State of Illinois
Department of Human Services

The Illinois Early Intervention Program

A Guide for Families

October 2025

IDHS
ILLINOIS DEPARTMENT OF HUMAN SERVICES

www.dhs.state.il.us
(800) 843-6154

Acknowledgments
The Early Intervention Clearinghouse staff thanks members of the Parent Advisory Council, CFC staff, IDHS staff, and other stakeholders who volunteered their expertise, experience and feedback in the revision of *The Illinois Early Intervention Program: A Guide for Families*. We also extend our warmest appreciation to our colleagues in the Bureau of Early Intervention in the Illinois Department of Human Services for their support of this new edition.

We wish all families success on their journey through the first three years of their young child's life. We hope that this guide provides help as you move through the Illinois Early Intervention Program.

When you see this image, you know it's from the EI Clearinghouse and a good resource for EI families.

Look What I Can Do
The Sooner We Start, The Farther They'll Go.

The Illinois Early Intervention Program
A Guide for Families
Revised July 2024

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Parenting my premature baby was wonderful and challenging at the same time. My early intervention team helped me find more of the ‘wonderful’ in being a parent by showing me different ways to help my baby move and play and eat and sleep. My confidence grew by miles, as my baby grew by inches and pounds, thanks to their support!

”

	Name	Phone
My local CFC		
Service coordinator		
Parent liaison		
Evaluation date		
IFSP meeting date		
Providers		
Helpful community resources		
Local school district		

SECTION ONE

Welcome to the Illinois Early Intervention Program!

This guide is for you, your child's primary caregiver. You play a critical role in your child's early years by knowing your child best, supporting your child's development daily, and caring about your child's future.

This guide, often referred to as "The Family Guide," explains the Early Intervention (EI) Program, including

- available services,
- program eligibility,
- your rights, and
- your role in planning services as a member of your child's team.

It also answers questions that many families ask. We hope the guide will answer your questions and help you make decisions that will give you and your child a good start. In Illinois, the **early intervention** program is provided in your local community through **Child and Family Connections (CFC)** offices. Anyone can call to refer a child. Participation is voluntary. The EI program does not require proof of immigration status.

The Illinois EI program provides a variety of services for families with infants or toddlers with a **disability** or a **developmental delay**. The EI program is based on the principle that all families help their children learn and grow. Families with a child with a delay or disability may need support to figure out the best ways to help their child develop. Families are partners with professionals in the EI program to help their child have the best start in life. (See Appendix A for the principles of early intervention.)

All EI evaluations and services are confidential. No information about EI services can be shared with individuals outside of your family and your team without your consent.

How Do I Find My Local CFC Office?

The EI program is provided through your local CFC office. To find your local office, call (800) 843-6154 or visit the IDHS Office Locator at www.dhs.state.il.us.

What If I Need an Interpreter?

If you need an interpreter, one will be provided to you throughout the EI process. It is free to you. Hard copy documents also may be translated into your family's native language as needed. You should request an interpreter when you contact your CFC office.

Why Do Some Words Appear in Bold Type?

Bold words appear in Appendix B, a glossary that lists and defines many of the terms used in EI.

Developmental Milestones From Birth to Age 3

The milestones listed below are typical for young children. **Please remember that every child is unique— growing and developing at different rates.** Most of the time differences between children of the same age are nothing to worry about. But for some children, the difference can be related to a developmental delay.

Below, we provide a checklist of milestones from birth to age 3. However, we also note that milestones may look different for children who were born premature. For milestones for premature babies, see https://pathways.org/preemie-nicu/preemie/

At age 2 months, most children can …

- Calm down when spoken to or picked up
- Make sounds other than crying
- Watch you as you move
- Hold their head up when on their tummy

You may be concerned if your child …

- Does not respond to loud noises
- Does not smile at the sound of your voice
- Does not follow moving objects with their eyes

At age 4 months, most children can …

- Smile on their own to get attention
- Make sounds like "oooo" and "aahh" (cooing)
- Look at their hands with interest
- Bring hands to their mouth

You may be concerned if your child …

- Does not bring objects to mouth
- Does not reach and grasp for toys
- Does not push down their legs when feet are placed on a firm surface

At age 6 months, most children can …

- Know familiar people
- Take turns making sounds with you
- Put things in their mouth to explore them
- Roll from tummy to back

You may be concerned if your child …

- Has very stiff, tight muscles
- Is very floppy
- Does not respond to sounds
- Does not roll over (stomach to back)

At age 9 months, most children can …

- Show several facial expressions (e.g., happy, sad, angry, surprised)
- Make a lot of different sounds, such as "mamamamama" and "bababababa"
- Bang two things together
- Get to a sitting position by themselves

You may be concerned if your child …

- Does not show interest in peek-a-boo or patty-cake
- Does not babble

At age 12 months, most children can …

- Play games such as patty-cake with you
- Understand "no" (pauses briefly or stops when you say it)
- Put something in a container, such as a block in a cup
- Pull up to stand

You may be concerned if your child …

- Does not search for hidden objects
- Has difficulty getting into a standing position
- Does not seek out a familiar adult when upset

Developmental Milestones From Birth to Age 3

At age 15 months, most children can …

- Copy other children while playing (e.g., taking toys out of a container when another child does)
- Look at a familiar object when you name it
- Try to use things the right way, such as a phone, cup, or book
- Take a few steps on their own

You may be concerned if your child …

- Does not seem to know the function of common household objects (e.g., brush, phone, fork, spoon)
- Does not try to take steps independently

At age 18 months, most children can …

- Move away from you but look to make sure you are close by
- Try to say three or more words besides "mama" or "dada"
- Copy you doing chores (e.g., sweeping a broom)
- Walk without holding on to anyone or anything

You may be concerned if your child …

- Cannot walk
- Does not speak at least 15 words
- Avoids a parent when distressed

At age 2, most children can …

- Notice when others are hurt or upset
- Kick a ball
- Point to things in a book when asked, like "Where is the bear?"
- Point to at least two body parts when asked
- Play with more than one toy at a time, such as putting toy food on a toy plate
- Say at least two words together, such as "more milk"

You may be concerned if your child …

- Does not use two-word sentences
- Does not imitate actions or words
- Does not follow simple one-step instructions

At age 30 months, most children can …

- Play next to other children and sometimes play with them
- Say about 50 words
- Follow two-step directions such as "Put the toy down and close the door"
- Jump off the ground with both feet

You may be concerned if your child …

- Does not say many words
- Does not follow one-step directions

At age 3, most children can …

- Notice other children and join them to play
- Say their first name, when asked
- Draw a circle when you show them how
- Use a fork

You may be concerned if your child …

- Has unclear speech
- Is unable to help dress and undress themself
- Has trouble with stairs and balance

Source: Centers for Disease Control and Prevention

https://www.cdc.gov/act-early/resources/milestone-checklists.html

Why Are Early Intervention (EI) Services Important?

There are several reasons why EI services are important:

- During the first three years, your child's brain and body are growing rapidly. Your child will more than double in size every year. Delays are often noticed when babies miss important milestones. You may want to check your child's development against the list of common milestones listed on the previous pages.
- If your child was born early or was very small, they may need support to develop like other children their age.
- If your child was born with a disability, they may need extra help to learn and develop new skills.
- If your child is developing more slowly or differently, then EI can support you and your child in continuing to learn and grow.
- If your child is at risk for developmental delays, EI may help improve your child's skills and functioning.

The EI program can also help your family and others understand your child's special strengths and gifts. Remember, your child's first three years provide a foundation for life. As your child's first and foremost caregiver, you play an integral role in your child's development. Early intervention recognizes the importance of the parent-child relationship. There are several ways that early intervention benefits your child, you, and your family:

- You will learn new strategies to help address your child's needs. Your early intervention team will coach you on strategies that will help your child progress.
- You will feel empowered to advocate for your child.
- You will become knowledgeable about your rights and the services your child receives.

One Family's EI Story

I kept wondering if my baby was developing okay. Carson was 8 months old and still hadn't tried to roll over. He had trouble sleeping and was fussy all the time. He seemed more difficult than other babies I knew. So I talked to our pediatrician, and he referred us to the Child and Family Connections Office. They were great! They understood my concerns and listened to me. They watched me play with Carson and recommended that Carson have an evaluation by a team of specialists. I was at the evaluation and provided information and his medical records.

Afterward, we met and they told me that Carson was showing developmental delays in motor and social-emotional development. We wrote a plan for services, and my service coordinator helped me to choose a physical therapist (PT) and developmental therapist (DT). I was relieved to know I had been right to ask for help. We had PT services for almost a year, and they made a big difference in helping Carson to explore more, to roll, then crawl, and eventually walk and run. I also learned how to encourage and support his efforts and to let him try more. The developmental therapist worked with us until Carson turned 3 years old. She helped me establish routines and showed me different ways to play and connect with my son. I felt like I was part of a team. It made all the difference in the world for our family.

