



TO: Board of Directors  
FROM: Robert Hascall, Director of Special Services  
SUBJECT: Local Interagency Agreement  
DATE: November 5, 2019  
TYPE: Action Needed

The purpose of this Local Interagency Agreement between Toddler Learning Center and Stanwood-Camano School District agrees to maintain, coordinate, participate in and/or provide early intervention services for identified children 0-36 months of age with developmental delays who reside in Island County.

Recommendation: To approve the Local Interagency Agreement as of October 1, 2019 through September 30, 2021.



Therapy, Education and Parent Support for Children 0-36 Months with developmental delays

## **Local Interagency Agreement October 1, 2019 through September 30, 2021**

### **Purpose of Local Interagency Agreement:**

In compliance with 43.215.476 RCW (formerly known as RCW 70.195.030), Local Lead Agency (LLA) shall enter into formal Local Interagency Agreements that define their relationships and financial responsibilities to provide Early Intervention Service (EIS) within each county. In establishing priorities, school districts, counties, and other services EIS providers shall collaborate in the provision of comprehensive services for enrolled infants, toddlers and their families. This agreement shall include procedures for resolving disputes, provisions for establishing maintenance requirements, and all additional components necessary to ensure collaboration and coordination.

The Contractor, Toddler Learning Center (TLC), will facilitate, implement, and maintain Local Interagency Agreement(s).

An Interagency Agreement, a Memorandum of Understanding (MOU), or a contract may be used to provide the required information.

Interagency Agreement shall be submitted to Early Support for Infants and Toddlers (ESIT) for approval when required in Exhibit D, Deliverables Schedule, of this contract and shall include:

### **1. Local agencies and EIS Providers who have entered into Interagency Agreement(s) with the Contractor:**

- Toddler Learning Center
- Sherwood Community Services
- Island County Developmental Disabilities
- San Juan County Family & Community Health Services
- School Districts:
  - \*Stanwood-Camano School District
  - \*Coupeville School District
  - \*Oak Harbor School District
  - \*South Whidbey School District
  - \*Lopez Island School District
  - \*Orcas Island School District
  - \*San Juan Island School District
  - \*Shaw Island School District

Local Interagency Agreement October 1, 2019 through September 30, 2021

**2. Specific roles and financial responsibilities that the Contractor, each local agency, EIS providers, and others will provide, including:**

**Coordinated Child Find/Early Identification and referral**

Child Find/Early Identification Services will continue to be coordinated on an ongoing basis by Family Resources Coordinators employed by Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services.

Coordination will occur, but not limited to: Pediatric and Family Practices, Child Protected Services (CPS), local School Districts, Community Services Offices, Children with Special Health Care Needs Coordinator (CSHCN), Community Health Nurses, Head Start and Early Head Start, and Early Childhood Education Assistance Program (ECEAP). The Lead Family Resources Coordinator (Lead FRC) monitors referral information and public awareness on a quarterly basis.

**Family Resources Coordination**

Family Resources Coordinator (FRC) services will continue to be provided by Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services. In order to accommodate geographical challenges, we have a FRC who receives referrals and contacts the family at each of our Early Support sites (Whidbey Island, Camano Island, and San Juan Islands) within 3 days of receiving referral. The Lead Family Resources Coordinator remains the contact for state publications.

The initial visit by a Family Resources Coordinator is focused on describing the early intervention process to the family. The role of the FRC is explained and the parent is informed that there is a choice of FRCs available. The FRC explains parent/guardian rights and procedural safeguards and provides the family with ESIT Parent Rights. With parent permission, the FRC obtains information regarding the family's concerns, daily routines and activities, and reviews or completes a developmental screening/assessment. In addition, the FRC collects information regarding other agencies that may be providing services, medical records, reports of previous evaluations and assessments, recommendations, etc. The FRC helps the family understand/define the roles of those working with them to ensure coordinated services.

With parent permission given on the Notice & Consent for Initial Evaluations/Assessments form and Systems of Payment and Fees (SOPAF) form to access insurance as a funding source, the FRC will present the child to the service providers and coordinate Evaluations/Assessments with the agencies providing direct services; Toddler Learning Center for Whidbey Island and San Juan Islands and Sherwood Community Services for Camano Island. The assigned FRC monitors the Evaluations/Assessments process to ensure we meet the eligibility criteria for ESIT. The Evaluations/Assessments results are reviewed with the family and parents are given a copy of the report. With parent/guardian permission, the report may be faxed to other agencies providing services (i.e. pediatrician, CPS).

