



Operations Manual for Field Staff

Tennessee's Early Intervention System
(TEIS)

Revised 2019

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Introduction

The Tennessee's Early Intervention System (TEIS) Operations Manual for Field Staff is designed to provide point of entry office staff information, guidance, and checklists to complete tasks from a child's referral to exit from TEIS. This manual, as well as any updates to policies that occur between updates, can be found in the "Information for Staff" section of the TEIS website <https://www.tn.gov/education/early-learning/tennessee-early-intervention-system-teis/teis-information-for-staff.html>. Staff should contact their supervisor with any questions not covered in this manual.

Referral Procedures

Referrals received during state business hours (8 a.m.–4:30 p.m.) are entered and dated the day of receipt. In the event that the administrative secretary is not available, each TEIS Point of Entry (POE) staff member will accept and process referral information. The date of referral is the first date TEIS was notified of the child. Referrals missing key information need immediate follow-up by TEIS administrative secretary or other designated POE staff.

The TEIS POE staff member will enter the following information into Tennessee Early Intervention Data System (TEIDS). Minimum information required to generate a record in TEIDS is designated by a star (*) below:

- Child's last name*
- Child's first name (baby girl/boy is acceptable)*
- Parent(s)/guardian(s) name
- Parent(s)/guardian(s) contact information
- Child's address (must enter current LEA)*
- Child's county of residence*
- Child's date of birth*
- Notification/referral date
- Notification/referral source name and contact information
 - If referral source is "parent," select appropriate source from pull-down box. If the child is referred by parents, explain how the parent(s) heard about TEIS.
 - If referral source is from Newborn Hearing Screening program (NHS), list NHS as the referral source.
- Reason(s) for notification/referral
- Service coordinator
 - The designated service coordinator at the time of referral is typically the eligibility specialist (ES) until the referral is sent to the evaluation contract agency.

The TEIS POE staff member will mail the following two letters and document in TEIDS contact log:

- First contact letter to the family, including the *TEIS Questions and Answers* brochure
- *Acknowledgement of Referral* letter to the referral source

The eligibility specialist will send the *Evaluation Referral Form* to the evaluation contract agency in their region and change the service coordinator to the designated person at the evaluation agency.

Guidance on Re-Referrals

Re-referral with eligibility not previously determined

- For any re-referral that did not have eligibility previously determined, the TEIS eligibility specialist reviews the child's record to determine if a Battelle Developmental Inventory 2 (BDI-2) evaluation was previously completed and needs to be repeated.
 - A BDI-2 evaluation needs to be completed on re-referrals if the previous evaluation is more than four months old and the child did not show delays. The eligibility specialist would refer to the evaluation agency as per procedures for new referrals.
 - If the previous evaluation is less than four months old and the child did demonstrate qualifying delays but eligibility was not determined because medical records were not received, the evaluation does not need to be repeated. Medical records will need to be obtained to complete the eligibility process. A referral will not be made to the evaluation agency, and the POE is responsible for obtaining releases to request medical records.
- If no previous evaluation was completed, the eligibility specialist will refer to the evaluation agency as per procedures for new referrals. Additional steps in TEIDS for processing re-referrals:
 - Remove the previous exit reason and date and click save in TEIDS. The previous exit reason will be automatically saved in the notes field.
 - Update the child's and family's information in TEIDS.
 - On the notification/referral screen, click the "clear page for entering re-referral" button to move the previous referral information down to history.

Re-referral with eligibility determined but IFSP not developed

- If child was determined eligible, TEIS will move forward with IFSP development except in cases where the child requires re-evaluation (i.e. child was eligible based on prematurity only and the re-referral was after the age of two or parent requests re-evaluation).
 - If re-evaluation **is** needed, the referral is sent to the TEIS service coordinator who will schedule a visit with the family to discuss re-evaluation and obtain parental consent and a release for the evaluation contract agency. Then the service

coordinator returns the file to the TEIS eligibility specialist, who will make the referral to the evaluation agency as per usual procedures. Note: Re-referrals with re-evaluation required should have the evaluation completed and IFSP developed using the same timeframe as new referrals—no later than 45 days from the re-referral date. Additional steps in TEIDS for processing re-referrals:

- Remove the previous exit reason and date and click save in TEIDS. The previous exit reason will be automatically saved in the notes field.
- Update the child and family information in TEIDS.
- On the notification/referral screen, click the “clear page for entering re-referral” button to move the previous referral information down to history.
- If child was ineligible, TEIS eligibility specialist follows procedures for new referrals. (Note: if previous evaluation was administered less than four months from date of new referral, the eligibility specialist should notify the family the file can be reopened after four months have elapsed since the previous evaluation.)

Re-referral with IFSP previously developed

- Re-evaluation for eligibility is not necessary except in cases where the child was eligible based on prematurity only and the re-referral was after the age of two or parent requests re-evaluation.
 - If re-evaluation **is not** needed, the referral is sent to the TEIS service coordinator who will schedule a requested review IFSP meeting to restart services at the family’s earliest convenience.
 - If re-evaluation **is** needed, the referral is sent to the TEIS service coordinator who will schedule a visit with the family to discuss re-evaluation and obtain parental consent and a release for the evaluation contract agency. Then the service coordinator will pre-populate an IFSP in TEIDS and return the file to the TEIS eligibility specialist, who will make the referral to the evaluation agency as per usual procedures. Additional steps in TEIDS for processing this type of re-referral:
 - Remove the previous exit reason and date and click save in TEIDS. The previous exit reason will be automatically saved in the notes field.
 - Update the child and family information in TEIDS.
 - Note the re-referral information in the contact log but do not change the date of notification.

Evaluations to Determine Continued Eligibility

There are several situations in which a child will need to be re-evaluated to determine continued eligibility for TEIS services:

- The child makes substantial progress to the point which the IFSP team decides the child may no longer need early intervention services;

- Changes in the child's diagnosed physical or mental condition are such that the child's current condition or status is no longer considered to have a probability of developmental delay; or
- The child was initially eligible based only on the diagnosis of prematurity and the child is turning two.

In the event that a child has two subsequent *Assessment, Evaluation, and Programming System (AEPS)* assessments that result in ECO scores of seven in each of the three outcome areas, and the child was not made eligible for TEIS via a diagnosed medical condition, the child's IFSP team should meet to discuss next steps. Next steps could include changes to service frequency or intensity, an IFSP team review of the AEPS assessment along with reports from other service providers, and/or a re-evaluation to determine continued eligibility for TEIS services. Note: These are suggestions for potential options. The next steps should be a decision made by the child's IFSP team.

If a child has a third AEPS assessment that results in ECO scores of seven in each of the three outcome areas, and the child was not initially eligible for TEIS via a diagnosed medical condition, the team should move to an immediate re-evaluation to determine continued eligibility.

To refer for re-evaluation, the service coordinator obtains a consent for evaluation, a release of information for the evaluation contract agency, and releases to obtain medical records. The service coordinator then refers the child to the TEIS eligibility specialist, who makes the referral to the evaluation contract agency. The evaluator will complete the BDI-2 evaluation, hearing and vision screenings, and Family Routines Report only.

If the child is found ineligible for services, TEIS will use the exit reason **618-Completion of IFSP/no longer requires services** when closing the child's file, which indicates all components of eligibility determination have been satisfied (i.e. evaluation and medical records review). If this exit reason is used and the child is later re-referred into the system, then eligibility will need to be re-determined.

Procedures for Late Referrals to TEIS

Referrals 45 to 90 calendar days before the child's third birthday:

- Document referral in TEIDS.
- Complete and immediately fax the *LEA Late Referral Form* to the local education agency (LEA).
- Send *Acknowledgement of Referral* letter to the referral source.
 - Note: If referral to TEIS is received from anyone other than the parent, attempt to contact the parent to inform them that a referral has been made to the LEA.

- Provide a copy of the *LEA Late Referral Form* to the regional special education preschool consultant. The *LEA Late Referral Form* is also maintained in a TEIS late referral file.