What Are EI Services?

Early intervention services are designed to meet your child's needs in these areas of development:

- Physical (how your baby moves and explores)
- Cognitive (how your baby learns)
- Communication (how your baby lets you know what he needs)
- Social and emotional (how your baby engages with you and shows feelings)
- Adaptive (how your baby participates in daily self-care activities)

EI services may include:

- Assistive technology
- Audiology/aural rehabilitation
- Developmental therapy/special instruction
- Family training and support
- Health consultation
- Interpretation and translation into other languages
- Medical services (only for diagnostic or evaluation purposes)
- Nursing
- Nutrition
- Occupational therapy
- Physical therapy
- Psychological/counseling services
- Service coordination
- Sign language or cued language
- Social work
- Speech-language pathology
- Transportation
- Vision

See Appendix C for definitions and examples of each of these services. If your child qualifies for the EI program, services are determined at the IFSP meeting. Services recommended are based on the amount of support needed to help your family meet the outcomes/goals you developed during the IFSP meeting. The delivery of these services should meet your child's and family's preferences, learning styles, and cultural beliefs.

SECTION TWO

Is Your Child Eligible for the EI Program?

Here are the steps for finding out whether your child is eligible.

What Makes My Child Eligible for Services?

Your infant or toddler (birth to 36 months) is eligible for services through the Illinois EI program if they ...

- have a 30% delay in at least one area or domain of development,
- have a condition that is known to cause a developmental delay or disability, or
- are at high risk for a substantial developmental delay.

Step 1: Contact Your Local CFC Office

You may call your local Child and Family Connections Office (CFC) to talk with a service coordinator about your concerns. If you need assistance finding your local CFC, please visit the IDHS Office Locator at www.dhs.state.il.us (at the bottom of that home page) or call (800) 843-6154. Your doctor or child care provider may also refer you to the local office. Once you contact the CFC, they will assign a **service coordinator** to meet with your family and talk with you about your child's development.

Step 2: Meet With a Service Coordinator

At your first meeting a service coordinator will explain the EI program and help plan evaluations and assessments. This is called an **intake meeting** because you will be asked to share information about your child and family. The service coordinator will ask you questions about your child's growth and development, medical history, and your daily activities (play time, meals, sleep schedules, child care). You also may be given a checklist to identify your child's skills and strengths.

You will be asked to sign consent forms agreeing that the service coordinator may share information about your child with the team that will evaluate and assess your child and may help you plan for EI services. If you give consent, then your child can be referred for evaluations and assessments. This process is free for all families.

Step 3: Participate in Evaluations and Assessments

You know your child best; you know what your child likes and doesn't like. Your knowledge makes you an important partner on your child's team. The team will include you, your service coordinator, and at least two other EI providers. The number of team members may vary depending on the needs of your child and may represent different disciplines, such as a developmental therapist and a physical therapist. The team will evaluate

your child across all five **domains** of development:

- physical (how your child moves and explores),
- cognitive (how your child learns),
- communication (how your child lets you know what they need),
- social and emotional (how your child engages with you and shows feelings), and
- adaptive (how your child participates in daily self-care activities).

Members of the team will observe and interact with your child. They may measure your child's abilities and compare them against developmental milestones (see pages 2–3). They may also observe and engage your child in activities to see what they can do and like to do.

They will ask you questions such as:

- Is your child developing the way you expect them to develop?
- Do you have concerns about your child's development?
- Does your child act differently than their siblings or other children you know at this age?
- What are your family routines, such as bath time and mealtime?
- How does your child respond during family activities?
- What are your family's **priorities** for your child?
- What do you need to help your family focus on those priorities?

If your native language is not English, an interpreter will be provided, if available, by the EI program for evaluations and assessments. You will not be charged for the interpreter. Hard copy documents may also be translated into your family's native language as needed.

"The early intervention process was entirely new and a little intimidating to us. Our initial service coordinator at the CFC was great. She took time to explain all the steps in the process, she always stressed that any decisions were completely open to us, and she made sure that we were aware of all the options available to us. I felt she truly cared about our son."

Step 4: Find Out Whether Your Child Is Eligible

Your child is eligible if your child has a disability that could delay their development or if the evaluation shows that your child has a developmental delay of 30% or higher in one or more domains. Your child may be eligible for early intervention if they are involved in the state's child welfare system. Your child also may be eligible if they are at risk for a developmental delay because your child has three or more risk factors, such as the primary caregiver is abusing alcohol or other substances, the birth mother abused alcohol or other substances during pregnancy, the primary caregiver is under age 15, the family is unhoused, the primary caregiver has a chronic illness, or the primary caregiver has a 10th grade education or less. For the complete list of risk factors, see https://www.dhs.state.il.us/page.aspx?item=96963

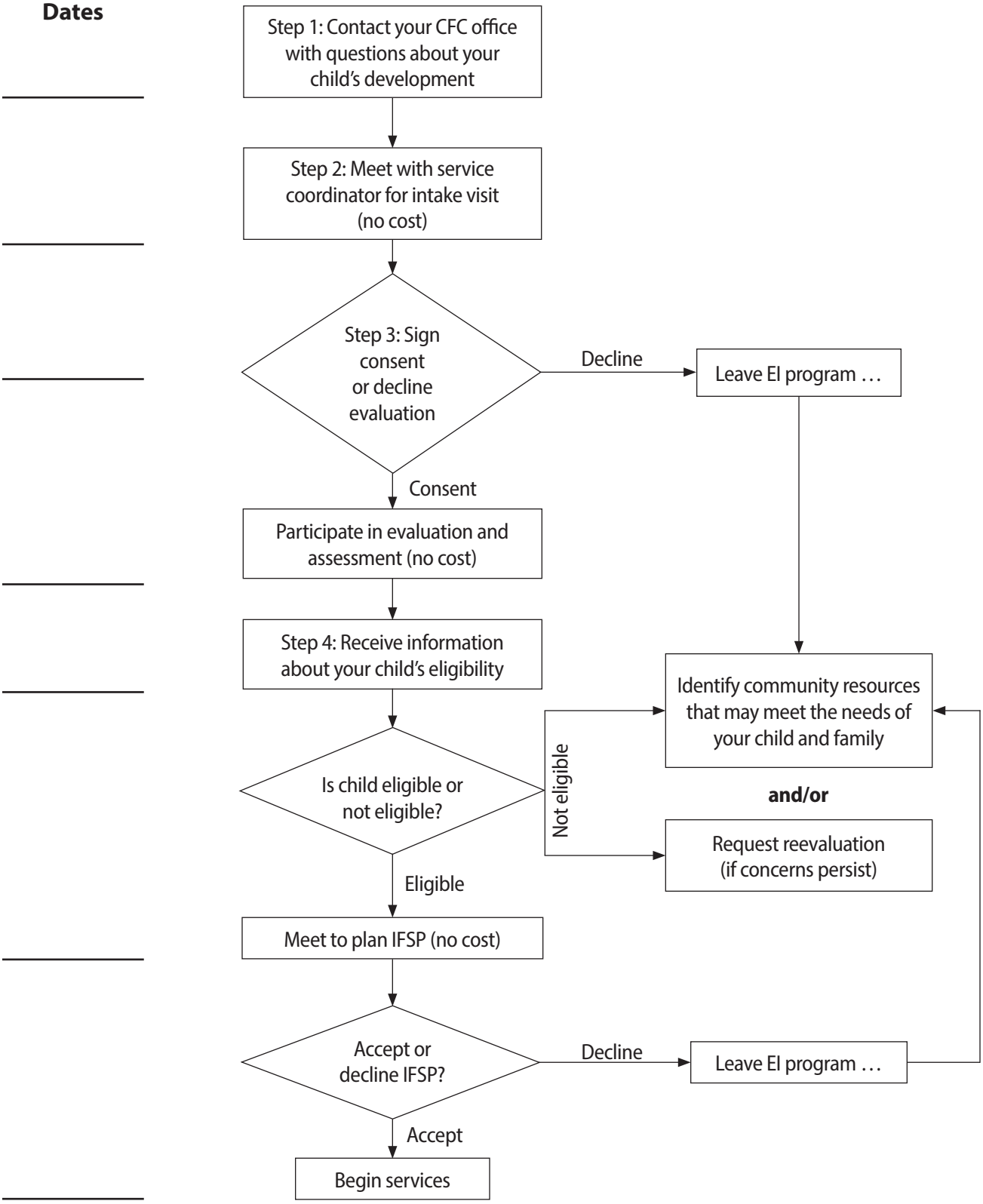
Eligibility for early intervention does not automatically mean your child has a formal diagnosis or disability. It may only mean that your child has a delay that can be addressed by services provided by the early intervention program. After the evaluation is completed, you will be notified by the CFC whether your child is eligible. You have a right to receive evaluation reports. If your child is eligible and you decide that you want to participate in the EI program, then a meeting will be held with you and your team to develop an **Individualized Family Service Plan (IFSP)**. The development of the plan is free and the IFSP meeting must occur within 45 days of your child's referral to the EI program.

