This handbook for parents and professionals describes Alabama's early intervention and preschool educational system for young children with disabilities. A list of common special education acronyms precedes the guide's four main sections. Section 1, on the state's early intervention system for infants and toddlers, includes the program's purposes and underlying principles, the definition of "infants and toddlers with disabilities," eligibility information, the areas of child development, and the four steps for identification or referral, evaluation and assessment, development of the Individualized Family Service Plan, and delivery of early intervention services. Section 2 addresses transition from early intervention to preschool special education including who is involved in transition activities, pre-transition activities and the eight steps of the transition process from referral through after-transition activities. Section 3, on preschool special education, considers who pays for special education services, the rights of children and parents, eligibility, and Alabama's definition of "developmental delay." The final section lists resources including local Alabama special education offices, early intervention system offices, toll free numbers of national organizations, and frequently called numbers of Alabama resources. Appended are a chart describing the Special Education Process Initial Referral through IEP Implementation and a chart comparing and contrasting Part C (Early Intervention) and Part B (Special Education). (DB)
Services For
Alabama's
Children
With Disabilities,
Ages Birth through 5

2000 (Revised)

Alabama State Department of Education
Division of Instructional Services
Special Education Services
Ed Richardson, State Superintendent of Education

Alabama Department of Rehabilitation Services
Division of Early Intervention
Steve Shivers, Commissioner

Bulletin 2000, No. 47
This handbook is for parents and professionals who want to learn more about early intervention (services for infants and toddlers, ages birth to 3), transition (moving from early intervention to preschool special education), preschool special education services (special education for children ages 3 through 5), and resources for more information. The sections of this book may be used together or alone. When used together, they provide an overview of the system for young children with disabilities, ages birth through 5 years.

This handbook has four sections:

Section 1: Early Intervention

Section 2: Transition from Early Intervention to Preschool Special Education

Section 3: Preschool Special Education

Section 4: Resources
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Alabama's Early Intervention System (AEIS) provides coordinated services from many different state agencies and community-based service providers. These services are for infants and toddlers, from birth to 3 years, who are eligible because of special needs (developmental delays or diagnosed disabilities). The Alabama Department of Rehabilitation Services, Division of Early Intervention, coordinates Alabama's Early Intervention System.

Early Intervention:

- May facilitate the development of infants and toddlers with developmental delays and/or disabilities.
- May assist families in meeting the needs of their children.
- May reduce the need for special education and other services after these children reach school age.
- May improve the chances that these children will live and work independently in their community.

Early intervention services help meet the needs of the infant and toddler in all areas of development and also help families. Early intervention is based on the following principles:

- Families and professionals work in partnership in the planning and delivery of services.
- Early intervention services are coordinated across agencies and providers.
- Services are coordinated at the community level through District Coordinating Councils made up of families and community members involved in early intervention services.
- Services for the child and family are provided in the child's natural environment (to the maximum extent appropriate).
ALABAMA’S DEFINITION
FOR INFANTS AND TODDLERS WITH DISABILITIES

“Infants and toddlers with disabilities” refers to individuals, ages birth to 3, who need early intervention services as identified by a multidisciplinary evaluation team and reflected in the Individualized Family Service Plan (IFSP) because (1) they are experiencing developmental delays equal to or greater than 25% as measured by appropriate diagnostic instruments and procedures in one or more of the following areas: cognitive development, physical development (to include vision and hearing), communication development and social or emotional development and adaptive skills; or (2) they have a diagnosed physical or mental condition which has a high probability of resulting in developmental delay.

WHO IS ELIGIBLE FOR EARLY INTERVENTION?

Infants and toddlers, ages birth to 3, who:

• Exhibit a 25% developmental delay in one or more areas of development.

    or

• Have a diagnosed physical or mental condition which has a high probability of resulting in developmental delay.

WHAT IS CHILD DEVELOPMENT AND WHAT ARE THE AREAS OF DEVELOPMENT?

Child development is the natural process of growth for a child. Development proceeds at varying rates from child to child as well as within different areas of development. Areas of development are closely related and development in one area influences and is influenced by development in other areas:

• **Cognitive Development** means how the infant or toddler thinks and solves problems.

• **Physical Development** means how the infant or toddler grasps, moves, sits, crawls, walks, sees, and hears.