The POE office will:

- Follow regular intake procedures moving forward with determining eligibility, noting on the *Evaluation Referral Form* that the evaluator should obtain a release of information for the LEA;
- Develop an IFSP to include a transition goal for eligible children;
- Provide the LEA with any information that might assist in part B eligibility determination upon receipt of a release of information from the LEA (it is the responsibility of the LEA to request information from TEIS); and
- Not schedule or convene an LEA transition planning conference (TPC).

Referrals less than 45 calendar days before a child's third birthday:

- Complete and immediately fax the *LEA Late Referral Form* to the LEA.
- Enter referral into TEIDS with exit reason "Referral less than 45 days."
- The district administrator will be assigned as the service coordinator.
- Eligibility will not be determined and an IFSP will not be developed.
- LEA TPC will not be held.
- *Acknowledgement of Referral* letter is sent to the referral source.
- Note: If referral is received from anyone other than the parent, attempt to contact the parent to inform them that a referral has been made to the LEA.
- Provide a copy of the *LEA Late Referral Form* to the regional special education preschool consultant. The *LEA Late Referral Form* is also maintained in a TEIS late referral file.

Assignment of the Service Coordinator

- The POE administrative secretary or other designated POE staff enters the referral and prepares the child's file and gives this to the eligibility specialist.
- At the time of the referral, the TEIS eligibility specialist (ES) is typically assigned as the service coordinator. The ES changes the service coordinator to the designated person at the evaluation contract agency at the time the referral is made for evaluation.
- Once the evaluation is completed, the evaluation contract coordinator notifies the ES who reassigns him/herself as the service coordinator until eligibility is determined.
- Once a child is determined eligible, the POE follows office procedures for assigning the ongoing service coordinator. If the child is ineligible, the ES notifies the family and closes the child's file.
- Service coordinators review notification/referrals in TEIDS daily for information regarding children added to their caseload.

Guidance for Using Interpreters

Based on the Individuals with Disabilities Education Act, Part C, interpreting services **must** be provided in the following situations conducted by the TEIS POE office:

1. **Family Assessment Meetings** [34 CFR 303.321(a)(6)]
2. **IFSP Meetings/Transition Planning Conferences** [34 CFR 303.342(d)(ii)]

All efforts should be made to identify and utilize family resources and supports. Please note that providing an interpreter for on-going service sessions is not the responsibility of TEIS. Additional guidance regarding interpreters:

- Interpreters may be used for TCM visits with DA approval. The service coordinator is encouraged to complete TCM visits when the early interventionist is in the home with an interpreter and must document attempts to schedule before requesting approval from DA.
- POE staff requiring an interpreter will utilize approved vendors.
- Interpreters attending IFSP meetings should sign as a participant.

Questions should be reviewed on a case-by-case basis, and no one other than department legal staff may provide legal interpretations. If there are questions, please consult with TEIS district leadership first and, if further questions exist, contact TEIS central office leadership to ensure appropriate consultation with legal staff.

Initial Contact

Initial contact with the family is made by the contracted evaluation agency. In the majority of instances, the service coordinator's first contact with the family will be to schedule the initial IFSP meeting. Some special considerations and circumstances:

Per federal rules and regulations (34 CFR 303.27) a parent is defined as:

- A biological or adoptive parent of the child;
- A foster parent;
- A guardian generally authorized to act as the child's parent or authorized to make early intervention, educational, health, or developmental decisions for the child (but not the state if the child is a ward of the state); or
- An individual acting in the place of a biological or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child's welfare.
- NOTE: A parent of a child does not have to meet age of majority requirements in order to provide consent for early intervention services.

Special Notes for Children in Foster Care:

- For children in foster care, TEIS is legally required to provide notification to biological parents of any action requiring parental consent while maintaining the confidentiality of the foster family. Notification may be phone, email, letter or via the child's Department of Children's Services (DCS) caseworker.
- Per the DCS interagency agreement, TEIS is required to invite the DCS caseworker to all initial, six month, annual, and transition planning conference (TPC) IFSP team meetings.

Eligibility Specialist Checklist

Prior to the Evaluation

1. _____ Make referral for evaluation to the evaluation contract agency within one working day of child's referral to TEIS. Assign the designated evaluation contract agency personnel as the service coordinator.

Within Five Working Days of the Receipt of Intake and Evaluation Documents

1. _____ Request medical records upon receipt of medical releases.
 - For the purpose of eligibility determination, medical records must include a review of systems and be less than six months old. A review of systems minimally includes documentation of:
 - history
 - measurements
 - developmental/behavioral assessment
 - immunizations (as appropriate)
2. _____ Document all requests and receipts of records in the TEIDS Contact Log and evaluation tracking system.
 - If medical records are not obtained by the IFSP due date, the child's record remains open for an additional 30 days. If not received within 30 days, file is closed using exit reason "Parent Declined."

Within Two Working Days of Receipt of Medical Records

1. _____ Document medical information in TEIDS.
 - "Verification Date" = Date on medical report (i.e., date child was seen by medical professional)
 - TEIS approved ICD-10 Code contained in medical information, if appropriate
 - Child's vitals (e.g., weight, height, and head circumference)
 - Summary of review of systems
 - Hearing/vision concerns
 - Any noted physical or medical conditions or diagnoses
 - "Verified By" = Name of medical professional on report

Note: Initial eligibility cannot be determined without medical/health information from medical professionals. This documentation is a required component of the multidisciplinary evaluation process.

Review medical records and BDI-2 report to finalize eligibility.

- POE leadership is responsible for final eligibility determination.
- Eligibility is determined no more than 40 days from the date of notification/referral.

- Progress and/or delays in the eligibility process should be recorded in TEIDS.
- Eligibility must be confirmed prior to the initial IFSP meeting.
- The eligibility date is the date that **both** the medical information and BDI-2 NU evaluation information is reviewed.
- If a child is eligible based on prematurity (Part B) and percentage of delay (Part A) check both eligibility boxes in TEIDS.

For information about determining continued eligibility, please see the guidance in the first section.

2. _____ Print the *Report to Family* from the BDI-2 data manager website (<https://bdi2datamanager.com>).
3. _____ Complete *Tennessee's Early Intervention System (TEIS) Eligibility Report* cover sheet for the BDI-2 NU *Report to Family* that includes a summary of the vision, and hearing checklists.
4. _____ Insert into the child's file a copy of the *Tennessee's Early Intervention System (TEIS) Eligibility Report* including the BDI-2 NU *Report to Family*. Other reports may be generated per POE procedures. Follow POE office procedures to provide family with written reports of eligibility.
5. _____ Follow POE office procedures for assignment of the service coordinator for eligible children.

If Child is Ineligible

1. _____ Contact family no more than 45 days from the date of notification/referral to discuss eligibility status. Record discussion in TEIDS Contact Log.
2. _____ Mail family a copy of the developmental evaluation report.
3. _____ Mail family a *Prior Written Notice* and a copy of *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure.
4. _____ Close file using exit reason "Ineligible for Part C."

Initial Individualized Family Service Plan (I-IFSP) Checklist

Prior to the Initial IFSP Meeting

1. _____ Schedule or confirm the IFSP meeting date with parent and evaluator.
 - Provide family written notice of IFSP meeting at least ten days prior to the meeting unless family signs *Prior Written Notice* indicating they have waived their right to the ten day notice.
 - Document in TEIDS Contact Log the date notice was sent to IFSP team members.
 - Notice must be sent to the DCS caseworker for children in foster care.
2. _____ Ensure the eligibility report, including the *Tennessee's Early Intervention System (TEIS) Eligibility Report* cover sheet for the BDI-2 NU *Report to Family*, have been provided to the family.
3. _____ Prepare for the IFSP meeting.
 - Review information provided by the evaluator, including the *Family Routines Report*, the intake information (noting any blank sections for follow-up with the family), and the BDI-2 evaluation report.
 - Print the pending initial IFSP document from TEIDS to take to the meeting.
DO NOT pre-populate or enter and save any information into the initial IFSP in TEIDS until after the meeting is completed.
 - Check availability of potential service providers (EIRAs/vendors). Discuss any issues with availability with DA.
 - Gather needed forms/brochures:
 - *Authorization for Release or Use of Information*
 - IFSP signature page
 - *Prior Written Notice*
 - *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure
 - TEIS System of Payments Policy
 - Consent to access insurance (public/private)
 - Copy of evaluation report
 - *Early Childhood Outcomes* brochure
 - *Family Centered Early Intervention: Developmental Therapy* brochure
 - *Transition* brochure, if applicable
 - *Notice and Consent for Transition Planning Conference*, if applicable
 - *Targeted Case Management Visit Verification*

During the Initial IFSP Meeting

1. _____ Review *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure. Give the family a copy of the brochure.