For children who qualify for EIS, the development of an initial Individual Family Service Plan (IFSP), IFSP Reviews, and Annual IFSP's are facilitated and completed by the assigned FRC in accordance with ESIT guidelines. During these meetings, parent/guardian rights, procedural safeguard, and SOPAF Policy are reviewed and copies of the corresponding ESIT documents are provided.

For those who are not eligible, the FRC will provide "next step" developmental information, community activities, and additional service resources. When appropriate, the FRC will obtain permission to directly refer the family to a community service provider (i.e. CSHCN Coordinator, Early Head Start, WIC).

The Lead FRC monitors caseloads of each FRC to ensure that there are not more than fifty-five (55) children with active IFSPs to 1 full time employee (FTE) and in no case can exceed sixty-five (65) without an exception to policy waiver granted by ESIT. The ratio is based on comprehensive EIS coordination duties and Data Management System (DMS) data entry. The Lead FRC will assign an FRC in the DMS at least one (1) business day prior to the FRC's first scheduled visit.

Designated TLC Staff participation in local and regional early learning coalitions will assure ongoing community awareness regarding access to Family Resources Coordination and early intervention services in Island and San Juan Counties service area. TLC Staff actively engage in teaming and collaborative practices so that community partnership, relationship and ongoing interaction occur.

### **Evaluation and Assessment**

All parties to this Agreement agree that all records pertaining to an infant/toddler's evaluation and assessment will be maintained confidential and will not, directly or indirectly, be disclosed to any third party without authorization by the individual's parent or guardian.

Evaluation and Assessment will be provided by TLC (Whidbey Island and San Juan Islands) and Sherwood Community Services (Camano Island) to determine initial and continuing eligibility for IDEA Part C Early Intervention Services. Evaluations, assessments, and determinations of eligibility of services will be based on the ESIT Practice Guide for Evaluations, Assessments, Eligibility, and the Initial IFSP.

*(Source: <https://www.dcyf.wa.gov/sites/default/files/pdf/esit/EvaluationAssessmentSept2013.pdf>)*

Families will have the opportunity to identify their needs, concerns, priorities and resources related to enhancing the development of their child during the Initial Intake, Evaluation and Assessment, and throughout the program (i.e. home visits, IFSP Reviews).

When the IFSP team discusses the child's present levels of development as part of the annual IFSP review, they ensure the child's continuing eligibility for Part C. A child must continue to meet Washington's eligibility criteria in order to continue to receive Part C services. For those children who no longer exhibit a delay based on test scores alone, but for whom the team

determines services continue to be needed, the team's informed clinical opinion may be used to continue Part C eligibility.

If at any point during the provision of services, including at any periodic or annual IFSP review, the IFSP team, determines that the child may no longer be eligible for Part C services, the IFSP team must decide whether additional evaluations are warranted to establish continued eligibility. An evaluation is not required to determine ongoing eligibility. However, it is highly recommended to complete an evaluation in line with ESIT policies and procedures. If the parent declines to provide written consent for re-evaluation, the team may use information about current functioning, progress, outcome achievement, and other factors to determine the need for continued services.

(Source: <https://www.dcyf.wa.gov/sites/default/files/pdf/esit/2019-3EvalAssess-OngoingEligibility.pdf> )

### **Individualized Family Service Plan (IFSP) development and team participation**

The development of the IFSP will occur in collaboration with the guardians/parents, others they invite (i.e. grandparents, childcare provider), Family Resources Coordinator, the evaluation team, and service providers.

Agency representatives that will be involved in IFSP planning and meetings may include: Early Head Start, Guardian Ad Litmus, Childcare, Early Learning Center Providers, Public Health Providers, Children with Special Health Care Needs, Primary Care Providers, Private therapists, and School Districts.

FRCs will conduct IFSP reviews every 6 months, every 12 months from the Initial IFSP, and as needed to address the concerns and services of a family and/or medical provider about a child. FRC will utilize the Medical Home Form to inform the status of a child's evaluation with the child's primary care provider and/or those the family has signed a Release of Information (ROI) document allowing the FRC to share their child's developmental evaluation results.