• **Communication Development** means how the infant or toddler communicates with gestures, sounds, and words and understands the spoken word.
• *Social and Emotional Development* means how the infant or toddler acts with other children and adults.

• *Adaptive Development* means how the infant or toddler assists in personal skill areas like eating, dressing, bathing, and brushing teeth.

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**WHAT ARE THE STEPS IN ALABAMA’S EARLY INTERVENTION SYSTEM?**

1. The IDENTIFICATION OR REFERRAL of the infant or toddler.
2. The process of EVALUATION AND ASSESSMENT.
3. Development of the INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP).
4. The delivery of EARLY INTERVENTION SERVICES.

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**STEP 1: IDENTIFICATION OR REFERRAL**

What is Child Find?

**Child Find** is a statewide effort to locate, identify, and evaluate individuals from birth to age 21 who have disabilities or who are suspected of having disabilities.

Where does Child Find begin?

**Early intervention services and special education services for children with disabilities are important!** Parents, doctors, and service providers help identify children who need services. Everyone needs to know what to do when they know of a child who might need services. **Child Find can help.** A referral for children ages birth to 3 must be acted upon within two working days of receipt of referral information.

How does Child Find work?

The Alabama Department of Rehabilitation Services, Division of Early Intervention, and the Alabama State Department of Education, Division of
Instructional Services, Special Education Services, work closely with community service providers and LEAs to locate individuals with disabilities.

For more information about services, contact your Local Education Agency or District Coordinating Council. Call CHILD FIND (800) 543-3098 (for children ages birth to 3 years) or (334) 242-8114 (for children ages 3 to 21 years).

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**STEP 2: EVALUATION AND ASSESSMENT**

The second step in the early intervention system is evaluation and assessment. Evaluation and assessment help determine if the infant or toddler is eligible to receive early intervention services. **Parental permission to evaluate must be obtained prior to evaluation.**

- **Evaluation**—The procedures that qualified personnel use to determine if an infant or toddler is eligible. This includes evaluating the child in each of the five developmental areas. It also includes talking with the parents about their child to identify their priorities, concerns, and what they feel their child needs.

- **Assessment**—The ongoing procedures used during the time the child is eligible to identify needs, strengths, and specific early intervention services that are needed.

**Evaluation and assessment include:**

- An evaluation of the infant or toddler by at least two qualified people who make up the evaluation team.

- A review of all important records.

- An evaluation of the child in each area of development:
  - Cognitive development.
  - Physical development, including vision and hearing.
  - Communication development.
  - Adaptive development.
  - Social or emotional development.
• Any information the family has to share about the child.

• The input of others who may know the child (e.g., doctor, caregiver, nurse, therapist).

The evaluation process must be completed within 45 days from referral. Once all the information from the evaluation is reviewed, the evaluation team determines whether the child is eligible or ineligible for early intervention services.

STEP 3: THE INDIVIDUALIZED FAMILY SERVICE PLAN

What is the IFSP?

The third step in the early intervention system is the development of an Individualized Family Service Plan (IFSP) for all eligible infants and toddlers. An IFSP is written within 45 days after the referral. The written plan is developed with the family. The information gathered during the evaluation process is used to identify all of the services the child needs and services the family needs to enhance the development of their child. The IFSP identifies and describes the services that are going to be provided and who will provide the services. The IFSP also identifies the service coordinator who will assist families throughout the child’s eligibility.

All eligible infants and toddlers must have an IFSP developed by the family, service coordinator, service providers, and members of the team who evaluate the child. The IFSP must include the following:

• A summary of the infant’s or toddler’s present functioning in physical development (including vision and hearing), cognitive development (thinking), communication development, social or emotional development (relating to others), and adaptive skills (eating, drinking, dressing).

• A listing of the family’s resources and supports.

• A listing of what the family’s needs, priorities, and concerns are for the child to help with his/her development, if the family chooses to include this.

• A list of the goals (outcomes) for the child and how each goal (outcome) will be met.

• A list of the early intervention services needed to accomplish the specific goals (outcomes) for the infant or toddler which
includes when services will be provided, where they will be provided, who will provide the services, how long the services will be provided, and how the services will be financed.

- The natural environment(s), including the home and community setting (e.g., home, child care center), where early intervention services will be provided.

- When the services begin and end.

- The name of the service coordinator who will work with the family to ensure the services are provided and coordinated.