2. _____ Have the evaluator review the results of the evaluation and answer any questions.
3. _____ Explain the principles of early intervention, including the role of parents, caregivers, service coordinator, early interventionist, and service providers.
4. _____ Discuss *Early Childhood Outcomes* and family outcomes with parents.
5. _____ Facilitate the development of the IFSP
 - Gather information from families by completing a family assessment.
 - Develop functional child and family goals, including a transition goal.
 - Determine if additional transition activities need to occur based on age of child (e.g., *Notice and Consent for Transition Planning Conference* form signed, discuss scheduling of TPC meeting)
 - Discuss service options and in-network providers, including setting, frequency, and intensity of services. Note: When the service is to be delivered every other week the frequency of “2x per month” should be used instead of “bi-weekly” for the service of developmental therapy.
 - IFSP services must begin within 30 calendar days from the planned services start date on the IFSP. Planned services start date is the date of the IFSP meeting.
 - Notification of provider is given to family verbally.
 - Service dates written for no longer than one year from planned services start date, (e.g., June 25, 2015–June 24, 2016) or to end the day before child’s third birthday, whichever comes first
 - Review payor source for services and TEIS System of Payments Policy, obtain signature on consent to access insurance (public/private) forms if applicable
 - Provide family with *Prior Written Notice* form if a service is recommended by IFSP team and refused by the family or if a service is requested by the family and refused by the IFSP team
6. _____ Summarize IFSP meeting with the family using the conference note information, which includes notes pertaining to:
 - IFSP meeting location and who was present;
 - reason why IFSP meeting was not held within 45 days of referral, if applicable;
 - confirmation that *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee’s Early Intervention System* brochure was reviewed and provided to family;
 - evaluation results/report discussed and provided copy to family;
 - family assessment was completed and goals developed (specify family assessment method used);

- service options discussed and any services added to planned services;
 - provided family with TEIS systems of payment and access or denial for public or private benefits signed;
 - monthly TCM visits discussed;
 - any items to be followed up on, monitored, or any discussions that were tabled;
 - any additional information that was provided to the parents; and
 - team members signed signature page.
7. _____ Complete *Authorization for Release or Use of Information* forms, as needed.
 8. _____ Obtain all signatures needed on the IFSP signature page. The Initial IFSP signature page is printed prior to the meeting for the family and team members to sign their participation and agreement with the IFSP. Parent signs and dates at the bottom of the page in agreement to implement the IFSP. Indicate type of participation, (e.g., phone, by written report).
 - Parent
 - Service coordinator
 - Evaluator or representative
 - Interpreter, as needed
 - Advocates and other family members as requested
 9. _____ Parent signs *Targeted Case Management Visit Verification* form, if child was present.
 10. _____ Review what family can expect to happen next, role of SC, monthly TCM visits, and contact from providers within 30 days, as applicable.

Within Five Working Days of the Initial IFSP Meeting

1. _____ Enter initial IFSP into TEIDS.
2. _____ Complete planned services page in TEIDS with the following information:
 - Service name;
 - Goal number which service addresses;
 - Agency/individual provider name (note: will not display on printed document);
 - Planned start and end dates;
 - Service dates written for no longer than one year from planned services start date, (e.g., June 25, 2015–June 24, 2016) or to end the day before child’s third birthday, whichever comes first.
 - Planned service start date is the IFSP date.
 - End dates of service for the evaluation effective the date of the initial IFSP.
 - Method of service delivery;
 - Setting;
 - Frequency;
 - Intensity;
 - Payor source;

- Statement of justification required when services are not provided in the natural environment;
 - Accept service box indicating family agrees to service; and
 - Permit insurance box, if applicable.
3. _____ Complete the goals page in TEIDS and finalize the initial IFSP.
 4. _____ Enter documentation of meeting into TEIDS contact log, including direct observation information about the child if present, and visit is counted as a TCM visit.
 5. _____ Mail a copy of the IFSP to family per POE procedures.
 6. _____ Make referrals to appropriate service providers as written on planned services. Document referrals in contact log, including referrals for AEPS for children not receiving developmental therapy.

Within 45 Calendar Days of the Initial IFSP Meeting

1. _____ Receive ECO scores that were generated by the early interventionist using AEPS.
 - Enter scores into TEIDS within five working days of receipt.

Requested Review IFSP Meeting

Requested review meetings are held outside of initial IFSP meetings, six month IFSP meetings, and annual IFSP reviews. Requested review meetings are held when a request is made by a parent or by TEIS to revise/add services. Requested review meetings may be held in person or through phone discussion with the parent (see below for guidance). If the meeting is to be held in person, the service coordinator has 30 days from the date of request to convene the IFSP team and hold the meeting.

Guidance for Requested Review Meetings Held Through Phone Discussion

- Appropriate reasons for requested reviews over phone, when the family and service coordinator are in agreement to this method are:
 - adding an evaluation for a service,
 - adding service based on evaluation and discussion,
 - ending a service,
 - removing a service, and
 - changing frequency/intensity of services.
- Requested reviews held through phone discussion are not considered targeted case management (TCM) visits.
- Requested reviews conducted through phone discussion are not appropriate in circumstances where a signature is required to initiate the service (e.g., release of information, *Consent to Use Private Insurance* form)
- A phone requested review meeting should be discontinued and an in-person meeting scheduled if a point of disagreement is reached.
- The date of requested review IFSP meeting will be the date of the phone call with the parent.
- An IFSP meeting is pre-populated in TEIDS the date of the phone call.
- Service coordinator documents on the signature page that TEIS will proceed forward with what was discussed based on the date of the phone call. Parent dates the signature page the same date they actually sign the form.
- Forms for parent signature may be mailed, emailed, or faxed to the family. If mailing, send family a postage paid envelope. Keep original signature page in the child's file. Required forms are:
 - *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure
 - Copy of the IFSP document
 - *Prior Written Notice*, if applicable
 - Copy of provider reports, if applicable
 - *Transition* brochure, if applicable

Requested Review IFSP Meeting Checklist

Prior to the Requested Review IFSP Meeting

1. _____ Prepare for the IFSP meeting.
 - Schedule the meeting with the family and provide notification to team members at least ten days in advance of the meeting.
 - Document in TEIDS Contact Log the date notice was sent to IFSP team members.
 - Notice must be sent to the DCS caseworker for children in foster care.
 - Make a copy of the previous IFSP or preview and print the IFSP document from TEIDS to take to the meeting.
 - Check availability of potential service providers (EIRAs/vendors).

Gather needed forms/brochures:

- *Authorization for Release or Use of Information*
- IFSP signature page
- *Prior Written Notice*
- *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure
- Consent to access insurance (public/private)
- Copy of provider reports
- *Family Centered Early Intervention: Developmental Therapy* brochure
- *Transition* brochure, if applicable
- *Notice and Consent for Transition Planning Conference*, if applicable
- *Targeted Case Management Visit Verification*

During the Requested Review IFSP Meeting

1. _____ Review *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure.
2. _____ Review/write new goals as needed to support IFSP changes.
3. _____ Review current services; add or modify services as agreed on by IFSP team.
 - Discuss service options and in-network providers, including setting, frequency, and intensity of services. Note: When the service is to be delivered every other week the frequency of "2x per month" should be used instead of "bi-weekly" for the service of developmental therapy.
 - Newly added IFSP services must begin within 30 calendar days from the planned services start date on the IFSP. Planned Services start date is the date of the IFSP Meeting.
 - Notification of provider is given to family verbally.
 - Service dates written for no longer than the annual IFSP due date or to end the day before child's third birthday, whichever comes first.