### **Specific Early Intervention Services (EIS)**

In accordance with the SOPAF Policy, the following IDEA and Part C functions and services must be provided at public expense and for which no fees may be charged to families: implementing the child find requirements, evaluation and assessment, service coordination services, administrative and coordinative activities related to the development, review, evaluation for IFSPs, and interim IFSPs.

If a family meets the definition of "inability to pay," all Part C services identified on their child's IFSP will be provided at no cost to the family. In addition, the family's inability to pay will not result in a delay or denial of Part C Services.

Functions and services are subject to Family Cost Participation (FCP) and for which co-payments, co-insurance, deductibles, or fees may be charged to families: Assistive Technology Device, Assistive Technology Services, Audiology Services, Counseling, Health

Services, Nursing Services, Nutrition Services, Occupational Therapy, Physical Therapy, Psychological Services, Social Work Services, and Speech-Language Pathology Services.

Families will not be charged any more than the actual cost of the Part C EIS that is subject to FPC (factoring in any amount received from other sources of funds designated for payment for that services).

Gaps in services available in Island County are addressed in the Local Early Intervention Service Plan.

**Transition activities/plans to preschool special education or other appropriate services**

All Early Intervention Services funded by Part C of the Individual with Disabilities Education Act (IDEA) will end no later than the child's third birthday. Toddler Learning Center has co-created the local Transition Planning and Conference Protocols with all early intervention provider agencies and local school districts in Island and San Juan Counties. The Local Transition Planning and Conference Protocols is reviewed at least one time per year or upon request by our interagency contractors.

If the parent has provided approval, the LLA shall convene a transition conference for a toddler who may be eligible for Part B to discuss any services the toddler may receive under Part B. If a toddler is not potentially eligible for Part B, then reasonable efforts shall be made to hold a conference to discuss other appropriate services.

If the toddler may be eligible for Part B and the parent approves, the conference shall be held no later than 90 days before the toddler's third birthday, but at the discretion of all Parties, the transition conference may occur up to 9 months before the toddler's third birthday. The transition conference may be combined with the IFSP meeting to develop the transition plan. The transition conference shall be held at a time and location convenient for the family and in the native language of the family or other mode of communication used by the family, unless it is clearly not feasible to do so. Meeting arrangements shall be made with, and written notice provided to, the family and other participants early enough before the meeting date to ensure that they shall be able to attend.

For the toddler who may be eligible for preschool services under Part B, the transition conference must include the family of the toddler, the LLA representative(s), the Local Educational Agency (LEA) representative(s), and other individuals required to be included in an IFSP meeting. The LEA representative will participate in the transition planning conference.

If the transition conference is for a toddler who is not potentially eligible for preschool services under Part B, meeting participants include the family, the LLA representative(s), and representatives of the other early childhood program option(s) of interest to the family.

The FRC and other IFSP team members shall review the program options for the toddler with a disability who is potentially eligible for Part B, for the period from that toddler's third birthday through the remainder of the school year. The team also discusses with the family all early childhood options available in their community. Options may include preschool special education services, Head Start, private preschools, and childcare settings.

*Initial Referral to Part C Between 2 Years 9 Months and 2 Years 10 ½ Months of Age:* Upon receipt of an initial referral of a toddler between the ages of 2 years 9 months and 2 years 10 ½ months (89 to 46 days prior to the toddler's third birthday) the LLA shall complete the eligibility determination process, hold the initial IFSP meeting, and conduct the transition planning within 45 calendar days of the referral. LLAs and LEAs may jointly and concurrently conduct the evaluation, eligibility, initial IFSP meeting, and initial IEP meeting to meet Part C and Part B timelines. Transition conferences are not required. The IEP should be in place by the student's third birthday, when possible.

*Initial Referral to Part C Between 2 Years 10 ½ Months and 3 Years of Age:* Upon receipt of an initial referral of a toddler between the ages of 2 years 10 1/2 months and 3 years of age (less than 45 days prior to the toddler's third birthday), the LLA is not required to complete the evaluation of the toddler. With parental consent, the LLA shall refer toddlers to the State Education Agency's (SEA) and the LEA of residence or assist the family in making the referral. The LEA responds by accepting this as an initial referral for special education and not as a toddler served by Part C.

#### **Plan for on-going communication**

Designated Staff will attend Regional and local (Island County, San Juan County, and Snohomish County) Early Learning Coalitions meetings. In addition, TLC continues to co-facilitate Autism Partnership of Island County (APIC). TLC, San Juan County Family & Community Health Services, and Sherwood Community Services participate in on-going outreach with community presentations, community resources networking, and other various organizations throughout Island and San Juan Counties.

