

The Maryland Infants and Toddlers Program

Physician's Guide

For Referring Children with Developmental Delays and Disabilities To Maryland's System of Early Intervention Services



The Maryland Infants and Toddlers Program is coordinated by State and local agencies and organizations. Maryland State Department of Education, Division of Special Education/Early Intervention Services is lead agency.

Through the Maryland Infants and Toddlers Program, young children with developmental disabilities may be eligible for early intervention—a statewide system of services and supports designed to enhance the potential for growth and development in children with developmental disabilities and the ability of families to meet the special needs of their children. A pediatrician, NICU doctor, family physician, or other health care provider is often a family's first link to early intervention. If you or the child's family has a concern about a child's development, please refer the child and family for early intervention.

Complete the ***Maryland Infants and Toddlers Referral and Feedback Form*** on page 2, then phone or fax the referral to the local Infants and Toddlers Program in the jurisdiction where the child and family live.

Allegany County	(PH) 301-689-0466	(Fax) 301-689-3834
Anne Arundel County	(PH) 410-222-6911	(Fax) 410-222-6916
Baltimore City	(PH) 410-396-1666	(Fax) 410-547-8292
Baltimore County	(PH) 410-887-2169	(Fax) 410-339-3946
Calvert County	(PH) 410-535-7380	(Fax) 410-535-7383
Caroline County	(PH) 410-479-3246	(Fax) 410-479-0108
Carroll County	(PH) 410-876-4437, x277	(Fax) 410-479-0108
Cecil County	(PH) 410-996-5444	(Fax) 410-996-5454
Charles County	(PH) 301-609-6808	(Fax) 301-609-6691
Dorchester County	(PH) 410-221-1111, x1023	(Fax) 410-221-5215
Frederick County	(PH) 301-600-1612	(Fax) 301-600-3280
Garrett County	(PH) 301-334-1189	(Fax) 301-334-1893
Harford County	(PH) 410-638-3823	(Fax) 410-638-3825
Howard County	(PH) 410-313-7017	(Fax) 410-313-7103
Kent County	(PH) 410-778-7919	(Fax) 410-778-6193
Montgomery County	(PH) 240-777-3997	(Fax) 240-777-3132
Prince George's County	(PH) 301-265-8415	(Fax) 301-883-3907
Queen Anne's County	(PH) 410-758-0720, x4456	(Fax) 410-827-4548
Somerset County	(PH) 410-651-1485	(Fax) 410-651-2931
St. Mary's County	(PH) 301-475-4393	(Fax) 301-475-4350
Talbot County	(PH) 410-820-0319	(Fax) 410-822-9508
Washington County	(PH) 301-766-8217	(Fax) 301-791-6716
Wicomico County	(PH) 410-677-5250	(Fax) 410-677-5817
Worcester County	(PH) 410-632-5033	(Fax) 410-632-3867

If you suspect developmental delay or atypical development in a child age birth to 3 years, (see page 4 for examples of atypical development), or if the child has a high probability medical condition, refer the child to the Maryland Infants and Toddlers Program for early intervention services.

High probability medical conditions that necessitate referral include, but are not limited to:

- AIDS
- Birth weight <1,200 grams
- Chronic Lung Disease (CLD)
- Congenital Infection—Symptomatic
- Congenital Malformation—Severe
- Encephalopathy—Severe
- Epilepsy—Severe
- Fetal Alcohol Syndrome
- Hearing Impairment (Bilateral or Unilateral)
- Inborn Error of Metabolism
- Intraventricular Hemorrhage (IVH) Grades III/IV
- Lead Poisoning—Elevated Blood Lead Level $\geq 20 \mu\text{g/dL}$
- Necrotizing Enterocolitis (NEC)—Surgical
- Neonatal Abstinence Syndrome
- Neurodegenerative Disorder
- Periventricular Leukomalacia (PVL)
- Visual Impairment

Be the link—make the referral.

The earlier, the better.

Maryland Infants and Toddlers Program Referral and Feedback Form

SECTION 1 – To be completed by Physician/Health Care Provider/Referring Agency

Please complete this form for each child you refer for early intervention. Diagnosis of a specific condition or disorder is not necessary for referral.