- Review payor source for services and TEIS System of Payments Policy and obtain signature on consent to access insurance (public/private) forms, if applicable.
 - Provide family with *Prior Written Notice* form if a service is recommended by IFSP team and refused by the family or if a service is requested by the family and refused by the IFSP team.
4. _____ Summarize IFSP meeting with the family using the conference note information, which includes:
- IFSP meeting location and who was present;
 - reviewed and provided *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure to family;
 - discussed evaluation results/report, provided family with a copy;
 - IFSP goals reviewed, and any goals added or modified;
 - service options discussed and any services added to planned services;
 - provided family with TEIS systems of payment and access or denial for public or private benefits signed;
 - any items to be followed up on, monitored, or any discussions that were tabled;
 - any additional information that was provided to the parents; and
 - team members signed signature page.
5. _____ Complete *Authorization for Release or Use of Information* forms as needed.
6. _____ Obtain all signatures needed on the IFSP signature page for the family and team members to sign their participation and agreement with the IFSP. Indicate type of participation (e.g., phone, by written report).
- Parent signs at the bottom in agreement to implement the IFSP
 - Service coordinator
 - Service provider(s)
 - Interpreter as needed
 - Advocates and other family members as requested
7. _____ Parent signs TCM verification form, if child was present

Within Five Working Days of the Requested Review IFSP Meeting

1. _____ If applicable, complete planned services page in TEIDS with the following information:
- Service name
 - Goal number which service addresses
 - Agency/individual provider name (Note: will not display on printed document)
 - Planned start and end dates
 - Service dates written for no longer than the annual IFSP due date or to end the day before child's third birthday, whichever comes first.

- The planned service start date is the IFSP date.
 - Method of service delivery
 - Setting
 - Frequency
 - Intensity
 - Payor source
 - Statement of justification required when services are not provided in the natural environment
 - Accept service box indicating family agrees to service
 - Permit insurance box, if applicable
2. _____ Complete the goals page in TEIDS, noting the status of goals.
 3. _____ Enter documentation of meeting into TEIDS contact log, include direct observation information about the child if present and visit is counted as a TCM.
 4. _____ Mail a copy of the IFSP to family per POE procedures.
 5. _____ Make referrals to appropriate service providers as written on planned services. Document referrals in contact log.

Six-Month IFSP Review Meeting

The six-month review is a face-to-face meeting with the family and is due six months from the initial or annual IFSP date. It may be completed up to 30 days prior to the due date.

Six-Month IFSP Review Meeting Checklist

Prior to the Six-Month IFSP Review Meeting

1. _____ Schedule the IFSP on or up to 30 days prior to the due date.
 - Mail family notice of IFSP meeting at least ten days before the meeting, if not given at TCM the previous month.
 - Notify ALL team members of the meeting date/time/location at least ten days prior to the meeting.
 - Document in TEIDS Contact Log the date notice was sent to IFSP team members.
 - Notice must be sent to the DCS caseworker for children in foster care.
2. _____ Request current progress notes/updated goals from providers as needed.
3. _____ Ensure receipt of *Early Childhood Outcomes (ECO) Report* and *Six-Month Review of IFSP Progress to Goals* at least 30 days prior to six-month IFSP review due date.
4. _____ Prepare for the IFSP meeting.
 - Make a copy of the previous IFSP or preview and print the IFSP document from TEIDS.
 - Check availability of potential service providers (EIRAs/vendors).

Gather needed forms/brochures:

- *Authorization for Release or Use of Information*
- IFSP signature page
- *Prior Written Notice*
- *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure
- TEIS System of Payments Policy
- Consent to access insurance (public/private)
- Copy of provider reports
- *Family Centered Early Intervention: Developmental Therapy* brochure
- *Transition* brochure, if applicable
- *Notice and Consent for Transition Planning Conference*
- *Targeted Case Management Visit Verification*

During the Six Month IFSP Review Meeting

1. _____ Review *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure.
2. _____ Review progress toward goals and reports from service providers.
3. _____ Review previous goals to determine the level of progress towards completion as follows:

1. Achieved
2. Continued
3. Continued with changes
4. Discontinued

Write new goals as needed to address the family's current concerns and priorities.

- Review transition goal; determine if additional transition activities need to occur based on age of child (e.g., *Notice and Consent for Transition Planning Conference* form signed, discuss scheduling of TPC meeting).
4. _____ Review current services; add new services as agreed on by IFSP team.
- Discuss service options and in-network providers, including setting, frequency, and intensity of services. Note: When the service is to be delivered every other week the frequency of "2x per month" should be used instead of "bi-weekly" for the service of developmental therapy.
 - Newly added IFSP services must begin within 30 calendar days from the planned services start date on the IFSP. Planned services start date is the date of the IFSP meeting.
 - Notification of provider is given to family verbally.
 - Service dates written for no longer than the annual IFSP due date or to end the day before child's third birthday, whichever comes first.
 - Review payor source for services and TEIS System of Payments Policy and obtain signature on consent to access insurance (public/private) forms if applicable.
 - Provide family with *Prior Written Notice* form if a service is recommended by IFSP team and refused by the family or if a service is requested by the family and refused by the IFSP team.
5. _____ Summarize IFSP meeting with the family using the conference note information, which includes:
- IFSP meeting location and who was present;
 - reviewed and provided *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure to family;
 - discussed evaluation results/report, provided family with a copy;
 - IFSP goals reviewed, and any goals added or modified;
 - service options discussed and any services added to planned services;
 - provided family with TEIS systems of payment and access or denial for public or private benefits signed;
 - any items to be followed up on, monitored or any discussions that were tabled;
 - any additional information that was provided to the parents; and
 - team members signed signature page.

6. _____ Share with the family the policy regarding the destruction of the child's educational record following the child's sixth birthday.
7. _____ Complete *Authorization for Release or Use of Information* forms, as needed
8. _____ Obtain all signatures needed on the IFSP signature page for the family and team members to sign their participation and agreement with the IFSP. Indicate type of participation, (e.g., phone, written report).
 - Parent signs at the bottom in agreement to implement the IFSP
 - Service coordinator
 - Service provider(s)
 - Interpreter as needed
 - Advocates and other family members as requested
9. _____ Parent signs TCM verification form, if child was present.

Within Five Working Days of the Six Month IFSP Review Meeting

1. _____ Enter IFSP into TEIDS.
2. _____ If applicable, complete planned services page in TEIDS with the following information:
 - service name
 - goal number which service addresses
 - agency/individual provider name (Note: will not display on printed document);
 - planned start and end dates
 - Service dates are written for no longer than the annual IFSP due date or to end the day before child's third birthday, whichever comes first.
 - The planned service start date is the IFSP date.
 - method of service delivery
 - setting
 - frequency
 - intensity
 - payor source
 - statement of justification required when services are not provided in the natural environment
 - accept service box indicating family agrees to service
 - permit insurance box (if applicable)
3. _____ Complete the goals page in TEIDS, noting the status of goals.
4. _____ Enter the continuing ECO scores into TEIDS, making a referral for evaluation for continued eligibility as needed.
5. _____ Enter documentation of meeting into TEIDS Contact Log, including direct observation information about the child if present and visit is counted as a TCM.
6. _____ Mail a copy of the IFSP to family per POE procedures.
7. _____ Make referrals to appropriate service providers as written on planned services. Document referrals in contact log.

Annual IFSP Meeting

The annual IFSP is a face-to-face meeting to evaluate the effectiveness of IFSP goals and services by:

- Reviewing present levels of development
- Obtaining updated medical records
- Discussing progress toward goals
- Developing a new IFSP document

The annual IFSP meeting is due 364 days from initial IFSP date or from the previous annual IFSP date. The meeting may be held up to 30 days prior to the due date.