While not required, you can request the evaluation findings before the meeting. This can help you prepare for the meeting by reading the report, drafting questions for the team, and providing additional feedback. See Appendix D for a sample letter to request the evaluation results before the meeting.

If your child is found ineligible, then an IFSP will not be developed and no EI services will be provided. The service coordinator may give you a list of community resources that may meet the needs of your family and child. If you have new concerns about your child's development, you may contact the CFC office any time before your child turns age 3 to discuss your concerns. We provide a list of resources that may be relevant in Appendix E.

Determining Eligibility for EI Services

Dates



SECTION THREE

Participating in EI Services

Families who choose to participate in the EI program are included in all decisions about EI services. You are a member of your child's team. The first step is planning the Individualized Family Service Plan (IFSP). When you and the team finish the plan, you will sign it to indicate you agree with the services. Services are required to begin within 30 days of signing the IFSP. The plan will describe what services are to be delivered, how often, and by whom. Because infants and toddlers learn best through everyday experiences and interactions, services are provided in your home or other everyday settings. Because of work schedules or other demands, some families have service providers come to where their child spends much of their day. This could be a childcare program or the home of a friend or relative. You and your team will review your child's plan and progress at least every six months. You may accept, decline, or stop services at any time. Your participation is voluntary and requires your written consent. The following section describes the service delivery process for you and your child.

Your EI Service Coordinator . . .

- is your first point of contact in the EI system (receives referral),
- introduces your family to other CFC staff, including the parent liaison,
- coordinates evaluations to determine eligibility for services,
- helps families understand their roles and rights in the EI system,
- assists the family and other EI team members in developing and implementing the IFSP,
- contacts the family monthly while child is in EI,
- develops and maintains the case (service) record for the child and family, and
- assists the family in leaving EI services when the child turns 3 years old

Step 1: Develop the IFSP

Your service coordinator and IFSP team will help you

- identify your concerns and priorities for meeting your child's needs,
- develop IFSP **outcomes** for your child and family,
- agree on services and supports to help your child and family meet those identified outcomes, and
- determine whether services are subject to fees.

You should have a meeting to develop the IFSP as soon as possible but no later than 45 days from your child's referral to the EI program. There are no charges or costs for developing the plan. Your service coordinator and EI team will help you.

What Is an IFSP?

The IFSP is a plan that you develop with your EI team. The plan reflects your priorities and concerns for your child. You identify the outcomes (e.g., for your child to walk, for your child to say a word, for your child to initiate a hug) that you want for your child and your family or caregivers. These are statements that describe changes and benefits that you want to see for your child and family. You and the team also identify services for meeting these outcomes.

You might begin by asking two questions: What benefits do I want my child and family to receive from EI? What will be different or better for my child and family when these changes occur? Services outlined in the IFSP are intended to support three overarching outcomes:

- Gaining and using knowledge and skills.
- Building positive social relationships.
- Using appropriate behaviors to meet their needs.

It will also include **family outcomes**. Three important outcomes (see Appendix F) include

- understanding your child's strengths, abilities, and needs;
- helping your child develop and learn; and
- knowing your legal rights regarding services for your child.

Who Should Be Involved in Developing the IFSP?

Your service coordinator will explain the IFSP process to you and set up the meeting to plan the IFSP. The service coordinator will work with you to identify a date and location that is convenient for you. You will receive a written notice confirming the meeting. The meeting should be conducted in your primary language. You may ask for an interpreter if you communicate in a language other than English and one will be provided to you, if available.

The meeting will include you, the service coordinator, and evaluation team. You may invite family, friends, or anyone else to be involved.

To help you prepare for the IFSP meeting, you may want to complete the "Preparing for Your Family's IFSP" worksheet on pages 12 and 13 of this guide. Remember that you are an equal partner in the planning and creation of this plan and may discuss changes upon request. You can use Appendix G to help you save important notes about these meetings.

Why Do You Sign the IFSP?

Once you and your team agree on outcomes and services for the IFSP, you will sign and receive a copy of the plan. Your signature indicates that you agree with the plan as written, or with changes you specify on the implementation page. Your service coordinator also will help you determine whether you will need to pay a monthly family participation fee for EI services based on your family income and other factors. (For more details, see Section 4, "Paying for EI Services.")

Your Parent Liaison . . .

- also had a child who received early intervention services,
- provides child-friendly activities,
- connects families with other families,
- informs families about community events and play groups,
- educates families about their rights,
- answers questions,
- shares resources, and
- teaches families to advocate.

Preparing For Your Family's IFSP

1. These are the things I want everyone to know about my child and my family:

2. New concerns that have come up since my last meeting with my service coordinator:

3. This is how my child communicates with me and others:

4. These are ways my child likes to learn new things:

5. This is what my child does when he or she needs help:

6. These are skills and behaviors that I'd like to see my child doing in the next 6–12 months:

7. Specifically, I'd like to see my child show these new skills or behaviors during these routines or activities:

8. These are things I would like to learn in the next 6–12 months:

9. These are ways my family and I learn best:

Step 2: Participate in Services

Who Provides EI Services?

Your service coordinator will offer you a choice of EI providers who are available to provide the EI services outlined in the IFSP. Your choice of EI providers may be limited because of availability, insurance requirements, or the unique needs of your child. Your choices may also be limited depending on how you want to receive services. You also can request a different provider and/or service coordinator at any time, for any reason. We provide a sample letter to change providers and another to ask for a new service coordinator in Appendix D.

What if I Want to Change Services?

You can ask your service coordinator to schedule a meeting with your IFSP team to discuss changes in your IFSP, such as adding, reducing, or increasing services for your child. See Appendix D for a sample letter to request a change in services.

Where Are Services Delivered?

EI services are to be provided in the child's **natural environment**. This means the places where your child is most likely to spend much of their time and where other young children without a disability or delay also are likely to spend time. Natural environments could be your home, childcare, library, a relative's home, or other places where your family typically spends time. Natural environments allow you and your EI provider to use your daily routines to teach new skills or behaviors to your child. If these activities can fit into your child's daily routines, you and other caregivers are more likely to do them often with your child while your EI provider is not with you. The key principles related to natural environments are provided in Appendix H.

It is important to note that, regardless of where EI services are delivered, the coaching model is used in early intervention. This means that during EI visits the provider may help you (or childcare staff) interact with your child to support their development. Coaching can help you identify strategies to support your child, practice the strategies during the visit,

reflect on your interactions with your child, problem solve challenges, and receive feedback from the EI provider.

What Should You Expect During an EI Visit?

You and your EI provider should agree on a time and day to meet. At the first meeting, your EI provider is likely to discuss your child's current development and go through your family's questions and concerns. They will suggest ways that you can work with your child to achieve the IFSP outcomes. Your EI provider will consider you or your child's primary caregiver as a partner in the delivery of EI services. This means that you will be asked to participate actively during EI visits. Your EI provider should never be alone with your child.

How Do You Participate in EI?

Working with your EI provider is very important, so you can support your child's learning and development. Your EI provider gathers information by talking with you and other family members or caregivers. Your EI provider learns about your child's strengths and needs by observing you and your child in everyday routines. Use the "Preparing for Your Family's IFSP" worksheet to guide your conversations with EI providers.

Positive, supportive experiences with familiar adults help your child's brain grow strong and flexible. That makes you the person who can make the greatest impact on your child's development. As the key member of your child's EI team, you can help by doing the following:

- Get to know your EI providers.
- Actively take part in your child's visits.
- Ask your EI providers to explain the activities that they are doing with you and your child and the reasons behind the activities.
- Share information about your routines, family traditions, and culture.
- Talk about the different places that you and your child go, such as playgroups and friends' homes.
- Describe the people you and your child enjoy being with.
- Notice what your child is interested in.
- Tell your EI provider about any concerns you have about your child.
- Learn activities to promote your child's development and include them into your and your child's daily routines.
- Provide lots of opportunities for your child to play and practice new skills during everyday routines, such as getting dressed, mealtime, and diaper changes.

- Identify your family's formal and informal supports and resources. For instance, who do you contact for help? What do you already have that you can use to support you and your child?
- Ask for help when needed. Let family, friends, and EI providers know how they can help during challenging times.
- Routinely play with and talk to your child. This will let them know they are special and loved!

How Can You and Your EI Provider Communicate About EI Visits?

Children can receive EI services in many locations, including childcare, the family home, and community locations. If you cannot be present during an EI visit, the EI provider should communicate important information about the visit. For example, if your child receives speech and language therapy at their childcare program, ask the EI provider and childcare provider to tell you about the visits. They could do this by sending you an email with a summary of the visit. (See Appendix I for a sample progress note.) They also could video record part of an EI visit with your consent so you can see what your child is learning and how you can help continue your child's learning. You could also request a phone call to discuss a visit and strategies for how you can help support your child. You should receive regular communication from your EI providers if you are not present during EI visits.