Parent/Child Contact Information:

Child Name: _____
Date of Birth: _____/_____/_____ Child Age in Months: _____ Gender: M / F
Home Address: _____
City: _____ State: _____ Zip Code: _____
Parent/Guardian: _____ Relationship to Child: _____
Primary Language: _____ Home Phone: _____ Other Phone: _____

Reason(s) for Referral to Early Intervention: *Please check all that apply.*

- Identified condition or diagnosis (e.g., spina bifida, Down syndrome): _____
- Suspected developmental delay or concern (Please circle areas of concern):
Motor/Physical Cognitive Social/Emotional Speech/Language Behavior Other: _____
- Failed Standardized Developmental Screening Tool (Please indicate screen used and attach screen results):
 Ages and Stages PEDS Other: _____
- At Risk/High Probability Factor (Describe): _____
- Other (Describe): _____

Referral Source Contact Information:

Person Making Referral: _____ Date of Referral: _____/_____/_____
Address: _____ City/State: _____ Zip: _____
Office Phone: _____ Office Fax: _____ E-mail _____

SECTION 2 – To be completed by the Parent/Guardian

Parent/Guardian Consent to Release Information:

I, _____ (print name of parent or guardian), give my permission for my pediatric health care provider (listed above) and the Maryland Infants and Toddlers Program to share and communicate any and all pertinent information regarding my child (please print child's name): _____.

Parent/Guardian Signature: _____ **Date:** _____/_____/_____

SECTION 3 – To be completed by Local Early Intervention System (local Infants and Toddlers Program) and returned to the Referral Source (e.g., physician)

Date Referral Received: _____/_____/_____ Attempts to Contact Unsuccessful:
Name of Assigned Service Coordinator: _____
Office Phone: _____ Office Fax: _____ E-mail: _____

Eligible for Early Intervention Services? Yes No

Initial Results of IFSP, (Attach Part II, Section A of IFSP):

Areas of Development to be Addressed:

- Cognitive Expressive Language Receptive Language Social-Emotional
- Adaptive/Self-Help Gross Motor Fine Motor

Initial Services to be Provided:

- Special Instruction Speech/Language Therapy Occupational Therapy Physical Therapy
- _____ _____

As the central figure in a child's medical home, you can be the link between families and the early intervention process.



The Physician's Role in Early Intervention

Early identification is critical.

"Early identification of developmental disorders is critical to the well-being of children and their families. It is an integral function of the primary care medical home and an appropriate responsibility of all pediatric health care professionals... children who have positive screening results for developmental problems should be referred to early developmental intervention and early childhood services and scheduled for earlier return visits to increase developmental surveillance."

-Council on Children with Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee and Medical Home Initiatives for Children With Special Needs Project Advisory Committee; PEDIATRICS Vol. 118 No. 1 July 2006.

Link Families to Early Intervention.

As a primary health care provider and a central figure in a child's medical home, you are often a family's first link to early intervention services. Parents may bring a developmental concern to your attention or you may identify a concern as part of a routine visit or developmental screening. You can help families engage in the early intervention process in five simple ways.

1. **Screen** infants and toddlers for developmental delay, atypical development, and high probability medical conditions.
2. **Refer** infants and toddlers ages birth to 3 to their local Infants and Toddlers Program as soon as you or the family becomes concerned about the child's development. When making a referral, provide as many details as possible about the child's developmental and health status, and include essential information requested on the **Maryland Infants and Toddlers Referral and Feedback Form** (page 2). This information will help the local Infants and Toddlers Program prepare for an initial evaluation of the child, and develop an Individualized Family Service Plan (IFSP) if the child is determined eligible.
3. **Arrange** for appropriate medical etiologic diagnostic evaluations and share the findings with the child's family. With the parent's permission, also share the findings with the local Infants and Toddlers Program so that relevant information can be shared with early intervention service providers and the child's IFSP can be modified, if needed.
4. **Review** the child's initial and annual assessment results and routinely speak with the family about the child's progress towards meeting goals addressed on the IFSP. With the parent's permission, the local Infants and Toddlers Program will provide you with initial and annual assessment results, as well as ongoing information about the child's early intervention services.
5. **Provide** medical updates, offer recommendations, and share your concerns about the child's development with the local Infants and Toddlers Program staff. As a vital member of the child's early intervention team, your input is extremely valuable.

Together, physicians and early intervention personnel can help parents make a difference in the lives of their children with disabilities.



After The Physician Makes the Referral

Eligibility is Determined.

After you phone or fax referral information to the appropriate number, the local Infants and Toddlers Program contacts the family to describe the program. If the family consents, a multidisciplinary eligibility evaluation is scheduled to determine whether the child is eligible for early intervention. See side bar at right for eligibility criteria. A multidisciplinary eligibility evaluation includes at least two professionals from different disciplines. As the child's primary care physician, you can be one of those professionals. The child's adaptive, cognitive, language, motor, and social-emotional development are assessed as part of this process, as are the child's hearing, vision, and general health status.

Individualized Family Service Plans Are Developed.

If the child is determined eligible for early intervention, the local Infants and Toddlers Program develops an Individualized Family Service Plan (IFSP) with the family, within 45 days of your referral. The IFSP is the working document that identifies services and supports (including frequency and duration) to meet specific early intervention outcomes for the child, based on the unique needs of the child and family. In most cases, early intervention services listed on the IFSP begin within 30 days of the date of the parent's signature on the plan. The IFSP is reviewed on an ongoing basis and modifications are made as appropriate. The IFSP is re-written annually, or more often if necessary.