- The plan for transition (required at 30 months) when the child turns 3 years old or exits early intervention.

### STEP 4: EARLY INTERVENTION SERVICES

**What are Early Intervention Services?**

Early intervention services help meet the developmental needs of the infant or toddler and the family. Needed services are identified during evaluation and assessment and agreed upon at the IFSP meeting. The service coordinator helps the family coordinate the services from all agencies and providers of services and assists the family through transition.

**Early Intervention Services include:**

- Assistive technology.
- Audiology.
- Family training, counseling, and home visits.
- Health services.
- Medical services (only for diagnostic or evaluation purposes).
- Nursing.
- Nutrition.
- Occupational therapy.
- Physical therapy.
- Psychological services.
- Service coordination.
- Social work services.
- Special instruction.
- Speech and language pathology.
- Transportation and related costs.
- Vision services.
WHAT RIGHTS ARE AVAILABLE FOR INFANTS AND TODDLERS AND THEIR PARENTS?

- Informed consent—A parent must understand all information about early intervention and give voluntary written permission for services.

- Written prior notice—Service providers must give parents written notice before services are initiated, changed, or denied.

- Review of records—Parents can review their child's early intervention records.

- Confidentiality of records—Parents must give written consent before records can be shared.

- Mediation—This is an optional process to resolve disputes with the guidance of an impartial mediator.

- Impartial due process hearing—This procedure resolves disputes between parents and providers.

- Impartial resolution of complaints—This procedure is used when it is believed that a provider has violated a federal law or regulation.

If you have questions about early intervention or need additional information, contact:
Alabama Department of Rehabilitation Services
Division of Early Intervention
2129 E. South Blvd.
Montgomery, AL 36111-0586
(334) 613-2398
or
(800) 543-3098
TRANSITION FROM EARLY INTERVENTION TO PRESCHOOL SPECIAL EDUCATION

What is Transition?

Transition can occur at anytime there is a change from one service delivery system to another. An example of transition is when the infant comes home from the hospital, receives home-based services, then goes into child care. Transition also occurs when a child involved in Alabama’s Early Intervention System becomes 30 months old and prepares to move into the preschool special education program or other appropriate programs for 3-year-olds. Transition planning helps make the move smoother by looking at the current and future needs of the family, the child, the service the child is leaving, and the next service the child is entering. The law for early intervention and special education, P.L. 105-17, Individuals with Disabilities Education Act (IDEA) Amendments of 1997, Part B and Part C, support a “seamless” system of services for children from birth through age 5. The law requires that this should be a smooth activity, that services should continue throughout the transition period, and that there should be no interruption in services for the child.

TRANSITION FOR YOUNG CHILDREN FROM EARLY INTERVENTION TO PRESCHOOL

Transition as used in this document means the movement from services provided through early intervention to preschool special education and the movement from preschool special education services to school-aged programming. The process requires planning, implementation, and follow-up. The transition process includes activities to assist the family and child in moving from one service delivery system to another. A vital component of the transition process is the follow-up activities to determine the success of transition. The key to success is communication between all those involved.

Transition from early intervention to preschool must:

• Begin when the toddler is 30 months of age.

• Include the development of an Individualized Education Program (IEP) ready for implementation on the child’s third birthday.

• Provide preschool special education services through the LEA or through arrangements with other community-based programs.

• Include follow-up activities to ensure success of the process.
The LEA is responsible for the provision of special education and related services for all eligible children at the age of 3 years.

As previously stated, planning for this transition begins at least six months before the child’s third birthday. The child may remain in early intervention and continue being serviced through an IFSP until the third birthday. The transition plan included in the IFSP must state what will happen when the child becomes 3 years old.

**WHO IS INVOLVED IN TRANSITION ACTIVITIES?**

- *The child* who is at least 30 months old.

- *The family* who is the toddler’s parent(s) or primary caretaker(s). The family should be an active participant throughout all transition activities.

- *The service coordinator* who is the person from early intervention identified on the IFSP responsible for the transition activities.

- *The early intervention provider* who is the person(s) who has been providing early intervention services to the child and family.

- *The special education coordinator* who is the LEA representative responsible for coordination of the LEA’s special education program.

- *The LEA* which refers to identified personnel involved in the referral, evaluation, eligibility, and IEP process, and may include school psychologists and psychometrists, teachers, related service staff, and administrators.

