Educating our Youngest Population: How Counties Are Responding to E.I. and Special Education Pre-K Services During COVID-19
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Early Intervention Program
Services and Transition

July 28, 2020
Early Intervention Program (EIP)
Early Intervention Services and Transition from Early Intervention During COVID-19

Early Intervention Program (EIP) Background
Early Intervention Program (Part C of the Individuals with Disabilities Education Act (IDEA))
EIP Guidance During COVID-19
Public Health Law
Transition Requirements
Transition to Preschool Special Education Programs and Services (Part B of IDEA)
Background – Early Intervention Program

• New York State’s Early Intervention Program (EIP) is for infants and toddlers with developmental disabilities and their families
• Part C of federal Individuals with Disabilities Education Act (IDEA)
• Title II-A of Article 25 of PHL – Implemented July 1, 1993
• Department of Health is Lead Agency responsible for administration and oversight
• All fifty-seven counties and New York City have a designated Early Intervention Official/public agency responsible for local administration
Early Intervention Program Steps
EIP Guidance During COVID-19
Background

From guidance issued in March and April 2020:

Telehealth/Virtual Early Intervention Visits Telehealth (virtual) visits are normally not reimbursable under the Early Intervention Program. However, during the declared state of emergency, reimbursement will be available for individual telehealth (virtual) early intervention services provided in accordance with the child’s Individualized Family Service Plan (IFSP), and for which there is a service authorization under the following circumstances:

• The family expresses a need for, and agrees to, use of virtual early intervention visits during the time of this declared emergency.
Background

• Prior to initiating telehealth services, the family must sign a consent for service to be delivered virtually. The family must understand that virtual services pursuant to their IFSP will be in place of, and not in addition to, their IFSP mandate. Signing the consent can take place via email (if the family has consented to use of email), or via US postal service or fax.
• Providers and families have the necessary platform to conduct virtual therapy services. The service must include video and audio components for the entire duration of the authorized visit. If the technology fails and the full authorized session is not delivered, it is not billable.
• Therapy services cannot exceed the visits included in the child’s IFSP.
• Virtual therapy services must be a minimum of 30 minutes in duration.
• Providers must maintain all required documentation of the therapy service and note that it was provided virtually. See additional documentation guidance below.
• Group services cannot be conducted virtually; however, the child’s IFSP may be amended to reflect individual services, if appropriate.
Bureau of Early Intervention
COVID-19 EI Guidance Documents

Guidance to EI Providers Regarding Novel Coronavirus (COVID-19) – Revised 04.01.2020
https://www.health.ny.gov/community/infants_children/early_intervention/docs/doh_covid19_eiproviders_04.01.20

Consent for the Use of Telehealth During Declared State of Emergency for COVID-19 – Revised 04.01.2020

Frequently Asked Questions Related to Virtual EI Visits During COVID-19 Declared State of Emergency (Questions 1-22) – Revised 04/01/2020

Frequently Asked Questions Related to Virtual EI Visits During COVID-19 Declared State of Emergency (Questions 22-37) – New 04.01.2020
Current Guidance on Teletherapy Services

Frequently Asked Questions Related to Virtual EI Visits During COVID-19 Declared State of Emergency (Questions 38-57) – Revised 06.29.2020


Reopening New York: Resuming in-Person Early Intervention Program Services


Update: Home and Community-Based Services Regarding COVID-19

Teletherapy Going Forward

From April 1, 2020 guidance:
When the declared state of emergency is no longer in place, there will be no reimbursement available for virtual early intervention services until formal guidance on the delivery of early intervention services via telehealth is issued.

Planning for the Future
• The Department, in collaboration with county EI partners and NYC EI, will study data and collect information from parents/families, providers of EI services and other stakeholders about their experiences with telehealth
• The EICC voted at its June 2020 meeting to add Teletherapy to an existing Task Force on EI Provider Workforce Capacity
Transition from the EIP
## EIP Exit Data: PY 2018-2019

<table>
<thead>
<tr>
<th>Exit Status</th>
<th>Count</th>
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<tbody>
<tr>
<td>Exit Before Age 3 – no longer eligible</td>
<td>2,671</td>
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<tr>
<td>Part B Eligible – Exiting Part C</td>
<td>9,754</td>
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<tr>
<td>Part B Eligible – Continuing in Part C</td>
<td>7,545</td>
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<tr>
<td>Not Eligible for Part B – Exit with referral to other programs</td>
<td>1,076</td>
</tr>
<tr>
<td>Not Eligible for Part B – Exit with no referral</td>
<td>1,273</td>
</tr>
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EIP Transition: Public Health Law

• Article 25, Title II-A of PHL – section 2541(8)(a) – Definition of eligible child – means an infant or toddler from birth through age two who has a disability; provided, however, that any child who has been determined to be eligible for program services under section 4410 of education law and turns three years of age on or before August 31st shall, if requested by the parent, be able to remain in EI until September 1 of that calendar year; or who turns three on/after September 1 may continue in EI until January 2 of the following calendar year if the parent requests this. Children receiving services pursuant to section 4410 of education law are not eligible to receive EI services.
Planning for Transition from the EIP
Individualized Family Service Plan (IFSP)

- Review of Transition Process
- Development of Transition Plan
- Discussion of Written Notification of Potential Eligibility and Parental Opt-out
- Discussion of Referral Process to CPSE
- Signature and Documentation

❖ The EI to 4410 calculator, on the State Education Department’s website, can help with planning the transition conference date: consider the child’s date of birth and “first eligible” date to determine dates by which other transition activities must occur.