#### **Interagency Disputes on the Local Level: Exhibit C, General Terms and Conditions**

TLC will attempt to resolve a dispute with any party at the lowest possible level and if the dispute is unable to be resolved support the grieved party in understanding and requesting a formal dispute resolution option.

TLC will maintain records of all information received related to informal and formal complaints and how the complaint was resolved.

#### **Monitoring efficient use of federal, state, and community resources**

Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services will monitor licenses, certifications, and registration.



Therapy, Education and Parent Support for Children 0–36 Months with developmental delays

## **Local Early Intervention Services Plan October 1, 2019 through September 30, 2021**

The Contractor, Toddler Learning Center (TLC), will develop, implement, maintain, and monitor a Local Early Intervention Services (EIS) Plan.

The Local EIS Plan will be submitted to Early Support for Infants and Toddler (ESIT) for approval, as required in Section 4, Deliverables, of this Contract and as instructed in Exhibit D, Deliverables Schedule.

The EIS Plan shall:

**1. Identify gaps related to EIS and the activities and processes to be implemented to resolve the gaps**

*a. Universal Developmental & Social Emotional Screening*

Since 2016, we have partnered with our early learning coalition in launching an initiative to offer all parents of children birth to sixty months the ability to screen their child's development. Our hope is that a common or "universal" screening will increase support for children in need at an earlier age. This initiative has three components:

- 1) Public Outreach – Early Learning partners encourage caregivers to complete free developmental screening for all children birth to sixty months through Within Reach or one of our local community providers.
- 2) Medical and non-medical providers offer an aligned developmental screening protocol and referral process as part of their individual work with families. All pediatricians and non-clinic organizations (i.e. home visitors, infant mental health providers, pediatric doctors, TLC, Child Care and preschools have been trained in this screening and referral protocol).
- 3) Partners for Young Children will monitor a centralized data file located at TLC. The centralized data file will be used to determine the scope of outreach, identify shifting needs, and track impact.

Originally developed for Whidbey Island, TLC expanded their service area to include San Juan County as of July 1, 2019. Pediatrics Associates of Whidbey



Island will be partnering with TLC to provide Universal Developmental Screening training for providers in San Juan County.

b. Interpreter and Translators:

Reaching non-English speaking families and providing services in their native language is a challenge. Outreach avenues and interpreter resources need to be continually updated. It is challenging to find interpreters for home visiting services, IFSP meetings and transition conferences as well as translating information and written materials in the family's language.

We are participating in the State Interagency Coordinating Council (SICC) sub-committee to help address the need for qualified Interpreters. SICC encourages ESIT providers to use Universal Language for families with Apple Health insurance. We will continue to rely on community volunteers and local school districts to help meet the gaps when a Universal Language Interpreter is not available.

c. Child Care

There is limited availability of quality preschool, childcare, and respite programs to address the increasing need for young children; especially infants and children with special needs. With the limited providers, some families have difficulty affording the cost of childcare, and scholarships are very limited. Some areas have ECEAP, Early Head Start and/or Head Start, but families who are not eligible for these programs have difficulty finding affordable preschool/childcare programs. Families with children who have identified special needs have difficulty finding preschool/childcare programs that will meet those needs. When there are behavioral and/or emotional challenges, families have difficulty finding appropriate programs that meet their children's needs. Children with behavioral challenges may be asked to leave their program and these changes in preschool/childcare settings may increase social emotional issues.

We are increasing awareness of the social emotional needs of young children through efforts of our early learning coalitions. Increased identification of developmental delays through our universal developmental screening efforts will help ensure that infants/young children and their families get the support they need. Recently, ECEAP announced they are accepting children on their third birthday who have had an IFSP; which helps fill a gap in areas where a developmental preschool is not available.

d. Community Services

Due to the geographic challenges for Island and San Juan Counties, families are often seeking services in nearby counties or in a larger community (i.e. Anacortes, Everett, Stanwood, Mount Vernon). Families may have more options to select which services will meet their family's needs and schedules for various reasons (i.e.

insurance, specialists). Fluctuating number of referrals makes it difficult to plan for staffing needs and advocating for additional services (i.e. Parent to Parent).