It's important to make sure your plan is working. Talk to your parent liaison or your service coordinator often.

How Can You Meet Other Parents in the EI Program?

Your local CFC office has a **parent liaison** who has experience with the EI service system because they are the parent or guardian of a child with a delay or disability. The liaison's role is to provide information and support to families. You can ask them to

- provide you with information about your child's diagnosis,
- help you advocate for your child,
- provide personal support that you may sometimes need, and
- connect you with other parents.

The Illinois Early Intervention Clearinghouse (http://eiclearinghouse.org) also is a source of free information for you. You can visit the website, obtain information through the virtual library, receive newsletters, and call or e-mail with questions. An expert in EI will respond within 48 hours to your questions or requests.

Step 3: Decide How to Receive Services

You and your team will discuss how EI services can be provided. Options include:

In-person visits: EI services are provided with the parent or caregiver and an EI provider working together, physically present in the same location, within a home or community setting. This has been the traditional way to provide EI services.

Live video visits: EI services are provided over the Internet on a computer or tablet (e.g., iPad), which allows your family to work with a provider in real time.

Phone consultation: EI services where providers and families can talk on the phone about the child's progress and review strategies previously discussed.

Hybrid: EI services are provided by a combination of in-person visits, live video visits, and phone consultations. This gives families the flexibility to respond to child/household health concerns and other family priorities that may cause EI visits to be canceled.

However you receive services, they will

- build on your child's and family's strengths and meet the needs of your child and family in culturally and linguistically responsive and affirming ways;
- be based on your identified outcomes in the IFSP;
- use a coaching approach to service delivery and focus on building caregiver capacity;
- focus on learning opportunities and intervention embedded into naturally occurring routines and activities with your family;
- not require or expect children to sit and attend for extended periods of time;
- consider your scheduling needs and preferences;
- comply with privacy, confidentiality standards, and legal safeguards; and
- be individualized and flexible to adapt to your changing priorities and circumstances.

The decision on how to receive services is made with all members of your IFSP team and depends on many things, such as the availability of EI providers in your area, your access to and familiarity with technology,

and your comfort with coming into close contact with EI providers in your home or other familiar settings. Talk to your service coordinator and your EI team about what option is best for you. You can always change your mind about how you receive services.

Step 4: Review the IFSP Every Six Months

An IFSP can be changed. As your child grows and develops, what's important to you may change, requiring new or different services. The EI team can change services to better meet the needs of your child and family.

You and your IFSP team will review your child's progress every six months and update the plan at least once a year. If your needs change, you and your team can meet more often to change the plan if needed.

To prepare for the next IFSP meeting, you may want to ask yourself the following questions:

- Has your child made progress?
- Do the current outcomes require different or additional services?
- Have your priorities for your child changed?
- What services might your child need in the future?
- Has your child met the outcomes of the IFSP? Are new outcomes appropriate?
- Has your family met the IFSP outcomes? Are new outcomes needed?

The purpose of the IFSP review also is to determine whether your child continues to be eligible for the EI program or whether your child has met developmental milestones and no longer needs services.

What Takes Place During a Typical EI Visit?

EI focuses on the child and the family, so during a typical EI visit the provider coaches the family on strategies to use with the child. To this end, a typical visit for EI services usually includes most of the following actions:

- **Advance planning for the visit.** The provider reviews notes and plans activities and strategies for the visit. The parent or caregiver may also like to review notes from the last meeting. If it's a live video visit, the provider may send you (or the child-care provider) some toys and items to prepare for the visit.
- **Arriving and greeting.** The provider arrives and chats with the parent or caregiver; they identify goals for the session and get ready to start.
- **Engaging in activities that focus on outcomes.** The provider and parent or caregiver work together with the young child.
- **Observing each other.** The parent or caregiver may observe the provider interact with their child, and the provider may also observe the parent or caregiver and child interact and provide supportive feedback.
- **Demonstrating and practicing new activities or strategies.** The provider may show the parent or caregiver new or different ways to help their child learn.
- **Sharing information and knowledge.** Both the provider and parent or caregiver may have important information to share about development, services, supports, and the child's progress.
- **Documenting services provided.** The provider leaves written information for the parent or caregiver about what happened during the visit. This is especially important when services are provided when a primary caregiver isn't present, such as at child care.
- **Planning activities and strategies between visits.** The provider can help the parent or caregiver think about ways to fit the activities they have practiced into their natural daily routines. They also may identify information that the provider or caregiver might gather for the next EI visit.
- **Scheduling the next visit.** To ensure that services continue without interruption, the parent or caregiver and provider schedule the next EI session and visit.

"Our provider helped us along the way in early intervention. We wouldn't have known how to start without her guidance."

"Our therapist has been wonderful with my son; she looks out for him, and I feel like we've made progress with her help. She is a very caring person."

SECTION FOUR

Paying for EI Services

Families with children eligible for the Illinois Early Intervention Program often have many questions about paying for services.

What EI Services Are Free?

All evaluations and service coordination provided through the EI program are free. If your child is eligible and you enter the EI program, staff will work with you to develop and coordinate your Individualized Family Service Plan (IFSP) free of charge. If you speak a language other than English, the program will provide a free interpreter or translation service.

What Is a Family Participation Fee?

You may need to pay a monthly family participation fee that will be based on your income, family size, and whether you have excessive out-of-pocket medical/disaster expenses. Your service coordinator can give you information on what your fee will be. If you do not wish to disclose your income, then you will pay the highest fee. Monthly statements are sent to your family indicating the monthly installment as well as the amount the system has paid for your child's services. Families never have to pay more in fees than the system pays for the services. For more details, search for "forms" on the IDHS website at https://www.dhs.state.il.us.

How Does Using My Private Insurance Help?

Private health insurance can help reduce the amount the EI program pays for services for your child. When your private health insurance is used for services, EI payments also may help you meet your health plan's annual deductible. Also, you will never be billed or expected to pay for insurance co-pays for EI services. Any services not covered by private health insurance are billed to the EI program. You should discuss your private health insurance plan and the billing process with your service coordinator.

How Does Providing Access to My Public Benefits, Such As All Kids, Help the EI Program?

The early intervention program can obtain partial reimbursement for certain services when families provide this access. This provides another potential source of revenue to the overall EI program. If you don't have public benefits but think you may be eligible, talk to your service coordinator about applying for All Kids. Families who do not have insurance are strongly encouraged to complete the All Kids application and to visit the Get Covered Illinois website at https://getcovered.illinois.gov/

What Does Giving Informed Consent to Use Insurance Mean?

You will be asked to sign a consent form that lets the Illinois EI program contact and bill your insurance provider or All Kids for EI services your family receives.

Why Doesn't the Illinois EI Program Just Pay for Everything?

The EI program is the "payor of last resort." That means all other available funds must be used first. The EI program receives federal funds, but these don't cover the full cost of the program. The state also provides money to support the EI program. Money from private insurance and family participation fees are important supports for the program. They help the program continue to provide high-quality services to all eligible families.

For More Information

If you have additional questions, please contact your service coordinator at your local CFC office. You may also find helpful information from the EI Central Billing Office (CBO) at https://eicbo.info.

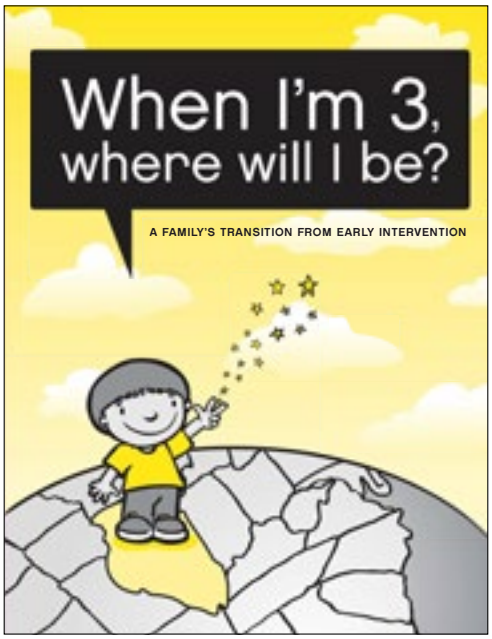
SECTION FIVE

When Is It Time to Leave the EI Program?

Your child may leave the EI program when your child's development improves and your child's outcomes have been achieved. Otherwise, your child may continue in the EI program until their third birthday, or after if **extended services** are an option for your child. At least six months before your child turns 3 years old, you and your IFSP team will begin planning the transition out of EI services. This gives you time to find out whether your child is eligible for early childhood special education (ECSE) services through your local school district or, depending on their date of birth, whether your child is eligible for extended services. Not all children will qualify for ECSE, and your child may require another evaluation.

