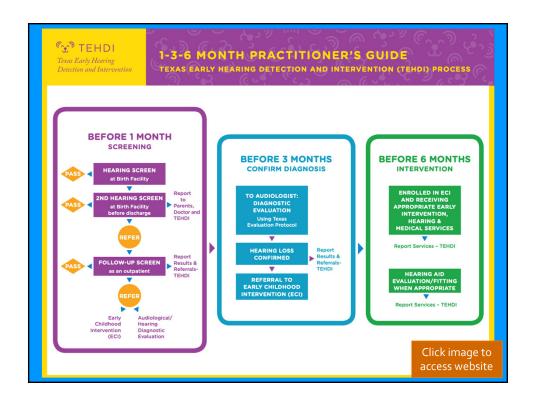
<sup>©</sup>ႋၟႍ<sup>Ϡ</sup> TEHDI

# Texas Early Hearing Detection and Intervention (TEHDI)

Newborns who do not pass their outpatient hearing screenings are referred;

- 1 to a Local ECI program in the TEHDI management information system or TEHDI MIS,
- 2 a pediatric audiologist for a diagnostic evaluation.





## **Suspected Hearing Loss??**

If you are needing more resources to advance your educational tool bag, resources for parents or additional training for personnel make sure to review TEHDI's homepage:

https://dshs.texas.gov/tehdi/Audiolo gy-Services-Information-for-Health-Professionals.aspx



It is best practice to get this process started even if medical documentation is still pending. After the DHH/VI Consultation the early intervention team (which includes parent and teacher), can move forward with medical appointments and getting necessary forms for referral.







To make an DHH/VI Referral ECI staff will get ROIs for LEA and medical professional and then request eye exam for VI referrals and/or both Audiological Report and if available the Otological (ENT) Report for DHH Referrals. For vision referral ECI staff need to get ROI and notify Blind Children's Discovery and Development Program. All forms can be found on the ECI Processes website.



exam by an ophthalmologist and/or optometrist for VI referral OR had an examination with an audiologist for DHH referral, ECI staff will assist with getting these examinations and the forms completed before a referral can be made as LEA will need medical documentation for their records.



DHH/VI teachers can go out and perform their initial evaluation once medical records have obtained and a referral has been made. After the evaluation is complete and services are necessary ECI will schedule with the DHH/VI teacher(s) and caregivers to perform a Complete Review and add services to the IFSP.

- ECI staff will complete the procedural safeguards and consent for evaluations.
- DHH teachers have one evaluation to complete before determining eligibility.
- VI teachers/Orientation & Mobility Specialist (O&M) have 3 separate evaluations to complete before determining eligibility.

## **LEA/Part B Responsibility**

- Once DHH/VI has been added to a child's IFSP, the child will have to be enrolled in their local school district.
- DHH/VI teachers should provide the family information as to how student will be enrolled in their district
- Each ECI should have an agreement in place with the LEA they serve regarding how to send a referral for processing
- In order to enroll in school, the family will need to provide:
  - proof of residency
  - birth certificate or other approved documentation of identity



\*If the DHH/VI teacher is having trouble getting the infant/toddler enrolled contact the ECI Case Manager to assist with this process.

### Referrals for Infant/Toddler For VI

ECI staff will send the LEA and Blind Children's Program:

- + Release of Information
- + VI Referral Form
- + Eye Exam Report
- + IFSP meetings documentation

# **Eye Exam Form Requirements**



Must address visual acuity:

- if visual acuity cannot be measured they must give appropriate estimation:
  - --legally blind
  - --between 20/70 and 20/199
  - --better than 20/70
  - --functions at the definition of blindness

Visual Field Test

Diagnosis

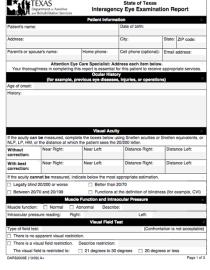
Prognosis

Must contain a visual statement:

- patient has no vision
- patient appears to have serious vision loss after correction in a clinical setting
- patient does not have a serious visual loss after correction in a clinical setting
- patient has a diagnosis for a progressive medical condition that will result in no vision or serious visual loss after correction.

If you get a report other than the Texas State Eye Exam Report, it must address...