In addition to the outreach for Universal Developmental Screening, we will collaborate our efforts to educate the community of available resources to families; especially young children with special needs.

In rural counties such as ours it is a constant challenge to recruit and maintain early intervention providers for quality early intervention services. The cost of travel and availability to serve the entire areas of Island and San Juan Counties is a challenge. We are addressing this by identifying specific qualifications needed and increasing recruitment efforts. Providing enough hours and rate of pay to allow for a living wage in these positions increases interest. Increased staff support and training specific to the job is helping to recruit therapists to the early intervention field.

**2. Describe how EIS are delivered consistent with all Annual Performance Report (APR) performance indicators:**

- a. Indicator 1 Service Start: Services start within 30 days of the development of the Individualized Family Service Plan (IFSP) unless parents choose to start at a later date or are unavailable to begin accessing services within 30 days of the IFSP. Service start dates are monitored and tracked through the Early Support for Infants and Toddlers Data Management System.
- b. Indicator 7, Initial IFSP: The Initial IFSP is completed within 45 days of the referral unless families request later dates. The FRC contacts the family and evaluation team to coordinate scheduling of the intake, evaluations/assessments and the IFSP meeting. Initial IFSP within 45 days of referral are monitored and tracked through the Early Support for Infants and Toddlers Data Management System.
- c. Indicator 8A, Transition Steps and Services: The Transition Plan is developed with the Family Resources Coordinator and the School District representative(s). The Transition Plan includes service/program options, steps to prepare the child for change in service delivery, parent training and other information. This plan outlines the steps to be taken to ensure a smooth transition at age three to the local school district and/or a community services. Transition Steps and Services are monitored and tracked through the Early Support for Infants and Toddlers (ESIT) Data Management System (DMS).
- d. Indicator 8B, Transition Notice: The School Districts will be notified 6 months prior to the Transition meeting once the "Potential Eligibility for Part B Services." In addition, the school districts have access to their respective children on the ESIT DMS once

we have a Release of Information Form signed by the parent/guardian on file. Transition Notices are monitored and tracked through the ESIT DMS.

- e. Indicator 8C, Transition Meeting: The Transition meeting is held with the parents, School District representatives and the FRC. Providers of early intervention services may also be invited. This is an opportunity for the School District to provide information on the evaluation/IEP process and service options available. The FRC, with permission from the family, schedules and facilitates the Transition meeting at least 90 days before the child's third birthday. Transition Meetings are monitored and tracked through the ESIT DMS.
- f. Indicator 2, Natural Environments: Early intervention services are primarily provided in the home with the participation of the family. When appropriate, the service providers accompany the family to community settings such as a pool, grocery store, park, indoor playground, etc. to provide services. Children who are enrolled in community early childhood programs may receive some services at their program with consultation provided to the program staff and/or the parents.
- g. Indicator 3 Child Outcomes Summary (COS): The COS process is an essential part of services for children and families enrolled in early intervention. It is important for families to understand why we are completing the COS and how the ratings and descriptor statements will be used.

The family is the expert on their own child and the information that they share is critical to ensuring an accurate description of the child's abilities. In order to maximize the information, they are encouraged to share information about their child's development throughout the intake, assessment and evaluation process.

During the Initial Intake, the FRC explains the Child Outcome Summary (COS) Parent/Guardian Form and begins the conversation about the three outcome areas (Positive social-emotional skills, Acquisition and use of knowledge and skills, and Use of appropriate behaviors to meet their needs) and why COS data is collected. This conversation continues during the evaluations/assessments and at the IFSP meeting.

In collaboration with families, all team members consider the mix of functional skills a child has for each of the outcome areas and then determines how close these skills are to age-expected development. The process is repeated later (i.e., annually and/or at exit) to compile information that helps identify changes observed in the child's functioning.

- h. Indicator 4 Family Outcomes: The focus of early intervention is on successful participation in everyday activities. Early intervention provides support to families and caregivers so they can enhance their children's learning and development. The type and frequency of services as well as who the family's providers will be are determined by the outcomes set by the team with the family at the center. Because families are such an important component of the Individualized Family Service Plan (IFSP), it is crucial that the outcomes be functional, participation-based and measurable.
- i. Indicator 5 Child Find Birth-12 months: Outreach is conducted with the local hospitals, birth centers, Pediatric and Family Practice Clinics, Public Health Nurses, infant childcare programs, Early Head Start, and other programs serving infants. Posters, development charts, agency brochures, and other information are provided to be posted and/or distributed to families.
- j. Indicator 6 Child Find Birth-36 months: Outreach is conducted with physicians, social service agencies, childcare programs, preschools, and at community gathering places. Ongoing communication with community agency representatives throughout Island and San Juan Counties. Posters, development charts, agency brochures, and other information are provided to be posted and/or distributed to families.