**STEP 1: PRE-TRANSITION ACTIVITIES**

- The service coordinator reminds the family at least six months before the child turns age 3 (the child will be 30 months old) that their child will be moving from the early intervention system in approximately six months. The transition plan must be a part of the IFSP by the time the toddler reaches 30 months of age.

- The service coordinator works with the family to compile information which may be useful to the LEA. This information may be a portfolio of data such as videotapes, checklists, pictures, observation notes, journals, etc.
• The service coordinator collects information from the early intervention service provider(s) working with the child regarding current functioning. The early intervention provider should review and update the IFSP and complete a brief progress report, including any available assessment data and other information.

• The service coordinator provides a form for the family to sign giving permission to release information about the child to the LEA. The family should be informed that items like the IFSP, evaluations, reports, and records will be sent to the school to help in making decisions about the child's eligibility for special education.

• The service coordinator talks with the family about the goals for the child and the child's needs from the beginning of early intervention. The service coordinator provides the family with information about what to expect, where to go for help, and what can be done to help get the child and family ready for transition.

• The service coordinator contacts the LEA to determine who is responsible for receiving referrals. This will be the special education coordinator unless otherwise designated.

• The service coordinator notifies the LEA of potential referrals by providing name and date of birth. The LEA may request additional information such as the IFSP at this time.

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**STEP 2: REFERRAL ACTIVITIES**

• The service coordinator arranges for a meeting to be held not less than 90 days before the child turns age 3. The family, the service coordinator, other early intervention service providers, caregivers, and LEA personnel meet to review the child’s program options which will begin on the third birthday. Together, they establish a plan for transition activities.

• The referral to placement process begins with the date that the LEA receives a written referral and must be completed within sixty calendar days regardless of any scheduled interruptions in the scholastic year or the scheduled summer vacation. When a child currently receiving EI services is referred at 30 months, the LEA must determine eligibility and develop the IEP to be implemented by the child's third birthday. (Note: This may extend the timeline since the child cannot begin services from the LEA, Part B, Special Education until age 3.)
When a child who is older than 30 months is referred, the LEA must adhere to the timeline of 60 days to determine eligibility and 30 days from eligibility to complete the IEP process.

The LEA arranges and schedules a referral meeting where the IEP Team (which includes the parents) reviews the referral and determines if the child will be evaluated for special education services.

**STEP 3: EVALUATION ACTIVITIES**

- Parental permission must be received prior to any evaluation activities.

- The IEP Team reviews all the pertinent records and information, including previous evaluations and assessments, and considers any appropriate evaluation results and findings provided by the early intervention provider(s).

- The LEA conducts or arranges for the child to be evaluated if the IEP Team determines additional data are needed.

The purpose of evaluation is to:

- Determine if the child is eligible for special education and other related services.

- Determine the child’s strengths and needs so an appropriate IEP can be developed.

- Determine how the disability affects the child’s participation in age-appropriate activities.

**STEP 4: TIME LINES FOR EVALUATION**

- When children with disabilities are already enrolled in the AEIS, notification should be made 6 months prior to the child’s third birthday. (The child would be 30 months old.) This allows the LEA ample time to plan for potential students needing special education services.

- The LEA must complete the evaluation, determine eligibility for special education, and develop the IEP so that the child is ready to receive services on the third birthday. If the third birthday occurs during a
school break (for example, summer), the IEP Team must determine if extended school year services are needed.

- If the referral is made on a child who is older than 30 months, the LEA has 60 days to complete the evaluation and determine eligibility and 30 days from eligibility determination to complete the IEP process.

**STEP 5: ELIGIBILITY DETERMINATION ACTIVITIES**

- A team of qualified professionals, including the parents, determines eligibility for special education based on a variety of sources as outlined in the *Alabama Administrative Code*.
- The team must determine if a child has a disability and needs specially designed instruction.
- Services and placement may not be predetermined or limited based on the child's disability.
- The service coordinator assists the family in identifying and transitioning the child to other community resources if the child is not eligible for special education services.

**STEP 6: INDIVIDUALIZED EDUCATIONAL PROGRAM ACTIVITIES**

**What is the IEP?**

An IEP is a written plan, to be reviewed annually, that describes the special education and related services the child will receive. The IEP is developed by the IEP Team. This team develops the IEP through the review of all important records, including the results of any current evaluations and the IFSP. The IEP Team designs the program to meet the child's needs.