# Texas State Eye Exam Report State of Texas Interagency Eye Examination Report



## When should you use this form?

- Child has not been seen by the opthamologist or optometrist
- Existing report from eye care specialist is missing required information. Obtain ROI and forward this form.

https://hhs.texas.gov/sites/default/files/documents/laws-regulations/forms/2001/2001.doc

## What Do We Do Now?



Once an eye report is received regardless of format, ECI Service Coordinator should get an ROI for the LEA and send the eye report to school designee (will be forwarded to the TVI/O&M)

The TVI/O&M will begin the process of evaluation for visual impairments.





If client has not been seen by an ENT, the DHH teacher can still go out and perform the initial evaluation and services can be added to the IFSP.

However, before DHH services can be delivered, the Otological Report must be filled out and submitted to the LEA for their records. Keep in mind the 28 day deadline for service delivery.



## The Oto-what?

The otological or ENT report is necessary for ECI and LEA records. The LEA also needs this for medical clearance.

The Early Intervention Team can decide to extend the start date for DHH services pending the Otological or ENT report.

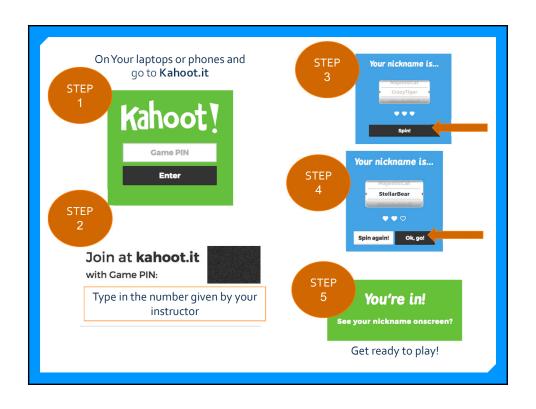
When can the Primary Care Physician sign the otological?

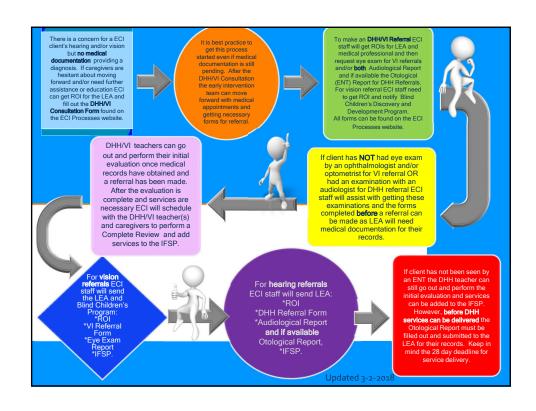
- \*if the appointment with the ENT is more than 30 days out
- \* if their ENT is not accepting medicaid
- \* if the child lives in a remote area
- \* if the child is significantly medically fragile and has medical care provided at their place of residence.
- \*if the parent is unable to attend their scheduled appointment

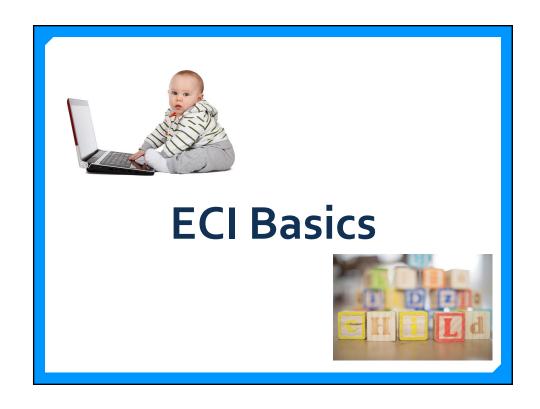
This is a temporary solution to getting services started until an appointment with the ENT is scheduled. The only exception is a home bound medically fragile child.

If the parent cannot pay for an ENT, ECI is responsible for getting the appt. paid for and add a case management outcome addressing the need for financial assistance.