Annual IFSP Meeting Checklist

Prior to the Annual IFSP Meeting

1. _____ Schedule the IFSP up to 30 days prior to due date.
 - Check availability of family and all team members prior to scheduling.
 - Mail family notice of IFSP meeting at least ten days before the meeting, if not given at TCM the previous month.
 - Notify ALL team members of the meeting date/time/location and document notification in TEIDS at least ten days prior to the meeting.
 - Document in TEIDS Contact Log the date notice was sent to IFSP team members.
 - Notice must be sent to the DCS caseworker for children in foster care.
2. _____ Request updated medical records prior to meeting. Document in TEIDS all attempts to obtain information and dates records were received.
3. _____ Ensure receipt of *Early Childhood Outcomes (ECO) Report*, *Annual IFSP Progress to Goals*, and the *Assessment, Evaluation, and Programming System (AEPS) Report for Annual IFSP Development* at least 30 days prior to annual IFSP due date.
4. _____ Enter present levels of development into TEIDS.
5. _____ Request current progress notes/updated goals from providers as needed.
6. _____ Prepare for the IFSP meeting
 - Check availability of potential service providers (EIRAs/vendors)
 - Make a copy of the previous IFSP or preview and print the IFSP document from TEIDS.
 - Gather needed forms/brochures:
 - *Authorization for Release or Use of Information*
 - IFSP signature page
 - *Prior Written Notice*
 - *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure
 - TEIS System of Payments Policy

- Consent to access insurance (public/private)
- Copy of provider reports
- *Transition* brochure, if applicable
- *Notice and Consent for Transition Planning Conference*, if applicable
- *Targeted Case Management Visit Verification*

During the Annual IFSP Meeting

1. _____ Review *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure.
2. _____ Review and confirm current demographic and financial information with family (e.g., address, insurance information)
3. _____ Gather updated information from the family by completing a family assessment. For annual IFSPs, the family assessment may be completed prior to the IFSP meeting.
4. _____ Review progress toward goals; ensure family received AEPS Child Progress Record.
5. _____ Review previous goals to determine the level of progress towards completion as follows:
 1. Achieved
 2. Continued
 3. Continued with changes
 4. Discontinued

Write new goals as needed to address the family's current concerns and priorities as determined by the family assessment.

- Review transition goal; determine if additional transition activities need to occur based on age of child (e.g. *Notice and Consent for Transition Planning Conference* form signed, discuss scheduling of TPC meeting).
6. _____ Review current services; end service dates from previous IFSP and restart, modify, or add new services as agreed on by IFSP team.
 - Discuss service options and in-network providers, including setting, frequency, and intensity of services. Note: When the service is to be delivered every other week the frequency of "2x per month" should be used instead of "bi-weekly" for the service of developmental therapy.
 - Newly added IFSP services must begin within 30 calendar days from the planned services start date on the IFSP. Planned services start date is the date of the IFSP meeting.
 - Service dates written for no longer than one year from planned services start date, (e.g., June 25, 2015–June 24, 2016) or to end the day before child's third birthday, whichever comes first.
 - Notification of provider is given to family verbally.

- Review payor source for services and TEIS System of Payments Policy and obtain signature on consent to access insurance (public/private) forms, if applicable.
 - Provide family with *Prior Written Notice* form if a service is recommended by IFSP team and refused by the family or if a service is requested by the family and refused by the IFSP team.
7. _____ Summarize conference notes with the family using the conference note information, which includes:
- IFSP meeting location and who was present;
 - reviewed and provided *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure to family;
 - discussed evaluation results/report, provided family with a copy;
 - family assessment was completed and goals developed (specify family assessment method used);
 - IFSP goals reviewed, and any goals that were added or modified;
 - service options discussed and any services added to planned services;
 - provided family with TEIS systems of payment and access or denial for public or private benefits signed;
 - any items to be followed up on, monitored, or any discussions that were tabled;
 - any additional information that was provided to the parents; and
 - team members signed signature page.
8. _____ Share with the family the policy regarding the destruction of the child's educational record following the child's sixth birthday.
9. _____ Complete *Authorization for Release or Use of Information* forms as needed.
10. _____ Obtain all signatures needed on the IFSP signature page for the family and team members to sign their participation and agreement with the IFSP. Indicate type of participation, (e.g., phone, by written report).
- Parent signs at the bottom in agreement to implement the IFSP
 - Service coordinator
 - Service provider(s)
 - Evaluator or representative
 - Interpreter as needed
 - Advocates and other family members as requested
11. _____ Parent signs TCM verification form, if child was present.

Within Five Working Days of the Annual IFSP Meeting

1. _____ Enter IFSP into TEIDS. Update any demographic or financial information.
2. _____ Complete planned services page in TEIDS with the following information:
 - Service name
 - Goal number which service addresses

- Agency/individual provider name (Note: will not display on printed document);
 - Planned start and end dates
 - Service dates written for no longer than the annual IFSP due date or to end the day before child's third birthday, whichever comes first.
 - The planned service start date is the IFSP date.
 - Method of service delivery
 - Setting
 - Frequency
 - Intensity
 - Payor source
 - Statement of justification required when services are not provided in the natural environment
 - Accept service box indicating family agrees to service
 - Permit insurance box, if applicable
 - Remove any previously ended services to clean up IFSP
3. _____ Complete the goals page in TEIDS, noting the status of goals.
 4. _____ Enter the continuing ECO scores into TEIDS, making a referral for evaluation for continued eligibility as needed.
 5. _____ Enter documentation of meeting into TEIDS contact log, include direct observation information about the child if present and visit is counted as a TCM.
 6. _____ Mail a copy of the IFSP to family per POE procedures.
 7. _____ Make referrals to appropriate service providers as written on planned services. Document referrals in contact log.

Transition Planning Conference

A Transition Planning Conference (TPC) is an IFSP meeting held with the Local Education Agency (LEA) between nine months and 90 days before the child's third birthday. The TPC is an individual meeting for each child and family. The minimum required participants are the family, an LEA representative, and a service coordinator. Others may be present at the request of the parent.

Transition Planning Conference/IFSP Meeting Checklist

Prior to the Transition Planning Conference: Transition planning activities should begin near the child's second birthday or beginning at referral for children referred over the age of two.

1. _____ Review the LEA in the drop down box on TEIDS Transition Screen to ensure correct LEA based the child's residence.
 - Note: This box needs to be reviewed any time the child's address changes.
2. _____ Discuss the transition planning conference with the family.
 - Provide family with the *Transition* brochure
 - Provide family with Individualized Education Account program flyer at transition or around the time of transition (prior to the child's exit/third birthday per POE procedures.
 - Complete the *Notice and Consent for Transition Planning Conference* form with the family.
 - If the family **does** give consent, the service coordinator:
 - completes an *Authorization for the Release or Use of Information* for the LEA and/or other community agency;
 - documents the date of consent in the TEIDS Transition Screen;
 - documents TPC discussion in the TEIDS Contact Log;
 - works with the family and LEA to schedule the place, time, and date of the meeting that is convenient with the parents and other participants;
 - sends notice of meeting to all IFSP team members at least ten calendar days prior to the meeting; and
 - documents in TEIDS Contact Log the date notice was sent to IFSP team members, including the DCS caseworker for children in foster care.
 - If the family **does not** give consent, the service coordinator:

- documents the date in the TEIDS Transition Screen in the “Date Refused” box for *Family Refused Transition Conference with LEA*. This action closes access to all other boxes under “Transition Information” in TEIDS, so any pertinent notes about the non-LEA TPC should be entered first;
- offers the family a non-LEA transition planning conference in which the service coordinator holds a requested review IFSP meeting with the family to review the transition goal and discusses options for services once the child ages out of TEIS (see Requested Review checklist in this manual); and
- documents information in the TEIDS Contact Log.

If a family later reconsiders and desires to have a TPC with the LEA, the service coordinator:

- documents the date in the TEIDS Transition Screen in the “Date Reconsidered” box for *Family Reconsidered Transition Conference with LEA*; and
 - This action re-opens access to all other boxes under “Transition Information” in TEIDS to be completed for an LEA transition conference.
- documents information in the TEIDS Contact Log.

3.

Prepare for the TPC/IFSP meeting:

- Make a copy of the previous IFSP or preview and print the IFSP document from TEIDS.
- Gather needed forms/brochures:
 - *Authorization for Release or Use of Information*
 - IFSP signature page
 - *Prior Written Notice*
 - *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee’s Early Intervention System* brochure
 - Updates from providers and a copy of the current IFSP to give to the LEA
 - *Targeted Case Management Visit Verification*

During the Transition Planning Conference

1. _____ Review *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee’s Early Intervention System* brochure.
2. _____ Review the IFSP, specifically the transition goal, and make revisions as needed. (See Requested Review Checklist if other services are discussed/modified.)
 - Service coordinator requests the LEA inform TEIS of the eligibility status of the child for 619 services when determined.
3. _____ The LEA representative reviews program options and rights of part B of IDEA.