**The IEP must address at a minimum:**

- The present level of performance of the child, including how the disability affects the child's participation in appropriate activities.
- Measurable annual goals, including benchmarks related to meeting the child's needs, that result from the child's disability to enable the child to participate in appropriate activities.
- Special education and related services and supplementary aids and services to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel which will provide for the child to advance appropriately toward attaining the annual goal(s).

- Explanation of the extent, if any, to which the child will not participate with nondisabled children.

- Projected date for the beginning of the special education services and modifications and the anticipated frequency, location, and duration of those services and modifications.

- How the child's progress toward the annual goal(s) will be measured and how the child's parents will be regularly informed.

The special education coordinator or designated LEA representative arranges a meeting with the parents and the IEP Team within 30 days of eligibility determination and before the child's third birthday, develops a written IEP and discusses the services the child will receive. The IEP should be ready for implementation upon the child's third birthday to prevent interruption in services. There should be no cessation of services for the child who is referred from EI. Occasionally, a child who is 3 or who is approaching 3 is referred to an LEA without having been previously served in EI. The timeline of 60 days from referral to eligibility applies. In this case, a child may turn 3 before the completion of the evaluation process.

The service coordinator sends any other current records/materials not previously sent that might help in the child's new placement. Staff who will be working with the child should have these records/materials available to them.

The IEP Team identifies the professionals who are likely to be involved in the child's future placement. The parents might want to visit with and/or talk with:

- Teacher(s).
- Caregiver(s) from community child care or other community programs.
- Speech language pathologist.
- Occupational and/or physical therapist.
- Social worker/school counselor.
- Nurse.
- Principal or assistant principal.
- School psychologist or psychometrist.
IEP Team Members

- Parents of the child.
- Someone qualified to provide preschool services to nondisabled, preschool children.
- Special education teacher of the child or special education provider of the child.
- LEA representative who is qualified to provide, or supervise the provision of, specifically designed instruction; is knowledgeable about the general curriculum; and is knowledgeable about the availability of resources.
- Individual who can interpret instructional implications of evaluation results.
- Others at discretion of parent or LEA.

STEP 7: PLACEMENT IN APPROPRIATE LEAST RESTRICTIVE ENVIRONMENT

Placement in the appropriate least restrictive environment (LRE) means deciding where the child will receive special education services. Children should be educated in a setting that allows for opportunities to interact with non-disabled children to the greatest extent appropriate. A child's LRE is determined by the IEP Team. The LRE is the environment in which the child's individual needs can be met.

Because of the unique needs and characteristics of the preschool aged child, traditional approaches to special education for older children may be inappropriate. Effective special education programs for preschool children can be provided in many settings. When determining the settings in which special education can be offered to the preschool child, “natural” environments in which the typical preschool child would be found must be considered. The natural environment for the child may be the most appropriate LRE for delivery of services.

When considering “natural” environments for preschoolers, child care centers, preschool programs, baby sitters' homes, and the child's home are generally where non-disabled preschool children are found. When preschool aged children with disabilities begin interacting with non-disabled children at an early age, they have opportunities to learn appropriate social skills from their peers and to develop friendships with them. These skills are very important at an early age and carry over through the life of the child.
A child with a disability cannot be removed from his age-appropriate environment solely because of needed modifications.

All possibilities must be considered when deciding on the child's least restrictive environment.

The laws for preschool children with disabilities do not lower the age for compulsory education to age 3. Rather, the intent of the legislation is to provide the special education and related services to eligible children in the LRE. A full school day in a school building may not be appropriate for preschool children; young children learn best through play and interaction with age-appropriate peers and benefit from opportunities to do this.

**STEP 8: AFTER TRANSITION ACTIVITIES**

After the child begins receiving special education services, the parents, the service coordinator and the LEA personnel may decide on transition follow-up activities.

**WEEK 1**

The service coordinator may arrange to talk with the LEA personnel and parents at the end of the first week. A time for a weekly "check-up" phone call or visit may be arranged.

**WEEK 1-6**

The service coordinator may, if requested, arrange to call or visit the parents and the school to talk about any special needs that arise.

**WEEK 7**

The service coordinator may arrange to call and find out if there is still a need to stay in touch with the parents and the school personnel.

**WEEK 8-12**

The service coordinator, LEA, and parents complete transition activities.