**3. Describe coordination efforts with other local agencies and programs, including early care and education programs that provide EIS for children, ages birth to three years.**

Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services will continue to have ongoing interaction with local agencies and programs (i.e. local school districts, childcare programs, preschool providers). Interaction may include visits to the program sites, participation in training, sharing resource information, and coordination for the benefit of individual children.

**4. Describe how Child Find and outreach activities are coordinated within the designated geographic EIS area.**

Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services participates in public awareness activities, disseminating state approved public awareness materials, and participating in child find events with local school districts. The Lead Family Resources Coordinator (Lead FRC) monitors referral information and public awareness on a quarterly basis.

FRC's within Toddler Learning Center, Sherwood Community Services and San Juan County Family & Community Health Services partner with all local school districts to coordinate Child Find efforts. School Districts include Toddler Learning Center, Sherwood Community Services, or San Juan County Family & Community Health Services on their publications (i.e. website) as a resource for children birth to three whom need a developmental screening.

EIS will continue to be coordinated on an ongoing basis by Lead Family Resources Coordinators employed by Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services. Coordination will occur, but not limited to: Pediatric and Family Practices, Child Protected Services (CPS), local School Districts, Community Services Offices, Children with Special Health Care Needs Coordinator (CSHCN), Community Health Nurses, Head Start and Early Head Start, and Early Childhood Education Assistance Program (ECEAP).

Designated Staff will attend Regional and Early Learning Coalition meetings. In addition, TLC continues to co-facilitate Autism Partnership of Island County (APIC), Social/Emotional. Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services participates in on-going outreach with community presentations, community resources networking, and other various organizations throughout Island and San Juan Counties.

**5. Describe outreach to primary referral sources, including referral sources serving infants and toddlers who have experienced prematurity, homelessness, abuse, neglect, or drug exposure.**

Outreach to Family Resource Centers, the Readiness to Learn Program, Citizens Against Domestic Abuse, Opportunity Council, etc. serving homeless or abused children is ongoing. All FRCs have ongoing communication with caseworkers and referral coordinators to provide information on the referral process. The regional hospitals and primary care physicians serving infants that are premature, drug exposed or have other health concerns are informed of contact information for services in Island and San Juan Counties. Outreach to primary referral sources is monitored by the Lead FRC to ensure providers have current information about early intervention services.

**6. Describe how referrals to the ESIT primary referral contact occur.**

Family Resources Coordinator (FRC) services will continue to be provided by Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services. In order to accommodate geographical challenges, we have an FRC who receives referrals and contacts the family at each of our Early Support sites (Whidbey Island, Camano Island, and San Juan Islands). Referral information is communicated to the Lead Family Resources Coordinator on a monthly basis and tracked on a data system. The Lead Family Resources Coordinator remains the contact for state publications.

**7. Describe how evaluations and assessments needed to determine part C of IDEA eligibility are provided in accordance with ESIT's System of Payments and Fees (SOPAF) Policy and established local fiscal procedures, within the geographic EIS area.**

In accordance with the SOPAF Policy, IDEA and Part C functions and services must be provided at public expense by ESIT. Service providers and for which no fees may be

charged to families: implementing the child find requirements, evaluation and assessment, service coordination services, administrative and coordinative activities related to the development, review, evaluation for IFSPs, and interim IFSPs.

If a family meets the definition of “inability to pay,” all Part C services identified on their child’s IFSP will be provided at no cost to the family. In addition, the family’s inability to pay will not result in a delay or denial of Part C Services.

Functions and services are subject to Family Cost Participation (FCP) and for which co-payments, co-insurance, deductibles, or fees may be charged to families: Assistive Technology Device, Assistive Technology Services, Audiology Services, Counseling, Health Services, Nursing Services, Nutrition Services, Occupational Therapy, Physical Therapy, Psychological Services, Social Work Services, and Speech-Language Pathology Services.

Families will not be charged any more than the actual cost of the Part C EIS that is subject to FPC (factoring in any amount received from other sources of funds designated for payment for that services).