4. _____ Document pertinent information on the IFSP meeting note, which includes a statement that services with TEIS will end the day before the child's third birthday.
5. _____ Share with the family the policy regarding destruction of the child's education record following the child's sixth birthday.
6. _____ Summarize conference notes with the family. Documentation to be included in the conference note:
 - IFSP meeting location and who was present;
 - reviewed and provided *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure to family;
 - LEA reviewed program options and provided part B rights to family;
 - IFSP transition goal reviewed, and any goals that were added or modified;
 - Any items to be followed up on, monitored, or any discussions that were tabled;
 - Any additional information that was provided to or by the parents, such as:
 - The parents' wishes for services after the child turns three
 - Information concerning available programs in the area (e.g. Head Start, Mother's Day Out, child care/preschools)
 - Information about continuing current therapies with the understanding parents' will be responsible for cost
 - Team members signed signature page.
7. _____ Share with the family the policy regarding the destruction of the child's educational record following the child's sixth birthday.
8. _____ Complete *Authorization for Release or Use of Information* forms as needed.
9. _____ Obtain all signatures needed on the IFSP signature page for the family and team members to sign their participation and agreement with the IFSP. Indicate type of participation, (e.g., phone, by written report)
 - Parent signs at the bottom in agreement to implement the IFSP
 - Service coordinator
 - Service provider(s)
 - Evaluator or representative
 - Interpreter as needed
 - Advocates and other family members as requested
10. _____ Parent signs TCM verification form, if child was present.

Within Five Working Days of the Transition Planning Conference

1. _____ Enter IFSP into TEIDS.
2. _____ Complete all required information on the TEIDS Transition Screen.
3. _____ Enter documentation of meeting into TEIDS Contact Log, include direct observation information about the child if present and visit is counted as a TCM.
4. _____ Finalize and print IFSP from TEIDS and mail to the family per POE procedures. Mail a copy to the LEA.

Targeted Case Management (TCM) Checklist

1. _____ Schedule and complete a monthly, face-to-face visit for each child on caseload. Visits must be a minimum of 15 minutes contact with child and caregiver. Child must be present.
 - TCM visits can be conducted by service coordinator, eligibility specialist, program coordinator, and/or district administrator.
 - If the POE personnel visit is in a community setting where multiple children receiving TEIS early intervention services are present, the TCM visit must be an individual meeting for a minimum of 15 minutes contact with each child and caregiver.
2. _____ Complete *Targeted Case Management Visit Verification* form.
 - TEIS staff name
 - Child name
 - Parent/caregiver name and phone number
 - Location of visit
 - Date of visit, including arrival and departure times
 - Complete checkboxes as applicable
 - Present at TCM
 - Review of services
 - Discuss each service on the child's IFSP to confirm delivery of and satisfaction with services
 - Insurance
 - Any changes/updates to insurance
 - Record new information as applicable
 - Medical updates
 - Recent or upcoming medical appointments
 - Note any changes to medical providers and obtain releases if applicable
 - Upcoming meetings
 - Record dates of scheduled meetings on form
 - Documented attempt to schedule TCM for following month
 - Schedule upcoming IFSP meetings or provide reminder of any previously scheduled upcoming meetings
 - Service coordinator notes
 - Parent/caregiver comments and signature
 - TEIS staff signature
3. _____ Document TCM visits in TEIDS Contact Log within five working days by checking box, "For Targeted Case Management." Any visit in TEIDs marked as a TCM visit must have an accompanying TCM form. Documentation must include:
 - location where the visit was held;

- who was present at the visit in addition to the child;
 - what was discussed during the visit;
 - note if HOPE family survey was offered/completed and method used;
 - noted observations of the child, including skills related to the child's goals; and
 - follow-up actions needed by the service coordinator (if applicable).
4. _____ Update TEIDS with any new information received during the TCM (e.g. new address, phone number, insurance information).
- For children receiving TennCare, child's name or social security number should not be updated until new TennCare identification cards are received.
 - Note update in comments field on the demographic screen until official notice is received.
5. _____ Turn in completed TCM form to district administrator per POE guidelines within five working days of completion of visit.

Help Our Parents Excel (HOPE)

The HOPE family survey will be used to collect family outcomes data. Service coordinators will be responsible to collect family outcomes data for each family on their caseload with at least six months of services at least once per year on a schedule determined by TEIS. Each service coordinator must receive HOPE training prior to conducting any surveys.

Tennessee has been using the Early Childhood Outcomes Family Outcomes Survey-Revised (ECOFOS-R) for data collection that meets the criteria outlined by the Office of Special Education Programs (OSEP) in the federal indicator for part C programs as follows:

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- Know their rights;
- Effectively communicate their children's needs; and
- Help their children develop and learn.

The service coordinator may choose the timeframe and method most appropriate to the family on their caseload. Options for completing the survey include:

- In person at a targeted case management (TCM) visit or by phone interview
- On paper or online
- Service coordinator interviews family and completes the survey or family completes it themselves.
- The family may permit the service coordinator to see the completed survey or prefer to seal it in an envelope and hand to service coordinator to mail to East Tennessee State University.

Variables		
Data Collection Locations	Survey Format	Data Collection Methods
<ul style="list-style-type: none">• In person• Phone	<ul style="list-style-type: none">• Paper• Online	<ul style="list-style-type: none">• SC interviews parent• Parent completes/shares with SC• Parent completes/does not share with SC

Survey Recipients

Service coordinators will complete the family survey at a TCM visit for all families on their caseload with children who have received services six months (i.e. child has had in the past or will have a six-month IFSP review meeting completed during the collection period). It is not necessary to complete multiple surveys for families with more than one child receiving part C services.

Guidance for Using the Online Survey System

- The online TEIS Family Outcomes Survey may be completed at <https://is.gd/teisfamilysurvey>.
- The survey is available in English and Spanish.
- The child's TEIDS ID number and POE will need to be entered prior to completing the survey. Families with multiple children receiving TEIS services only need to complete one and should select one child's ID number with at least six months of services.
- The online survey has an auditory feature that reads the survey aloud by clicking the speaker icon next to each section/question.
- Service coordinators may email or text the link for the online survey to families only after thorough discussion about the survey and its purpose.

H.O.P.E. Survey Checklist

Prior to the Survey

1. _____ Service coordinators should gather or print two paper copies of the survey, one copy of the cover sheet, and an ETSU business reply envelope for each family, ensuring the TEIDS child ID number is printed at the top of the survey.
 - If the survey is not printed from TEIDS where the child ID number prints automatically, the service coordinator should write it on the survey by hand.
 - The online survey will ask for the ID number and POE.
 - Service coordinators are permitted to highlight the survey scale to help families with explanation.
 - For families with more than one child, service coordinators may print the survey for one child and write the other ID number(s) on the survey.
2. _____ Service coordinators need to consider which data collection methodology/methodologies may work best for the family. Examples of considerations when determining best options for families:
 - Interview may be the best option for parents who struggle with literacy.
 - Phone interview may work best for families when the TCM is completed at a childcare center.
 - A service coordinator may wait toward the end of the collection period for a family experiencing crisis.
3. _____ The survey is available in English and Spanish online, in your offices, and in TEIDS. The survey (without the Tennessee logo) is available in multiple languages on the [Early Childhood Technical Assistance \(ECTA\) Center website](#) as follows:
 - Arabic
 - Chinese (Mandarin and Traditional)
 - Croatian

- Hmong
- Japanese
- Khmer
- Korean
- Lao
- Malay
- Portugese
- Russian
- Somali
- Vietnamese

Interpreters may be used to complete the survey at the discretion of the district administrator.