Transition Plan

Early Intervention Program regulations at 10 NYCRR 69-4.11(a)(10)(xiii) discuss IFSP content related to transition and 10 NYCRR section 69-4.20 outlines requirements for transition planning.

For all children in EI, it is important to begin planning for transition as early as possible to ensure a successful transition for the child and family.

Team approach – parents, service coordinators, providers, public officials such as the early intervention official or designee (EIO or EIO/D) work together on the steps toward transition.
Transition Plan Requirements

A Transition Plan is:

- **Required** for EVERY child exiting the EIP
- **Required** to be part of the child’s IFSP
- **Required** to include transition steps and services
Written Notification of Potential Eligibility

• Discuss at IFSP meeting closest to the child’s 2\textsuperscript{nd} birthday

• And send at least 90 days prior to the child’s potential eligibility for preschool special education programs/services

• Parent afforded at least 30 calendar days to object to the written notification
Transition – Potentially Eligible for Part B

• States are required under the federal Individuals with Disabilities Act (IDEA) to have policies and procedures to ensure a smooth transition for children receiving services under Part C of IDEA (early intervention services) to Part B of IDEA (preschool special education program services), including notification procedures.

• Three steps (EI) – 1) Committee on Preschool Special Education (CPSE) is notified by the local EIP of a potentially eligible child; 2) a transition plan is in place for the child; and 3) child currently receiving EI services is referred, with parental consent, to the CPSE.
DOH and SED Guidance: COVID-19

Frequently Asked Questions Related to Virtual EI Visits During COVID-19 Declared State of Emergency (Questions 38-57) – Revised 06.29.2020:

• See FAQ #57 - transition guidance during the declared state of emergency for COVID-19

Toolkit for Committees on Preschool Special Education to continue Child Find responsibilities during the COVID-19 outbreak:
The New York State Education Department (NYSED) recognizes the unprecedented challenges that students, their families, and school communities are facing right now. School districts across the State are working tirelessly to provide continuity and support to address the special needs of students with disabilities including English Language Learners with disabilities. We greatly appreciate those efforts and encourage parent, educator, and administrators to continue working together to meet the special needs of these students.

Students with disabilities must be provided a free appropriate public education (FAPE) consistent with the need to protect their health and safety, as well as the health and safety of other students and school-related personnel. NYSED will allow school districts as much flexibility as federal and State laws and regulations allow in determining how FAPE is to be provided during the Coronavirus outbreak, consistent with the need to protect the health and safety of all students, educators, and administrators.

The following is a continuation and supplement to the questions and answers contained in the March 27, 2020 guidance (15-21) and April 27, 2020 guidance (25-06) on the provision of services to students with disabilities during the COVID-19 outbreak in New York State.

Planning for the Provision of Services for the 2020-21 School Year

Following school closures due to COVID-19, Committees on Special Education and Committees on Preschool Special Education (CoSPES) and Committees on Preschool Special Education (CoPSS) will need to consider newly identified needs when determining the appropriate special programs and services to be recommended for the 2020-21 school year. Committees may consider some or all of the following questions in their decision-making process. They may also need to develop and follow procedures to ensure that they do not lose or misplace records for IDEA and non-IDEA students.

(2) The Executive Order (EO) 202.37 was issued for the period of 6/5/20 to 6/30/20 but sunset orders must not begin until July 1st. For the purposes of this guidance, how does the EO impact July and August special education services?

The new guidance is applicable to the 2020-21 extended school year (ESY) special education programs and services which, pursuant to NYSED Education Law section 4405, are approved to operate during July and August for six weeks and funded for 20 days of service. It is anticipated that the EO will be extended to allow the entire duration of the 2020-21 ESY program.

The following is a continuation and supplement to the questions and answers contained in the March 27, 2020 guidance (15-21) and April 27, 2020 guidance (25-06) on the provision of services to students with disabilities during the COVID-19 outbreak in New York State.