Evaluation and Assessment will be provided by TLC, Sherwood Community Services, and San Juan County Family & Community Health Services to determine initial and continuing eligibility for IDEA Part C Early Intervention Services. Evaluations, assessments, and determinations of eligibility of services will be based on the ESIT Practice Guide for Evaluations, Assessments, Eligibility, and the Initial IFSP.  
(Source: <https://www.dcyf.wa.gov/sites/default/files/pdf/esit/EvaluationAssessmentSept2013.pdf>)

**8. Describe how you will bill and collect third party sources (e.g. Medicaid and other public and private insurance) and parent fees in accordance with ESIT System of Payments and Fees Policy and Procedures.**

Toddler Learning Center maintains a Fiscal Management Policies and Procedures to ensure the following:

- a. Bill and collect third party sources (e.g. Medicaid and other public and private insurance) and parent fees in accordance with ESIT System of Payments and Fees Policy and Procedures.
- b. Enroll all eligible children in the Developmental Disabilities Administration (DDA), if a county DDA contract in support of EI services is in place.
- c. Use funds efficiently and effectively to contain costs and provide high quality services that meet the needs of children and families and complies with Part C requirements.

TLC contracts with a Certified Public Accountant (CPA) firm to complete an annual Financial Audit; which includes a review of accounts receivable and accounts payable as permitted by the ESIT Contract

**9. Describe how family resources coordination is provided, including:**

- a. How the FRCs work with other agencies'/organizations' staff to coordinate EIS, maximize available resources, and support family directed EIS. The FRCs collect information from the family regarding other agencies that may be providing services. With the permission of the family, we are able to obtain medical records, reports of previous evaluations and assessments, recommendations, etc. This information helps to identify the needs for early intervention. The FRC helps the family understand/define the roles of those working with them to ensure coordinated services. With parent permission, communication with others working with the family is important to ensure that there is no duplication of services.
- b. How parents are informed of family resources coordination EIS in their local geographic EIS area. Family Resources Coordinator (FRC) services will continue to be provided by Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services. In order to accommodate geographical challenges, we have an FRC who receives referrals and contacts the family at each of our Early Support sites (Whidbey Island, Camano Island, and San Juan Islands). The Lead Family Resources Coordinator remains the contact for state publications.

The initial visit by a Family Resources Coordinator is focused on describing the early intervention process to the family. The role of the FRC is explained and the parent is informed that there is a choice of FRCs available. The FRC explains parent/guardian rights and procedural safeguards and provides the family with ESIT Parent Rights. With parent permission, the FRC obtains information regarding the family's concerns, daily routines and activities, and reviews or completes a developmental screening/assessment. In addition, the FRC collects information regarding other agencies that may be providing services, medical records, reports of previous evaluations and assessments, recommendations, etc. The FRC helps the family understand/define the roles of those working with them to ensure coordinated services.

With parent permission given on the Notice & Consent for Initial Evaluations/Assessments form and Systems of Payment and Fees (SOPAF) form to access insurance as a funding source, the FRC will present the child to the service providers and coordinate Evaluations/Assessments with the agencies providing direct services; Toddler Learning Center for Whidbey Island and San Juan Islands and Sherwood Community Services for Camano Island. The assigned FRC monitors the Evaluations/Assessments process to ensure we meet the eligibility criteria for ESIT. The Evaluations/Assessments results are reviewed with the family and parents are given a copy of the report. With parent/guardian permission, the report may be faxed to other agencies providing services (i.e. pediatrician, CPS).

- c. How family resources coordination is provided to maintain the recommended maximum FRC caseload of fifty-five (55) active IFSPs per 1.0 full time equivalent (FTE). The Lead FRC monitors caseloads of each FRC to ensure that there are not more than fifty-five (55) children with active IFSPs to 1 full time employee (FTE) and in no case can exceed sixty-five (65) without an exception to policy waiver granted by ESIT. The ratio is based on comprehensive EIS coordination duties and Data Management System (DMS) data entry. The Lead FRC will assign an FRC in the DMS at least one (1) business day prior to the FRC's first scheduled visit.
- d. How FRCs are actively engaged in teaming and collaborative practices, so adult partnerships, relationships, and ongoing interactions occur. Whidbey Island and San Juan Islands Family Resource Coordinators meet on a weekly basis with the EIS providers to exchange information for the purpose of jointly planning, implementing intervention, and assessing child and family progress.