Introduction of the Survey

1. _____ The introduction of the survey to the parent is critical to the success of the process. The following components should be included in the introduction:
 - Purpose of the survey
 - The survey is about the helpfulness of the entire early intervention system.
 - Inclusive of the parent's experiences with service coordination, early interventionist, and therapists
 - It may be helpful to provide the parent with the names of their providers
 - The survey is to help us (TEIS) know how things are going for the family AND also to help us improve the system for other families.
 - Encourage honesty, openness
 - Responses to the survey will not negatively impact child's services
 - Parent may contact district administrator or TEIS central office with any questions/concerns about survey completion
 - Confidentiality
 - Responses will be confidential and used for federal reporting, but no identifying information will be shared.
 - Surveys are confidential but not anonymous, we need the child's ID number to report demographic information.
 - TEIS utilizes East Tennessee State University (ETSU) to support tracking and reporting. ETSU will keep information confidential.
 - Comments
 - Families have the option to include comments on the survey. These may be written at the bottom/back of the paper copy or typed on the online survey.
 - If a family opts to include identifying information in a comment (e.g. their service coordinator's name), the comment may be included in a report back to the service coordinator.

- Not applicable items
 - Explain to parents that not all of the survey items may apply to them, give them the option of saying “N/A” if they feel an item doesn’t apply
 - Write N/A next to the question if a parent says it doesn’t apply. Parents taking the survey online may leave an item blank.
 - This gives the option of moving on with the survey if a parent gets stuck on a question.
2. _____ Obtain permission
- After thoroughly explaining the process and options for survey completion, the service coordinator should answer all questions from the parent and ensure parent is in agreement to continue with the survey before proceeding.
 - Parent may select method that most appeals to them (e.g. online, paper, interview).
 - The survey takes about 10-15 minutes to complete.
 - If a family refuses or is very reluctant to participate service coordinator may leave survey and envelope with the family. Document on TCM form and in the contact log.

Conducting the Survey via Interview

1. _____ In-person interviews may be completed using either the paper copy or the online survey.
 - Surveys completed via phone interview must be completed using the paper copy only so that a copy of the completed survey can be mailed to the family.
2. _____ Provide a copy to the family and/or sit so that the service coordinator’s copy/screen is in view so that the family can see how the service coordinator is marking their responses.
3. _____ Explain the scale (1-5) thoroughly, the scale may be highlighted if helpful.
4. _____ Service coordinators should read the questions exactly as written.
 - Service coordinators should refrain from providing additional information or offering examples that may lead to a biased response.
 - If a family does not understand a question after additional agreed-upon information has been provided the service coordinator may remind the family that not all questions apply to them and can be marked as N/A next to the question.
 - If a family says the question does not apply, follow same as above.

After Completion of the Survey

1. _____ Document in contact log for the TCM visit that family survey was completed.
2. _____ Ensure child’s ID number is printed/written at the top of the paper survey.
3. _____ Mail paper survey to ETSU using the provided self-addressed stamped envelope.
4. _____ Document outcome of survey in contact log. Complete TCM paperwork.

Assistive Technology Guidelines

Part C of IDEA addresses only assistive technology (AT) devices that are directly relevant to the developmental needs of the child. Assistive technology devices must be necessary for the child to accomplish IFSP goals/objectives within their everyday activities and routines. Equipment/devices must be developmentally appropriate to be considered eligible for funding.

- If a parent requests AT and the IFSP team determines that it is not necessary to meet an IFSP goal or it is an item not on the list of eligible AT services, the service coordinator provides the family with a *Prior Written Notice* refusing the parent's request and a copy of *The Rights of Infants and Toddlers with Special Needs Eligible for Tennessee's Early Intervention System* brochure.
- If the team determines it is appropriate, the service coordinator completes the AT request packet.

Assistive Technology Checklist for Point of Entry (POE) Offices

1. _____ The service coordinator should complete the assistive technology (AT) request packet and discuss and submit the AT request to the district administrator within five working days of becoming aware of the need for the service. Note: the cover sheet and the AT request documentation is referred to as the AT request packet. The packet includes:
 - Individualized Family Service Plan (IFSP) goal number(s)
 - Evaluation report from specialist (if applicable)
 - Physician's order (N/A for hearing aid request)
 - Letter of Necessity: (Audiology report and prescription if hearing aid request)
 - Reflecting developmental need
 - Identifying goals and objectives with the utilization of the recommended equipment/service
 - Current documentation in TEIDS of insurance benefit/exclusion
 - Picture and description of item, including pricing (N/A for hearing aid request)
 - Completed order form and copy of pages that list product (for Cascade product only)
 - Release of Information for specific vendor
 - Consent to access insurance (public/private)

Special notes to the POE office: The process runs more quickly when all requested information is submitted with the first submission. The timeline for the central office will begin when a complete packet is received.

2. _____ The district administrator and/or program coordinator review and make a decision whether or not the request is valid and complete within five working days of receipt.
 - If the decision is the request is approved, the service coordinator should complete a requested review to add the AT to the IFSP within five working days of the approval.
 - If the request cannot be approved due to an incomplete packet, the service coordinator should obtain the missing items and resubmit within five working days.
3. _____ After a review of the AT guidelines, the district administrator and/or program coordinator verify that the device is appropriate.
4. _____ If the request is found to be an appropriate request, the district administrator signs and dates the request form, selects a vendor, and notifies the service coordinator the AT can be added to the IFSP.
5. _____ The request will be reviewed by the central office designee and if the AT order received from district administrator is complete and the IFSP is updated, the item is ordered within five working days.
 - The central office designee will follow-up with the district administrator on any incomplete requests.
 - Any questionable request will be directed to the Part C coordinator who will consult with TEIS leadership as needed. A decision regarding approval or disapproval of questionable will be made within an additional five business days.
6. _____ The central office designee will notify the district administrator and service coordinator by email the AT has been ordered.

Eligible Assistive Technology Devices/Services

The following are the AT devices that may be provided to eligible children and their families under this program. Some items have a limit as to the number which may be eligible for purchase during the three-year TEIS period. For example, "2/1095" indicates two items per 1095 days (three years), and "3/365" indicates three items per year. For any item typically associated with requiring a set or a pair, such as hearing aids and AFOs, the item number refers to a set or pair if applicable.

Description	Allowable Price	Quantity/Days	Examples/ Comments/ Remarks
Aids for Daily Living			
Adaptive feeding aid	\$25 per item	2 like items/365	Weighted/built-up spoons, forks, bowls, plates, guards
Adaptive drinking aid	\$25 per item	2 like items/365	Adaptive cups, bottles, feeders

Description	Allowable Price	Quantity/Days	Examples/ Comments/ Remarks
Bath chairs with accessories	\$750	1/1095	
Assistive Listening			
Hearing aids (left)	\$1800	1/1095	
Hearing aids (right)	\$1800	1/1095	
Hearing aid-bone conductive hearing device (BAHA or Ponto)	\$5500	1/1095	TEIS sole payor
Hearing aid batteries	\$120	48 batteries per aid/365	
Hearing aid orientation/fitting/ dispensing fee (one-time fee)	\$300	1/1095	
Hearing aid ear mold impression	\$100	6 sets/365	
Hearing aid ear mold	\$180/per set	6 sets/365	
Hearing aid ear mold fittings and hearing aid adjustments	\$300	1/1095	
Hearing aid pediatric kit	Included with purchase of aids	1/1095	
Softband (for bone conductive hearing device)	\$75	1/1095	
Batteries (for bone conductive hearing device)	\$60	52 batteries/365	
Assistive Toys & Switches			
Switch adaptive toy	\$150	2/1095	
Switch battery adapter (interrupter)	\$150	2/1095	
Single use switch	\$150	2/1095	
Switch interface	\$250	2/1095	Switch Hopper, Power Link
Augmentative Communication (Mid- Low Tech)			
Communication devices	\$300	1/1095	Go Talk, voice output switches
Picture or object communication system	\$100	1/1095	PECS, visual schedules, choice boards