The New York State Education Department recognizes the unprecedented challenges school districts face in ensuring students with disabilities receive a free appropriate public education (FAPE) during this extreme health and safety crisis. As Statewide School Closures due to the Coronavirus outbreak, the Department remains committed to providing ongoing, updated guidance to parents, teachers, and school district staff on the provision of special education and related services to students with disabilities. This memorandum is a supplement to the March 27, 2020 guidance on the Provision of Services to Students with Disabilities During Schoolwide School Closures Due to Novel Coronavirus (COVID-19) Outbreak in New York State, and is issued for information and assistance.

Download the full document from the NYSED website.
Preschool Supportive Health Service Program Guidance

http://www.oms.nysed.gov/medicaid/news_announcements/home.html
Preschool Special Education NYSED School Reopening Plans


Reopening Schools Guidance
Preschool Special Class and Special Class in an Integrated Setting Programs must follow the DOH Guidance applicable to Pre-K and, if the licensed by NYS OCFS or NYC DOHMH, the DOH Child Care Guidance (the stricter standard applies to the extent there is a conflict).


CPSE Considerations for Conducting Preschool Evaluations during COVID-19

A Toolkit for Committees on Preschool Special Education to continue Child Find responsibilities during the COVID-19 outbreak


July 2020
NYSAC Webinar
Educating our Youngest Population: How Counties are Responding to E.I. and Special Education Pre-K Services During COVID-19

Saratoga County Early Intervention Program Response
Kerry White, EIM
July 28, 2020
Key Areas

- Staffing (continuation of EI Administration)
- Suspension of face-to-face services
- Ongoing administration of EIP via telehealth
- Reinstatement of face-to-face services
- Complications/Unanswered Questions
- Lessons Learned/Next Steps
EI Administration Requirements and Program Staffing

• Active EI cases were ~400 in March
• >75% of staff pulled immediately to assist at Command Center and with virus related job duties
• No emergency plans in place for coverage of PHL and IDEA required EIP procedures and daily activities
• Lack of clarity regarding EI designation as essential or non-essential
• Frequent changes in work location and social distancing requirements
Suspension of Services

**EIO/EIM**
- Notification to Director of BEI
- Written notification to families, service providers, and community partners
- Referrals to EIP and Child Find
- Work from home plan
  - change regular procedures to electronic format
  - train and assist SCs in electronic processes
- Documentation of missed timelines

**Service Coordinators**
- Phone notification to all active families
- Amendments to IFSPs
- Status of individual CPSE transition processes
- Documentation of missed timelines in paper charts and NYEIS
## Telehealth Approval

### EIO/EIM
- Policy and procedure guidance to service providers and families
- Communication with BEI Technical Assistance unit
- NYEIS data corrections/changes
- Link service providers to training and provide guidance in implementation of telehealth methods
- Assist in access to devices for telehealth
- Data collection regarding telehealth use and effectiveness
- Collaborate in creation of CPSE procedures and plans

### Service Coordinators
- Data entry, amend/extend IFSPs
- Assist service providers and families with telehealth consent forms; scanning and attachment in NYEIS
- Work with service providers, families and school districts to ensure children maintain eligibility for services past 3rd birthdays
- Continue to conduct initial home visits and IFSP meetings by phone or video conference
- Observe telehealth MDEs via video conference
Reinstatement of Face-to-Face Services

EIO/EIM

- Distribute policy and procedure guidance to service providers and families.
- Education in PPE and state health and safety recommendations to service providers and families.
- Written notification of LHD reopening guidelines to families, service providers and community partners.
- Amend local policies and procedures for health and safety specific to COVID-19
  - Assist service providers in updating their own health and safety policies and procedures.
  - Assist families, service providers and SCs in deciding whether or not a return to in-person care is applicable

Service Coordinators

- Timely data entry of IFSPs and evaluations
- Obtain signed agreement for health and safety protocol from parents/guardians. Notification to service providers.
- Assist families and service providers in working together to decide the most appropriate service model (if safe to return to in-home services)
- Assist service providers and families in working with school districts for children to maintain eligibility for services past 3rd birthdays
- Continue to conduct initial home visits, observations of MDEs, IFSP meetings and CPSE meetings by phone or video conference.
Complications/Unanswered Questions

- Staffing
- Limited electronic processes and procedures that meet HIPAA and FERPA compliance standards
- Lack of NYEIS reports/lists
- Provider reporting and hand counting of data and statistics
- Limited public guidance and acknowledgement of birth to five population needs related to closures and virus effects on age group.
- No emergency plans for birth to five population, or for children with special needs in general
- Unknown categorization of EI within state and federal planning
  - Medical or educational services?
  - Continued questions of county vs state roles in service provider oversight/supervision
Lessons Learned/Next Steps

- EI is defined as essential
- Impression that “There are no emergencies in EI” changed.
  - Complete stoppage of services would be violation of Federal IDEA and FAPE
- Advantages of telehealth/counties should advocate that it continue as service model
- Evidence of data collection, administrative and local programmatic needs to request as part of new EI-HUB
- Future emergency planning at LHDs should include specifics for birth to five age group, and should have clauses specific to children and youth with special needs.