Notably, if you are requesting assistive technology but have less than six months before your child ages out of early intervention, your child may not receive **assistive technology** from early intervention. In Appendix E, we list resources that may help your child access assistive technology during this time.

This workbook guides Illinois families through their child's transition from EI to ECSE.



https://www.childfind-idea-il.us/Materials/transition_workbook.pdf

Transition Services

Here are the steps and your role in the transition to early childhood special education services:

Step 1: Talk to your service coordinator, parent liaison, and EI providers about how to prepare your child and family for transition.

Step 2: Your service coordinator will ask whether you want to be referred to the local school district for ECSE services. You can accept or decline. If you accept, your signature is needed to share information with your local school district.

Step 3: Attend a transition planning conference for your child.

Step 4: Participate in a school district's evaluation(s) of your child, if needed.

Step 5: Get decision on your child's eligibility for ECSE, EI extended services, accommodations, and services from your school district.

Step 6: If eligible, plan your child's Individualized Education Plan (IEP) or Section 504 plan. If not, consider other community resources or options for your child.

Extended Services

Qualifying families can continue to receive EI services beyond their child's third birthday until the start of the next school year when *all of the following criteria* are met. The child must

- have an active IFSP,
- have their third birthday between May 1 and Aug. 31, and
- have been found eligible for an Individualized Education Program (IEP) with the child's local school district.

To find out more about eligibility for ECSE services, visit ISBE at https://www.isbe.net/ and search for "early childhood special education services."

Evaluating Your EI Services

Shortly after leaving the EI program, you will receive a family outcomes survey from the Illinois EI Training Program. This is a very important survey, and we ask that you complete and return it as soon as possible. Your responses will help the EI program learn valuable information about your family's experiences in the EI program and consider changes if needed. The survey asks about **family outcomes** such as

- understanding your child's strengths, abilities, and needs;
- helping your child develop and learn; and
- knowing your rights.

It also asks about the helpfulness of the EI system. The survey can be completed in a variety of ways and is available in English and Spanish. Feel free to contact the Illinois EI Training Program (numbers included with the survey) if you want help in completing the survey.

SECTION SIX

What Are Your Rights?

The Illinois EI program was established by state law to comply with Part C of the federal Individuals With Disabilities Education Act (IDEA). IDEA includes EI services for eligible children starting at birth until their third birthday or possibly until the start of the next school year after their third birthday. After turning 3, IDEA specifies that your child may continue to receive services from your local school district. IDEA defines your rights as a parent of a child who is receiving EI services.

Some of your parental rights are described briefly here. For more information about family rights in EI, visit eiclearinghouse.org and search for "family rights." More detailed information is available through the following:

- Infant/Toddler & Family Rights Under IDEA for the EI system booklet at https://www.childfind-idea-il.us/Materials/4392.pdf
- Parent Training Information Centers (PTICs) in Illinois: The PTICs are primarily staffed by parents of children with disabilities or delays. The PTICs provide free training, information, and referral services to families of children receiving early intervention, school, and adult services. For more, see https://eiclearinghouse.org/blogs/parent-centers/
- The "Educational Rights and Responsibilities: Understanding Special Education in Illinois" parent guide is available at https://www.childfind-idea-il.us/Materials/Educ_Rights_en.pdf

In Illinois, there are two PTICs:

- Family Resource Center on Disabilities (FRCD) serves the Chicago metropolitan area. Visit http://frcd.org, call the FRCD at (312) 939-3513, or email info@frcd.org.
- Family Matters serves the rest of the state. Visit http://fmptic.org or call (866) 4FMPTIC.

Informed Consent

Informed consent means that you are giving permission for you and your child to receive EI services. You are asked to sign the IFSP document to show that you understand and agree with the plan and the services identified in it. You also will be asked to sign consents to share information about your child and family with early intervention providers or other agencies that serve your child and family. Information can be shared only if you sign a form that identifies who will receive the information. All information should be given in the language you normally use.

Prior Written Notice

Written notice must be given to you before an EI agency or EI provider makes a change in your child's EI services. Notice must be given in the language that you usually use. You should receive written notice of any meetings so you have reasonable time to make arrangements to attend.

Review of Records

You have the right to review any records related to your child's EI services. Records must be available to you within 10 calendar days after you request them. You may request changes in the record. If the agency refuses to amend the records, you have the right to request a due process hearing.

Confidentiality of Records

All records of your family's EI services are confidential. Your providers will share information with each other to provide the best services for your family. The records will be shared with others only as allowed by strict privacy laws such as the Health Insurance Portability and Accountability Act (HIPAA) and Family Educational Rights and Privacy Act (FERPA). When you and your child prepare to leave the EI program, you will be asked to give written consent before your records are shared with the local school district or other agency that will serve your child at age 3.

Resolution of Concerns

If you have concerns about services, or if you disagree with decisions about your child, you should discuss them with your service coordinator at the CFC. These services or decisions may have to do with identification, evaluation, assessment, placement, or the appropriateness of the services. If you are not satisfied with the result of the discussion, formal options for administrative resolution are provided in the law. These include:

1. Complaints to the state. You may file a written, signed complaint with the Illinois Department of Human Services (IDHS) if you believe that a provider has violated a law or rule regarding the Part C Early Intervention Program. The statement must contain the facts that support your complaint. IDHS may use the Illinois Early Intervention Monitoring Program to facilitate the investigation (https://earlyinterventionmonitoring.org).

IDHS has 60 days from receiving the complaint to investigate and write a decision. During this time, IDHS may carry out an independent investigation. IDHS's decision must include findings from the investigation, conclusions, and a reason for the final decision. If the complaint is found to be true or valid, then the decision must include procedures to correct the cause of the complaint.

2. Mediation. If you have a disagreement with the local provider, the CFC, or IDHS, you can request **mediation**. Mediation is a voluntary session facilitated by a qualified mediator in a location convenient for you within 10 days after the request. The mediator's role is to help the disagreeing parties to talk and reach an agreement. The mediator cannot order an agreement. Discussions that are held during mediation are confidential. Mediation is voluntary, and you must freely agree to participate in it. The state pays for the cost of mediation. A mediation agreement records the terms agreed upon. Previously agreed on services to your child should continue during the mediation period.

3. Due process hearing. You may request a due process hearing to resolve a complaint with your provider or CFC. If you request a due process hearing, you and your CFC have up to 30 days to resolve the complaint to your satisfaction. If you cannot do so, a due process hearing will be held.

A due process hearing is similar to a court hearing. The hearing must be held at a time and place that is reasonably convenient to you. A hearing officer listens to both sides of the disagreement. The hearing officer may not be an employee of any agency or other entity that is providing EI services for your child. At the hearing, you may bring an **advocate, attorney,** or friend who has special knowledge or training about your child or about children with disabilities. You also have the right to bring your child and to have the hearing open to the public. To find an attorney, you may contact Equip for Equality, the Protection and Advocacy System agency in Illinois (https://equipforequality.org/).

You have the right to a copy of the record of the hearing, findings, and decisions, at no cost. The written decision must be mailed to you within 45 days after the 30-day resolution period ends. The losing party has the right to appeal the decision.

SECTION SEVEN

Questions Frequently Asked by Families

What Questions Might I Ask My CFC Parent Liaison?

- What are good resources in the community for parents like me?
- Are there community playgroups my child might be part of?
- Can you help me connect with other parents?

What Do All the Terms Used in EI Mean? Where Can I Get More Information About My Child's Disability?

Like many service programs, the EI program has many different terms and labels to describe the program, the services, and the providers. The glossary in Appendix B will help you understand terms. You may also visit the Illinois Early Intervention Clearinghouse at **http://eiclearinghouse.org/**. The clearinghouse is designed for families who use EI services and want to learn more. It provides a central directory of services for the state of Illinois and serves as a resource providing a variety of EI information and a link to its library catalog. Using a link to its library catalog on its website, you can borrow books and videos (at no charge) that will support you during your time in the EI program and beyond!

What Happens If My Family Moves Outside My CFC Region or to a Different State?

Notify your service coordinator if you are moving or no longer have a permanent address. If you are moving within Illinois, your service coordinator will help you transfer to the new CFC by providing a copy of your child's record to the CFC office serving your new community. The new CFC office will contact you to arrange EI services in your new area as soon as possible if your original EI providers are no longer available. If you are moving to a different state, your service coordinator can help connect you to the EI program in your new state.

Does EI Provide Medical Services?

No. EI provides developmental services to help your child develop and learn. Medical services can only be provided for diagnostic and evaluation purposes and not for treatment.

May I Change My EI Provider or Service Coordinator?

Yes. There may be times when some families find their schedules just don't match their EI provider's schedule and would like a provider who can meet at a more convenient time. Or a family may prefer a different perspective. If other EI providers are available, then a change may occur upon request. If you have disagreements with your EI services, you should talk to your service coordinator. If you still have concerns, then you may want to review your rights as explained in the Infant/Toddler & Family Rights Under IDEA handbook and consider the options to resolve your concerns.