# DeafBlindness TAC Code 89.1040 states "A student with deafblindness is one who has been determined to meet the criteria for deafblindness as stated in 34 CFR, \$300.8(c)(2)". https://texreg.sos.state.tx.us/public/readtacsext.TacPage?si=R&app=a&p.dir=&p.rd oc=&p.tloc=&p.ploc=&p.pac=&p.tac=&ti=3&pt=2&ch=8&pt=defended. TAC Code 89.1040 states Meet DeafBlind Eligibility Eligibility for vi Learing loss on peech at an aga where there there in the criteria for in the critical for the student with state to the student with student with student performance. TAC \$8.1040c(r)2 Eligibility for vi Learing loss on peech at an aga where there is a state of the student with student with student with student with student performance. Progressive hearing and vision loss Additional information can be secreted in the SC Region 11 the student performance. Progressive hearing and vision loss Additional information can be secreted in the SC Region 11 the student performance. Eligibility for vi Learing loss or and learning and vision loss Eligibility for vi Learning a vision loss Eligibility for vi Learning a vision loss or and learning and vision loss and learning and vision loss Eligibility for vi Learning a vision loss or and learning and vision loss and learning and vision loss Eligibility for vi Learning a vision loss or and learning and vision loss or and learning and vision loss and learning and vision loss or and learning and vision loss and learning and vision loss or and learning and vision loss Eligibility for vi Learning a vision loss or and learning and vision loss and learning and vision loss or and learning and vision loss or and learning and vision loss and learning and vision loss or and learning and vision loss o







## What's The Plan Stan?

All children enrolled in ECI will have an Individualized Family Service Plan or IFSP.

## **IFSP**

#### **Documents:**

- -Child's Strengths
- -Needs
- -Functional Abilities
- -Daily Routines
- -Priorities
- -Services



## **Six Months and Counting**



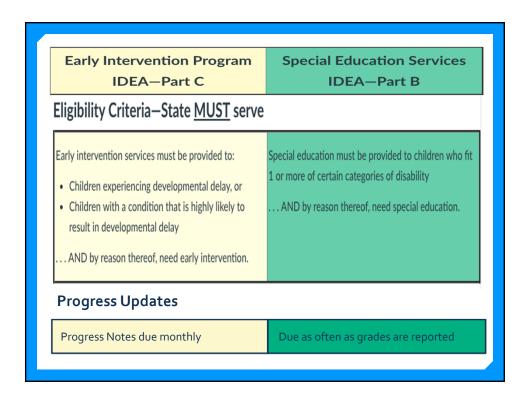
ECI must comply with Texas
Administrative Code (TAC)
which states that IFSPs are
required to be reviewed every 6
months.

## Heads Up

Texas Administrative Code, requires ECI to notify the TVI, COMS or TODHH at least **10 days prior** to an initial IFSP meeting, periodic review and/ or annual IFSP meeting that affects the child's auditory or visual services.



Part C vs Part B	
Special Education Services IDEA—Part B	
State Dept. of Education	
Children, ages three through twenty-one years	
School Calendar	



#### **Early Intervention Program Special Education Services IDEA**—Part C **IDEA**—Part B Service Delivery Times At parent/legal guardian and/or caregivers convenience Monday Through Friday during school hours which could include evenings and weekends. Individualized Plans Individualized Family Service Plan (IFSP). Individualized Education Program (IEP) The IFSP focuses on the child and the family and the The IEP focuses on the educational needs of the child services necessary to enhance the child's development. and related services in the school. **Available Services** Early intervention services for child and family to meet Special education and related services determined the developmental needs of the child and increase the appropriate to meet the educational needs of the child family's ability to meet the needs of their child

#### **Early Intervention Program Special Education Services IDEA-Part C IDEA-Part B** Family Involvement Participation on all teams making decisions about the Participation on all teams making decisions about the child's individualized plan for services child's individualized plan for services Receive services to improve the family's ability to meet the needs of their child with a disability **Location for Services** Natural Environment-including the home and east Restrictive Environment—to the maximum extent integrated child care settings. appropriate, the child receives services and participates n the general curriculum, non-academic, and extracurricular activities alongside peers without disabilities **Costs for Services** States may charge for services (e.g. sliding scale), but All services must be provided for free must ensure no one does not receive services because of inability to pay.

#### **Guidance for LEAs**

EACH LEA will have policies and procedures for the Child Centered Process Special Education Process, ensuring FAPE for all children eligible with disabilities ages 3 through 21 and from Birth for children with visual and auditory impairments, including timely transition from IDEA C to IDEA Part B

Operating Guidelines Legal Framework www.esc18.net

# Your Ticket Out the Door (Part 1 and Part 2)

- Start Your Feedback Form (phone, electronic device)
- https://form.jotform.com/SLSBVI/Region1

OR



- Do You NEED More Information Now?
- Contact Twinkle Morgan
- > Phone: 9560984-615 EMAIL: tmorgan@esc1.net