The Child Receives Early Intervention Services Until Age 3 (if needed).

Children who are eligible for early intervention due to a $\geq 25\%$ delay and/or atypical development will continue to receive early intervention services until the delay or atypical development resolves. If the concerns are resolved, the local Infants and Toddlers Program will help the child and family transition into other community resources as appropriate. If concerns persist to age 3 (the age at which early intervention services end), the local Infants and Toddlers Program will transition the child and family to community and/or school services under an Individualized Education Program (IEP). On the other hand, children who are eligible for early intervention due to a high probability condition are eligible to participate in early intervention until age 3; at which time the local program will transition the child and family to community and/or school resources under an IEP.

Eligibility Criteria:

Children, ages birth to 3 years, may be eligible if they meet one of the following criteria:

1. $\geq 25\%$ delay in one or more of the following domains:
 - adaptive
 - language (expressive or receptive)
 - motor (fine or gross)
 - social-emotional
 - cognitive
2. Diagnosed condition that has a high probability of resulting in delayed or atypical development
3. Atypical development* in one or more of the above domains

*Atypical development refers to quality of performance. A child may demonstrate skills that are age appropriate but that are of atypical quality.

Examples of Atypical Development:

-*Adaptive*: refusal to take foods of certain texture

-*Language*: perseverative repetition of words

-*Motor*: hypertonicity and arching that results in early rolling (gross motor) or tremulousness and overshooting when reaching for objects (fine motor)

-*Social-emotional*: decreased initiation of communication for social purposes

-*Cognitive*: repetitive and stereotyped patterns of play with objects

Research shows that interventions are most effective when they are family-centered and goals are individualized.



More about Early Intervention in Maryland

The **Maryland Infants and Toddlers Program (MITP)** provides family-centered early intervention services and supports to help families enhance their children's developmental potential. In 2008, the MITP provided early intervention services to more than **13,800** children and their families through 24 local Infants and Toddlers Programs. The MITP provides early intervention services at no direct cost to families.

Research and best practices demonstrate that infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts. The MITP bases its early intervention practices on best available research and evidence-based practice, while adhering to relevant laws and regulations under Part C of the Individuals with Disabilities Education Act (IDEA).

Acknowledging the primary role of the family in the early intervention process, Maryland's early intervention system has evolved from a traditional child-centered "clinical model" to a family-centered developmental model where service providers work with the family in planning and providing services to help foster the development of their child. The family participates as a member of the Individualized Family Service Plan (IFSP) team that decides which services are best for that individual child and family. Outcomes are generated by the IFSP team based on the unique needs, interests, and resources of that child and family.

Since each family has its own aspiration for its child and family, individualized early intervention outcomes are likely to differ from one child to another despite the fact that children may have the same disability. Similarly, the frequency, duration, and types of services may differ for children who share the same disability. Factors such as severity of the disability, the child's age and temperament, and the family needs and resources, contribute to decisions regarding the type and amount of early intervention services provided.

For more information on Maryland's early intervention system and other early childhood initiatives, call 410-767-0261 or visit www.MDECGATEWAY.org.

Family-Centered Services

"Research demonstrates that interventions are most effective when they are family-centered; goals are individualized to meet the specific needs, interests, and resources of the children and families served; and strategies and activities target everyday childhood experiences."

-Shonkoff, JP and Phillips, DA (Eds.) (2000). From Neurons to Neighborhoods. The Science of Early Child Development. Washington, D.C.: National Academy Press.

The Maryland Infants and Toddlers Program provides family-centered services by:

- Treating families with dignity and respect.
- Providing choices to meet individual family priorities and concerns.
- Sharing all available information so that families can make informed decisions.
- Providing support that empowers families and enhances parental competence.

The **Maryland Infants and Toddlers Physician's Guide** is a publication of the Maryland Infants and Toddlers Program—a statewide program of services and supports coordinated by State and local agency and organizations. The Maryland State Department of Education, Division of Special Education/Early Intervention Services is lead agency.

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For more information call or write:

Program Director
Maryland Infants and Toddlers Program
Maryland State Department of Education
Division of Special Education/Early Intervention Services
Early Childhood Intervention and Education Branch
200 West Baltimore Street, 9th Floor
Baltimore, Maryland 21201
Phone: 410-767-0261
Toll Free: 1-800-535-0182
Fax: 410-333-8165

Or visit the Maryland Early Childhood Gateway:

www.mdecgateway.org

The Maryland Early Childhood Gateway is an online resource for providers and families of young children with disabilities, birth through 5, developed and maintained through a partnership between the Maryland State Department of Education, Division of Special Education/Early Intervention Services and the Johns Hopkins University Center for Technology in Education.



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