If a new service coordinator is desired for whatever reason, please keep in mind that there may be some cases where the CFC may not have adequate staff for immediate reassignment. If this happens, you should discuss the timeframe for changing service coordinators with the CFC manager. See Appendix D for a sample letter to request a different service coordinator.

APPENDIX A

Principles of Early Intervention

Adopted by the Illinois Interagency Council on Early Intervention (IICEI)

Created October 2001
Last revised January 2021

1. The primary goal of early intervention (EI) is to build caregiver capacity by supporting their ability to promote their child's optimal development and to facilitate their child's participation in family and community activities.

2. The focus of EI is to facilitate the active participation of families in the EI process by engaging caregivers in the planning and implementation of services, including embedding intervention strategies into family life, such as routines, activities, and interactions with their child. It is the family/caregivers who provide the real EI by creatively adapting their caregiving methods to facilitate the development of their child, while balancing the needs of the rest of their family.

3. EI requires a collaborative relationship between families and professionals, with equal participation by all those involved in the process. An ongoing, equal family-professional partnership and dialogue is needed to develop, implement, monitor, and modify intervention strategies and services.

4. Intervention must be linked to specific, family-centered, functional, and measurable Individualized Family Service Plan (IFSP) outcomes that are developed using culturally and linguistically responsive and affirming practices.

5. Services and interventions shall be integrated into a comprehensive IFSP that requires families and professionals work together to consistently exchange knowledge and information with each other. It also requires collaborating across disciplines within the broader early childhood system to increase the team's capacity to jointly solve problems and implement interventions. The plan shall be built around family strengths, priorities, resources, routines, and activities and avoid unnecessary duplication of services. Services and strategies are based upon the best available research, recommended practices in the field, and special education laws and regulations.

6. Services, interventions, and progress should be monitored periodically through ongoing observations and discussions with all team members to ensure that the strategies implemented are successful in achieving outcomes.

7. Ongoing communication and collaboration with EI professionals, family members, and professionals in partnering systems outside of EI, who are supporting each family is encouraged. Ongoing, inclusive communication between all team members allows for coordinated, culturally relevant, and comprehensive services within and across systems to best support families' priorities, changing circumstances, and transitions.

8. Children and their families in the EI program deserve to have services of the highest quality possible. High standards will be set for the training and credentialing of administrative and intervention staff. Training, supervision, and technology will be focused to achieve excellence.

APPENDIX B

Glossary

Advocate
A person who argues for or supports an individual, a cause or a policy. Family advocates support parents and other family members in seeking and understanding services and options for early intervention.

Assessments/Evaluations
May be formal or informal. A formal initial evaluation determines eligibility for services and is conducted in five developmental domains (see below) by a multidisciplinary team. Periodic formal assessments also take place while the child is in the Illinois EI program. Ongoing informal assessments are used to identify the strengths and needs of the eligible child and the family's concerns, priorities, and resources related to the child.

Child and Family Connections (CFC) Offices
Twenty-five offices funded by the Illinois Department of Human Services that serve as regional points of entry to the Illinois Early Intervention Program. CFC office responsibilities include Child Find activities, intake of families, coordination of evaluation and eligibility determinations for children, oversight of the development of Individualized Family Service Plans (IFSPs), and ongoing service coordination, including transition to services after the child turns 3 years old.

Cognitive
The area of development that involves thinking skills, including learning and problem-solving skills.

Confidentiality
The expectation that EI providers will limit access to information about the children and families they serve in early intervention. The EI program follows all guidelines and procedures in accordance with the Health Insurance Portability and Accountability Act (HIPAA) and the Family Education Rights and Privacy Act (FERPA) to ensure the families' right to privacy and confidentiality.

Developmental Age
Determined by measuring the age at which your child demonstrates various skills against the age at which those skills are considered typical. Developmental age is established though a formal assessment.

Developmental Delay
The condition of a child who is not gaining new skills at the typical age and/or is showing inappropriate behaviors for his or her age.

Disability
A physical or mental impairment that significantly limits major life activities such as hearing, seeing, speaking, walking, caring for oneself, moving, learning, or working.

Domains
The five main areas of development that address cognitive, language, social-emotional, adaptive skills, and physical skills, including hearing and vision.

Early Childhood Special Education (ECSE)
ECSE services for children ages 3–5 who have developmental delays or disabilities and their families are provided through local school districts and special education cooperatives in a classroom setting or environment.

Early Intervention
Specialized services provided to infants and toddlers who show signs of or are at risk for *developmental delay* (see above). Services are planned and implemented with the family and often a multidisciplinary team of professionals. (See also *Illinois Early Intervention Program*.)

Early Intervention Credential
A credential issued according to Illinois Department of Human Services rules that helps to ensure that professionals working in the Illinois EI system possess appropriate qualifications, continuously participate in professional development related to their fields, and strengthen their understanding of children ages birth to 3 with delays and disabilities.

Early Intervention Extended Services
Extended services allow qualifying families to keep receiving EI services beyond their child's third birthday until the start of the next school year, when they will start receiving early childhood special education through their local school district.

Early Intervention Provider
A professional credentialed and/or enrolled in the EI program to provide services for children with or at risk for a *developmental delay*. EI providers are credentialed by the Illinois Department of Human Services. They can include but are not limited to occupational therapists, developmental therapists, physical therapists, and speech-language pathologists.

Family Educational Rights and Privacy Act (FERPA)
A federal law that protects the privacy of student education records. The law applies to all state and local agencies that receive funds under an applicable program of the U.S. Department of Education.

Family outcomes
See *outcomes*.

Federal Poverty Level (FPL)
A measure based on family income used to determine if a person or family is eligible for assistance through various federal programs. The FPL usually changes annually.

Health Insurance Portability and Accountability Act (HIPAA)
A federal law that required the creation of national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge.

IDEA
Please see *Individuals With Disabilities Education Act* or *Individuals With Disabilities Education Act (Part C)*.

IDHS
Please see *Illinois Department of Human Services*.

IEP
Please see *Individualized Education Program*.

IFSP
Please see *Individualized Family Service Plan (IFSP)*.

Illinois Department of Human Services
The state agency that has been designated as the lead agency for the Illinois Early Intervention Program.

Illinois Early Intervention Program
A statewide, comprehensive, coordinated, interagency program that aids families who have infants and toddlers, birth to age 3, with or at risk for developmental delays in receiving resources and supports that assist them in maximizing their child's development.

Illinois State Board of Education
The state agency that oversees educational services for children ages 3 to 21 in Illinois.

Individualized Education Program (IEP)
An annually reviewed document required by the Individuals With Disabilities Education Improvement Act of 2004 for children in special education, ages 3 years and older. The IEP is created by parents, teachers, service providers, and school staff who design a plan of instruction, including annual goals, methods of evaluation, and the delivery of special education support and services.

Individualized Family Service Plan (IFSP)
A written early intervention plan developed and implemented by the child's parents and a multidisciplinary early intervention team. The IFSP takes into account the family's priorities, concerns, resources, and goals for their child. This information, along with input from additional evaluation and assessment, is formalized into a plan of services and support for the child and family in their natural environment.

Individuals With Disabilities Education Act (IDEA)
A federal law amended in 1997 and reauthorized in 2004 that amends the Education for All Handicapped Children Act of 1975. IDEA ensures services to children with disabilities throughout the nation and governs how states and public agencies provide these services. Part B focuses on services to preschoolers and school-age children with developmental disabilities. *(See also Individuals With Disabilities Education Act [Part C].)*

Individuals With Disabilities Education Act (Part C)
The portion of the federal law that focuses on services to infants and toddlers who are at risk for or have developmental delays. (See also *Individuals With Disabilities Education Act.*)

Informed Consent
The process by which families acknowledge in writing that (1) they have been fully informed of all information related to an early intervention activity, (2) they agree to carry out the activity for which consent is sought, and (3) they understand that the granting of consent is voluntary.

Intake Meeting
Following a *referral*, the process of service coordinators contacting the family and scheduling an appointment to discuss the Early Intervention Program, including services and fees, family rights, and initial screening. The intake appointment gives families an opportunity to ask their service coordinator questions and share information about their child and family.

Live Video Visits (teletherapy)
EI services that are provided using a virtual platform to connect with the parent/caregiver and child through the internet using video and audio features in real time. EI providers who deliver services this way are required to get training on live video visits.

Mediation
One option within the Illinois Early Intervention Program that parents can request when they have an individual child complaint regarding services and want to reach a consensus with another party. Mediation is voluntary and agreed to by the parties in dispute and is conducted by a qualified impartial mediator.