Description	Allowable Price	Quantity/Days	Examples/ Comments/ Remarks
Mobility and Positioning			
Custom lower extremity orthotics, left (daily functions)	\$1800	4/1095	AFO, DAFO, SMO, UCB, Sure Step, Patti Bob, Hot Dogs
Custom lower extremity orthotics, right (daily functions)	\$1800	4/1095	AFO, DAFO, SMO, UCB, Sure Step, Patti Bob, Hot Dogs, twister cable orthosis
Custom upper extremity orthotic, left (daily functions)	\$500	3/1095	Thumb abduction splint w/wo supinator strap, may include metal stays or thermoplastic. (Benik, Joe Cool, McKie Splint)
Custom upper extremity orthotic, right (daily functions)	\$500	3/1095	Thumb abduction splint w/wo supinator strap, may include metal stays or thermoplastic. (Benik, Joe Cool, McKie Splint)
Feeder seat	\$500	2/1095	
Positioning aid	\$600	2/1095	Chair inserts, wedge, versaform,
Activity chair with attachments	\$2500	1/1095 ***not to duplicate another seating system (Wheel Chair, Adaptive Stroller)***	Rifton
Gait trainer with attachments	\$3000	1/1095	Rifton, KidWalk, Crocodile
Walker	\$350	1/1095	Posture control, reverse or forward walker (2 or 4 wheels)
Visual Aid			
Adapted mobility device (aka "anticipators")	\$100		
Light box	\$150		
Light box overlays	\$75		
Lilly the Light Aide	\$1200		

Ineligible Assistive Technology Devices/Services

Certain equipment/services are not covered in the scope of assistive technology and payment will not be made for their provision. The following are examples of devices or services that are **not** considered AT under this program:

1. Equipment/services that are prescribed by a physician, primarily medical in nature and not directly related to a child's developmental needs, including but not limited to:
 - apnea monitors
 - electrical stimulation units
 - feeding pumps
 - helmets
 - heart monitors
 - intravenous supplies
 - oxygen
 - night splints
2. Devices requested for children two years, six months of age and over, as equipment requested during this time would not be available long enough to achieve identified goals
3. Equipment/services for which developmental necessity (educational benefit) is not clearly established
4. Equipment/services covered by another agency
5. Typical equipment, materials, and supplies related to infants and toddlers utilized by all children and which require no special adaptation. Included but not limited to:
 - car seats
 - clothing, including special order clothing
 - cribs
 - diapers
 - high chairs
 - infant swings
 - shoes, including special order shoes
 - toys that are not adapted, used by all children, and are not specifically designed to increase, maintain, or improve the functional capabilities of children with disabilities include such examples as building blocks, dolls, puzzles, balls, and other common play materials
 - typical baby/toddler bottles, cups, utensils, dishes, etc.
6. Standard equipment used by service providers in the provision of early intervention services (regardless of service delivery setting), including but not limited to:
 - tables, desks, etc.
 - therapy mats
7. Seating and mobility devices, including but not limited to:
 - car seats
 - standers

- strollers
 - wheelchairs
8. Equipment/services which are considered duplicative in nature, generally promoting the same goal, and/or objective with current or previously approved equipment/services
 9. Frequency Modulation (FM) systems
 10. Replacement equipment if original item has not been returned to vendor or if payment for equipment has not been returned to the fiscal services team by the supplying vendor
 11. Sales tax and shipping and handling charges
 12. Any equipment that requires surgical implantation or maintenance (i.e., cochlear implants)
 13. Any items deemed non-evidence based or experimental in nature, including weights, weighted vests, weighted blankets, etc.

File Closure

File Closure Guidance

- Send appropriate notice to family (e.g. *Prior Written Notice, Third Birthday Letter*).
 - For children with eligibility determined exiting prior to their third birthday, send certified *Prior Written Notice* and wait ten calendar days before closing file.
- Convert ECO scores from continued to exiting.
- Notify providers of file closure.
- End services on IFSP, including evaluation service, unless child is aging out of Part C.
- See guidance manual for additional information on transfers between POEs.
- Select appropriate exit reason.
- Document closure in contact log and transition screen.

Non-618 Exit Reasons

The following non-618 exit reasons are used when children exit prior to initial IFSP development.

- “Referral less than 45 days”
 - Referral received less than 45 calendar days from the child’s third birthday
- “Unable to contact”
 - Used after operations manual procedures were followed to contact a family
 - If eligibility has been determined, must send *Prior Written Notice* of file closure via certified mail. File should be closed ten calendar days after notice is sent if no contact from family or as soon as a signed PWN form is received from the family indicating they have waived their right to the ten day waiting period.
- “Parent declines”
 - Parent declines participation in TEIS at any phase prior to initial IFSP development
 - Files awaiting medical records closed on the 31st day past the initial IFSP due date.
 - If eligibility has been determined, must send *Prior Written Notice* of file closure via certified mail. File should be closed ten calendar days after notice is sent if no contact from family or as soon as a signed PWN form is received from the family indicating they have waived their right to the ten day waiting period.
 - Eligibility evaluation service should be ended on the planned services screen prior to closing file in TEIDS.
- “Screening – No action required”
 - Screening completed; parent waives right to full evaluation.
- “Ineligible for Part C”
 - Child not eligible after completion of multidisciplinary evaluation procedure

- “No meeting occurred”
 - Meetings scheduled with family are not held (i.e., intake, evaluation, or initial IFSP) and operations manual procedures were followed to inform the family of their rights.
 - If eligibility has been determined, must send *Prior Written Notice* of file closure via certified mail or hand delivered to the family. File should be closed ten calendar days after notice is sent if no contact from family or as soon as a signed PWN form is received from the family indicating they have waived their right to the ten day waiting period.

618 Exit Reasons Prior to Age Three

The following 618 exit reasons are used after initial IFSP but prior to child turning age three.

- “618 - Completion of IFSP/no longer requires services”
 - Child not eligible based on re-evaluation (e.g., prematurity, evaluation for re-referral, or IFSP team member questions continued eligibility).
 - Must send *Prior Written Notice* of file closure via certified mail or hand delivered to the family. File should be closed ten calendar days after notice is sent if no contact from family or as soon as a signed PWN form is received from the family indicating they have waived their right to the ten day waiting period.
- “618 - Deceased”
 - Even if death occurred at the age of three when child would be exiting.
- “618 - Moved out of state”
 - Include all children who moved out of state.
 - *Prior Written Notice* of file closure via certified mail or hand delivered to the family. File should be closed ten calendar days after notice is sent if no contact from family or as soon as a signed PWN form is received from the family indicating they have waived their right to the ten day waiting period.
- “618 - Parent withdrawal”
 - Parents declined or withdrew consent for IFSP services.
 - *Prior Written Notice* of file closure via certified mail or hand delivered to the family. File should be closed ten calendar days after notice is sent if no contact from family or as soon as a signed PWN form is received from the family indicating they have waived their right to the ten day waiting period.
- “618 - Attempts to contact unsuccessful”
 - Unable to contact or locate the family or child after repeated, documented attempts.

- *Prior Written Notice* of file closure via certified mail or hand delivered to the family. File should be closed ten calendar days after notice is sent if no contact from family or as soon as a signed PWN form is received from the family indicating they have waived their right to the ten day waiting period.

618 Exit Reasons at Age Three

The following 618 exit reasons are used for children exiting one day prior to the age of three.

- “618 - Part B eligible”
 - Child is determined to be eligible for Part B.
 - Mail the *Third Birthday Letter* no later than 10 days prior to the child’s third birthday.
 - Note: This exit code is only used if it is known that Part B eligibility has been determined and an IEP was in place by the child’s third birthday. The service coordinator should make an attempt to determine the child’s eligibility status prior to closing the file.
- “618 - Not eligible for Part B - Exit with referral to other programs”
 - Child determined ineligible for Part B, was referred to other programs (e.g., preschool, Head Start).
 - Mail the *Third Birthday Letter* no later than 10 days prior to the child’s third birthday.
- “618 - Not eligible for Part B - Exit with no referrals”
 - Child determined ineligible for Part B, was not referred to other programs.
 - Mail the *Third Birthday Letter* no later than 10 days prior to the child’s third birthday.
- “618 - Part B eligibility not determined”
 - Child’s eligibility for Part B not determined, including children for whom parents did not consent to transition planning.
 - Mail the *Third Birthday Letter* no later than 10 days prior to the child’s third birthday.