Camano Island FRCs meets monthly with Sherwood Community Services FRCs to discuss family needs and community resources within Island and Snohomish County. FRCs meet bimonthly with EIS providers (SLPs, OTs, and Infant/Toddler Educator) to assess a child's progress, family needs, and IFSP planning.

- e. How teaming occurs among FRCs, practitioners, and families for initial planning and implementation of interventions. Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services ensures adequate time for providers to coordinate service provision and facilitate the use of teaming practices to discuss Child Outcomes Measurement, evaluation results, initial IFSP development and subsequent IFSP reviews/updates.

FRCs and EIS providers are housed in the same facility and interaction occurs daily (i.e. email, in-person). In-house protocols have been implemented to ensure HIPPA and FERPA compliance. Release of Information forms must be on-file prior to exchanging information with community providers.

Families will have the opportunity to identify their needs, concerns, priorities and resources related to enhancing the development of their child during the Initial Intake, Evaluation and Assessment, and throughout the program (i.e. home visits, IFSP Reviews).

The development of the IFSP will occur in collaboration with the guardians/parents, others they invite (i.e. grandparents, childcare provider), Family Resources Coordinator, the evaluation team, and service providers.

Agency representatives that will be involved in IFSP planning and meetings may include: Early Head Start, Guardian Ad Litem, Childcare, Early Learning Center Providers, Public Health Providers, Children with Special Health Care Needs, Primary Care Providers, Private therapists, and School Districts.



FRCs will conduct IFSP reviews every 6 months, every 12 months from the Initial IFSP, and as needed to address the concerns and services of a family and/or medical provider about a child. FRC will utilize the Medical Home Form to inform the status of a child's evaluation with the child's primary care provider and/or those the family has signed a Release of Information document allowing the FRC to share their child's developmental evaluation results.

- a. How frequently FRCs and practitioners interact on an ongoing basis. How FRCs and practitioners intentionally exchange information, for the purpose of jointly planning, implementing interventions, and assessing child and family progress.

ESIT partners with Department of Health (DOH), local Pediatric Clinics, and Special Health Care Needs (CSHCN) Program to help ensure that children served in early intervention have access to a medical home. A medical home is primary healthcare that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate and culturally effective. Medical homes promote wellness, provide acute care and chronic care management, and build on the strengths and concerns of the family.

During the intake process and/or the initial Individualized Family Service Plan (IFSP) meeting, the FRC discuss whether or not their child has a primary care provider (PCP). If needed, the FRC will provide a list of available options within our community. With parent/guardian permission, the FRC will submit a copy of the child's evaluation/assessment report to the PCP for the child's medical records.

Toddler Learning Center will conduct regularly scheduled internal agency-wide quality assurance activities to be proactive with program improvement and compliance. Activities include review of DMS data, internal record reviews, and other strategies as deemed appropriate to identify and to initiate steps to mitigate any potential performance and/or compliance issues.

Toddler Learning Center will participate in all monitoring and quality assurance activities conducted by ESIT. Monitoring activities may include but are not limited to staff interviews, parent interviews, child record reviews, data validation, desk audits, self-assessments, on-site visits, etc. Toddler Learning Center, Sherwood Community Services, and San Juan County Family & Community Health Services will continuously update their developmental plan to improve program performance and/or corrective action plans to correct any findings of noncompliance as defined in the written notification of the deficiency. Data will be used to track progress toward improvement and/or compliance.

Toddler Learning Center will identify technical assistance and training needs and access these supports to enhance program improvement and ensure compliance. This should occur following both internal quality assurance activities as well as participation in ESIT monitoring and quality assurance activities.

**School District Participation in the local early intervention system.**

A list of the EIS contracted by the School District and their payment of services are listed on their individual contracts with Toddler Learning Center and Sherwood Community Services. Please refer to each contract for further details on the participation of each School District.

**The signing party(s) agrees to maintain, coordinate, participate in, and/or provide early intervention services as described in the Local Interagency Agreement as of October 1, 2019 to September 30, 2021.**

Participating Agency/Organization: STANWOOD-CAMANO SCHOOL DISTRICT

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name (Participating Agency/Organization)

\_\_\_\_\_  
Signature

Rene' Denman, Executive Director of Toddler Learning Center

\_\_\_\_\_  
Date

Local Interagency Agreement October 1, 2019 through September 30, 2021