Natural Environments
Home and community settings in which children and families without disabilities would participate. The Individuals With Disabilities Education Improvement Act of 2004 Part C mandates that infants and toddlers with delays and disabilities be served in natural environments.

Outcomes
Statements of what family members want to see happen for their child and their family as a result of their participation in early intervention. Family and child outcomes can focus on any area of child development or family life that a family feels is related to its ability to enhance the child's development. Outcomes often include a real-life context.

Parent Liaison
An individual who is the parent or guardian of a child with with a delay or disability and who has obtained a parent liaison credential may provide direct support services to families. These individuals also may provide consultation to team members and other service providers regarding family perspectives.

Priorities
The things that are important to you and your family based on your unique values and culture. Priorities can help the IFSP team develop outcomes that are meaningful to you and your family.

Referral
Any action that guides children and families to the local CFC Office, which assists them in accessing available resources and/or information. Anyone who suspects that a young child has a developmental delay or is at risk for delay can make a referral by calling their local CFC Office.

Resources
Persons, agencies, materials, or other supports available to families that can be used to support their ability to care for their child or benefit their child's EI services.

Section 504 Plan
A Section 504 plan provides access to accommodations and related services for your child from the public school. Unlike an IEP, a Section 504 plan is not limited to students with certain types of disabilities.

Service Coordination
The activities carried out by the service coordinator to enable an eligible child and the child's family to receive authorized services within the Illinois EI program. These activities may include receiving referrals, ensuring procedural safeguards, protecting rights, documenting services, providing information about services and assisting in identifying goals.

Service Coordinator
An employee of the CFC office responsible for *service coordination* activities, including coordinating EI and non-EI services for families enrolled in the EI program.

Strategies
A set of actions that can be taken to help your child and family achieve a desired outcome. Strategies are usually based on how children learn throughout the course of everyday life at home, in the community, and in early care and education settings.

Transition
The organized process of helping children who have or are at risk for a developmental delay move between programs, including the EI program. Examples of transition include moving from the hospital to home or from EI services into a preschool program. The IFSP team is responsible for developing a written transition plan that details the necessary steps for a smooth transition out of the EI program.

APPENDIX C

Definitions of EI Services

Assistive technology
Any item that supports a child's ability to participate actively in the home, childcare program, or other community setting. The term does not include a medical device that is surgically implanted (e.g., a cochlear implant) or the optimization (e.g., mapping), maintenance, or replacement of that device. Examples include iPads, helmets, standers, exercise balls, picture boards, head pointers, specialized drinking cups, adapted spoons, computers, and augmentative and alternative communication (AAC) devices.

Audiology/aural rehabilitation
Services that may help prevent or address hearing loss, such as auditory training; aural rehabilitation; speech reading and listening devices; hearing tests and hearing aids for a child; orientation and training for listening devices; and other related services.

Developmental therapy/special instruction
A developmental therapist assesses the global development of a child by performing evaluations in five areas: cognitive, communication, physical, social and emotional, and adaptive. Developmental therapy targets these five areas to maximize the independence of the child and help achieve the family's outcomes. Examples include helping provide accommodations in the child's environment, recommending ways common household items can help achieve outcomes, and acting as a sounding board for the family's concerns.

Family training and support
These education and instruction services are primarily provided as a part of your visit with your service coordinator or EI provider. For families whose primary language spoken in the home is not English, this service includes interpretation and translation.

Health consultation
Health consultation is consultation between a licensed physician who has provided medical treatment to the child in the past year and members of the child's IFSP team regarding the impact of the child's health needs on service provision.

Interpretation and translation into other languages
Interpretation and translation services help families communicate with their team and ensure that families have materials in their primary language to support understanding. Examples include an interpreter attending meetings and translating documents.

Medical services (only for diagnostic or evaluation purposes)
Services provided by a physician to help diagnose or evaluate the child to determine the child's developmental status and need for early intervention services.

Nursing
Nursing care is meant to prevent health problems, restore or improve functioning, and promote the child's health and development. This may include providing medications and treatments prescribed by a physician during the child's early intervention services.

Nutrition
Nutrition services may include addressing the child's nutritional history and dietary intake, feeding skills and feeding problems, and food habits and preferences. Examples include

developing and monitoring a plan to address the child's nutrition needs. It can also include referrals to community resources.

Occupational therapy
Occupational therapists focus on the things we want and need to do in our daily lives. Occupational therapists use everyday life activities (routines) to promote health, well-being, and our ability to participate in the important activities in our lives. For infants and toddlers, this often means supporting play and other activities of daily living such as eating and dressing.

Physical therapy
A physical therapist can address the gross motor development of a child. Gross motor skills allow children to do tasks that involve large muscles (e.g., walking, crawling, standing, going up stairs). For infants and toddlers, this may include helping with positioning for daily routines, adapting toys for play, and expanding mobility options.

Psychological/counseling services
These services help improve the psychological functioning of the child and/or family. Examples include psychological and developmental tests for the child, counseling for the family, and parent training and education programs.

Service coordination
An active, ongoing process that assists and enables families to access services and assures a family's rights and procedural safeguards. Examples include coordinating and implementing evaluations and assessments; facilitating and helping to develop, review, and evaluate the IFSP; helping the family identify available service providers; coordinating and monitoring the delivery of services; informing families of advocacy services; coordinating with medical and health providers; and facilitating the transition to preschool services.

Sign language or cued language
Sign language can include American Sign Language, which is a natural language using hand gestures. Cued speech is a visual representation of another language while American Sign Language is its own language.

Social work
Social work can provide emotional support to families. Examples include a social worker identifying and coordinating community resources, parent education, counseling, and crisis intervention.

Speech-language pathology
Services to improve communication and/or language skills. Examples include a speech-language pathologist working with a child on saying words, articulation, stringing words together, and using an augmentative and alternative communication (AAC) device.

Transportation
Travel that enables a child to participate in early intervention services. An example is reimbursing parents for transporting their children to and from early intervention services.

Vision
Communication skills training, orientation and mobility training, visual training, and additional training to support visual motor abilities. Examples include vision therapy and visual training.

APPENDIX D

Sample Notes/Emails to CFC Offices

Make sure to include how and when you would like EI team members to respond (e.g., you can reach me via email at ___ or phone ____).

To Request Evaluation Results

Dear [SERVICE COORDINATOR],

We hope you are doing well. We are looking forward to our child's meeting on [DATE]. As noted by the principles of early intervention, we want to be equal partners in decision-making for our child. To do this, we need to be educated and fully informed about our child's progress and needs.

To this end, we are requesting to see the draft of the [EVALUATION REPORTS] three business days before the meeting. We understand that you and the IFSP team members are busy. We hope that by reviewing the materials before the meeting, we can hold an efficient meeting with all team members on [DATE].

Thanks for your help with this request.

[NAME]

To Request Change of Service Provider

Dear [SERVICE COORDINATOR],

I hope you are doing well. As you know, my son has [NAME] as his [TYPE OF PROVIDER]. He has been seeing [NAME] for the past [XX] months. Unfortunately, this provider is not a good fit for our family. We haven't seen the kind of progress we were expecting and feel a new provider may work better. Thus, I am requesting a new provider.

I look forward to talking with you about this and finding a provider who is a better match.

Thank you, [NAME]

To Request a New Service Coordinator

Dear [CFC MANAGER],

I hope you are doing well. As you know, our family has [NAME] as our service coordinator. [NAME] has been working with us for the past [XX] months. Unfortunately, it does not seem that this is a good fit for our family. Thus, I am requesting a new service coordinator for [CHILD'S NAME].

I look forward to talking with you about this and finding a service coordinator who is a better match for our family.

Thanks for your help with this request.

[NAME]

To Request a Change in Services

Dear [SERVICE COORDINATOR],

I hope you are doing well. I am writing about my child, [NAME]. As you know, [NAME] has been receiving [XX] minutes of speech therapy per week for the past [XX] months. As noted on his progress notes, he is not making progress. At home, I have not seen any change or movement toward his IFSP outcomes. I would like to request an IFSP team meeting to discuss a change to our current services.

I am available on the following dates for an IFSP meeting to discuss this with the team:

- [DATE]
- [DATE]
- [DATE]
- [DATE]

I look forward to discussing my concerns with the team and finding a way to move forward that enables [CHILD] to make meaningful progress.

Thank you, [NAME]

APPENDIX E

Resources for Families in Early Intervention

Illinois EI Partners

Early Intervention Central Billing Office (EI-CBO)
EI-CBO processes claims for the Illinois EI program. EI-CBO approves payments, handles monthly EI Medicaid claims, and provides data to help CFCs complete an initial verification of family insurance benefits. EI-CBO also maintains the family participation fee system, administers the collections process, and provides technical assistance to EI families and providers. It also administers the free service that bills insurance on behalf of EI providers. Learn more at https://eicbo.info/

Early Intervention Clearinghouse (EIC)
The Illinois Early Intervention Clearinghouse (EIC) is the statewide library for families and professionals working with young children. EIC can provide print and digital information on parenting, child development, early childhood education, special education, early intervention, specific disabilities and disorders, developmental delays, and other topics. Information can be provided in different formats (print, digital) and languages. The EIC also loans iPads and hotspots to families so they can participate in early intervention via live video visits. Learn more at https://eiclearinghouse.org

Early Intervention Monitoring Program
The purpose of this program is to ensure that state and federal regulations regarding the delivery of Illinois EI services are met by providing documentation support, investigat-ing complaints, conducting provider and CFC reviews, and ensuring compliance to policies. Learn more at: https://www.earlyinterventionmonitoring.org

Early Intervention Training Program (EITP)
EITP provides professional development, licensure/credit hours, and technical assistance for CFC personnel, EI providers, and other stakeholders. Its website includes information on cross-system collaboration efforts and early intervention system data. Learn more at https://eitp.education.illinois.edu/

Provider Connections
Provider Connections is the credentialing and enrollment office for early intervention providers working in Illinois. Its website includes important updates that are geared directly for EI providers and is the primary location for IDHS policy, procedure, and payment updates. Learn more at https://providerconnections.org/

Other Statewide Resources

Accommodations in Childcare Settings for Children With Disabilities
This resource provides you legally entitled accommodations for your child in childcare settings. Learn more at https://www.ada.gov/topics/child-care-centers/

The Arc of Illinois
The Arc offers resources and information, supports families in their individual advocacy efforts, and trains and educates people with disabilities, families, and professionals. It also provides funding for technology and compensation for families to attend conferences related to disability issues. Learn more at https://www.thearcofil.org/

Childcare Resource and Referral (CCR&R)
Your local CCR&R office can help you find childcare providers near you and see

whether you're eligible to receive assistance to pay for childcare. Learn more at https://www.inccrra.org/about/sdasearch

Division of Specialized Care for Children (DSCC)
Division of Specialized Care for Children (DSCC) can help eligible families access medical care and financial support for young children with certain chronic conditions. The Core Program works with a broader population of children with special healthcare needs and provides free care coordination. The Home Care Program provides care coordination to children with increased medical complexity who are medically fragile and technology dependent or who require in-home shift nursing. Learn more at https://dscc.uic.edu/

Early Childhood Technical Assistance Center
Provides you with data and information related to early childhood, including early intervention. Learn more at https://ectacenter.org/

Home Visiting
Home visitors work on improving parenting skills within the home. Illinois has several home visiting programs. To see if there is a home visiting program near you, visit https://igrowillinois.org/find-a-program/

Illinois Assistive Technology Project
The Illinois Assistive Technology Project conducts assistive technology evaluations, loans devices (for free) to families, and helps families find ways to pay for devices. Learn more at https://iltech.org/

Illinois Cares for Kids
Illinois Cares for Kids is the one place Illinois parents, grandparents, caretakers, teachers, and childcare providers can access all things related to early childhood in Illinois. Illinois Cares for Kids is funded by IDHS and administered by INCCRRA. Learn more at https://www.illinoiscaresforkids.org/

Illinois Early Childhood Asset Map (IECAM)
Provides early childhood data and maps in Illinois. Learn more at https://iecam.illinois.edu/

Illinois Early Learning Project (IEL)
Provides evidence-based information for young children in Illinois. Learn more at https://illinoisearlylearning.org/

Illinois Home and Community-Based Services Waiver Program
A waiver program provides services that let individuals remain in their homes or live in a community setting instead of an institution. A waiver program provides funding for your child to continue living at home with you with needed supports. Learn more at https://hfs.illinois.gov/medicalclients/hcbs.html

Illinois Respite Coalition
As the parent of a child with a disability or delay, you may be eligible to receive free childcare in your home. Learn more at http://www.illinoisrespitecoalition.org/

Parent Training and Information Centers (PTIs)
PTIs are federally funded centers designed to educate and empower parents about their special education rights (for children with disabilities and/or delays from birth to age 26). PTIs offer free training, resources, referrals, and individualized assistance. There are two PTIs in Illinois:

- Family Resource Center on Disabilities (FRCD) serves families in McHenry, Lake, Kane, DuPage, Cook, Will, Kendall, and Grundy counties (www.frcd.org)
- Family Matters serves all other counties in the state (https://www.fmptic.org/)

Protection and Advocacy Agency
A federally funded agency that provides free legal assistance to families and individuals with disabilities of all ages. Learn more at https://www.equipforequality.org/

APPENDIX F

Outcomes: Measuring the Success of EI

Family Outcomes

As part of your participation in early intervention, we will help you gain knowledge and skills in these three key areas:

- Knowing your rights
- Communicating your child's needs
- Taking appropriate action to meet your child's needs

Child Outcomes

It is important to know how your child is developing as a result of receiving early intervention services. You see your child in activities and settings that other team members don't. The three child outcomes are:

- Building positive social relationships
- Gaining and using knowledge and skills
- Taking appropriate actions to meet their needs

IFSP Functional Outcomes

Functional outcomes are the benefits or results you want for your child and family as a result of participating in early intervention. These outcomes are meaningful to your everyday life and are included in the individualized family services plan (IFSP) that you develop with your EI team.

You Play a Key Role in Your Child's Development

As a member of the EI team, your active participation is critical because you know your child best! How can you help?

- Observe your child when you are at home and in your neighborhood
- Share what you know with the other members of the EI team
- Ask your EI team if you have questions about your child
- Complete the Family Outcomes Survey

To learn more about child and family outcomes, visit https://eiclearinghouse.org/blogs/outcomes-types/

APPENDIX G

Notes From Our IFSP Meeting

I attended our IFSP meeting on _____

Others who attended:

Names	**Role on Team**

Important things I learned about my child at the IFSP meeting: _____

_____

_____

_____

_____

Important outcomes we identified for my family and child: _____

_____

_____

_____

_____

APPENDIX H

Principles and Practices of Natural Environments

1. Infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts.

2. All families, with the necessary supports and resources, can enhance their children's learning and development.

3. The primary role of a service provider in early intervention is to work with and support family members and caregivers in children's lives.

4. The early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child's and family members' preferences, learning styles, and cultural beliefs.

5. IFSP outcomes must be functional and based on children's and families' needs and family-identified priorities.

6. The family's priorities, needs, and interests are addressed most appropriately by a primary provider who represents and receives team and community support.

7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research, and relevant laws and regulations.

Source: Workgroup on Principles and Practices in Natural Environments (March 2008).

Mission and Key Principles for Providing Early Intervention Services in Natural Environments

APPENDIX I

Sample of an EI Progress Note

(Visit Summary, Daily Documentation)

Service provider: Sara Smith
Child: Ryan Jones
Caregiver(s): Mary Jones
EI #: 123123

Date	Minutes	Start Time	Location
3-17-21	60	8:30am	Home

Caregiver report: Mary shared that Ryan is more vocal and has been sitting up more by himself. She shared that he is putting more weight on his feet when he is walking. She said he usually tires by this time of day. The other day, Mary and Ryan were blowing bubbles and he attempted to say "bubbles."

We worked on the following outcomes with your child today

- **Books:** Ryan did great turning the pages. After his friends went outside, I tried to get him to move from laying to sitting. He put forth little effort to help me, even with me signing and saying "help." He eventually got up and helped turn more pages.
- **Crawling:** He crawled from the rug by the couch to the rug by the blocks. He did great staying up on his hands and knees. He also did great moving from crawling to sitting but seemed to do it to the left. He crawled several times, and it was not until the end that he went back to his army crawl.
- **Walking:** He was doing great with my hands under his arms, so I moved them to the top of his arms. By the time we got to the carpet by the couch, I was just holding his fingers/wrist. I was providing a lot of support, but less than with my hands under his arms.
- **Sound imitation:** He did imitate some sounds but seemed to do more vocalizing on his own than imitating today. When we were reading, I told him he needed to try before we turned the page, and typically he would at least try to imitate for a few seconds.

General observations: Ryan is doing GREAT crawling! He took a break at one point to go down on his elbows so he could clap for himself (PRICELESS)! I was so surprised not only how well he was doing but also how long he did it. He was able to crawl independently and get to sitting from lying down today. He also did great when given choices between "more" and "all done" with all the activities we did.

Things to work on between visits: Continue to encourage Ryan to crawl on his hands and knees. You can try tickling his knees if he is not sitting up straight. He did sit up several times when I tickled his knees.

Plan for next session: Continue to work on crawling and walking within natural routines.

Question's caregiver(s) has for next appointment
Mary asked about how much she should share about these sessions with her mother and sister, who sometimes take care of Ryan.

Next visit
March 31, 2024, 8:30 a.m.

Notes

Bureau of Early Intervention
823 E. Monroe St. • Springfield, Illinois 62701
https://www.dhs.state.il.us/page.aspx?item=30321