Planning and following up with transition helps the child, family, LEA personnel, community providers, caregivers, and EI service providers communicate to make the transition as easy as possible.
PRESCHOOL SPECIAL EDUCATION

Preschool services are a part of the total special education program offered through LEAs. The laws—The Individuals With Disabilities Education Act (IDEA) Amendments of 1997 and Alabama Exceptional Child Act—require special education and related services for children with disabilities, ages 3 to 21, who have special needs.

Alabama's Preschool Special Education Services:

- Meet the unique challenge of providing preschool special education and related services to young children with disabilities.

- Provide services in a way that recognizes the importance of working with the family in this unique stage of development for the child.

- Provide special education and related services to eligible children beginning on their third birthday.

- Consider the full range of possible service delivery options able to meet the child’s needs which might include the school, child care centers or homes, Head Start, or other programs offered through the community.

WHO PAYS FOR SPECIAL EDUCATION SERVICES?

What is FAPE?

A free appropriate public education (FAPE) must be provided to all eligible children. Special education and related services are provided at no cost to the family if the child receives these services as part of his/her specially designed instruction.

The term “special education” means specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability, including instruction conducted in the classroom, in the home, in physical education, in hospitals and institutions, and in other settings.
WHAT RIGHTS ARE AVAILABLE FOR CHILDREN AND PARENTS?

The rights and procedural safeguards afforded the child and his/her family under IDEA address:
- Prior notice.
- Reevaluation.
- Consent.
- Independent educational evaluation.
- Mediation.
- Impartial due process hearing.
- Civil action.
- Status during proceedings.
- Award of attorney’s fees.
- Access to records.
- Fees for searching, retrieving, and copying records.
- Amendments of records at student’s request.
- Definitions.
- Child placed in private school by parents.
- Reimbursement of child placed in private school by parents.
- Limitation of reimbursement of child placed in private school by parents.

A copy of the Special Education Rights under IDEA is available through the LEA or Special Education Services.

If you have questions about the rights available to children and parents, call the Division of Instructional Services, Special Education Services Help Line, at:
(334) 242-8114
TDD (334) 242-8406
Alabama Relay Service 1-800-548-2546

WHO IS ELIGIBLE FOR PRESCHOOL SPECIAL EDUCATION?

Preschool children are eligible to receive services on their third birthday if they meet the eligibility requirements for any of the following:
- Developmental delay
- Hearing impairment
- Deaf/blindness
- Mental retardation
- Multiple disabilities
- Orthopedic impairment
- Other health impairment
- Emotional disturbance
- Speech/language impairment
- Visual impairment
- Specific learning disabilities
- Autism
- Traumatic brain injury
The most common category of disability used with preschool children is developmental delay.

**ALABAMA’S DEFINITION FOR DEVELOPMENTAL DELAY FOR CHILDREN THREE THROUGH FIVE YEARS OLD**

Children with developmental delay must have a significant delay in one or more of the following areas:

- Adaptive development.
- Cognitive development.
- Communication development.
- Social or emotional development.
- Physical development.
- Needs special education services.

A significant delay is defined as at least two standard deviations below the mean on a standardized, norm-referenced instrument or the scores on two or more developmental domains must be at least one and a half standard deviations below the mean on a standardized, norm-referenced instrument.

**TIME LINES**

A meeting to develop the IEP must be held within 30 days of determining the child’s eligibility. The IEP must be reviewed at least once a year and notification for this review must be given in writing to the parents, describing the time, place, and anticipated participants for the IEP meeting.
RESOURCES FOR YOUNG CHILDREN WITH DISABILITIES

The Alabama Department of Rehabilitation Services, Division of Early Intervention, has developed a computerized Central Resource Directory (CRD) of services in Alabama targeted to children ages birth through 5 with developmental delays and/or physical disabilities. As part of the requirements of a comprehensive early intervention system, this Central Resource Directory can be accessed through the Child Find toll-free number: 1-800-543-3098. This directory lists public and private resources for early intervention and preschool services, research and demonstration projects, professionals, and other groups providing assistance to these children and their families. The directory includes information on the nature and scope of services available, the addresses and telephone numbers for the programs or persons listed, and other pertinent information.

In addition to those resources listed in the Central Resource Directory, the following national, state, and local resources may be helpful to you when referring, selecting, applying for, and obtaining resources for young children with disabilities and their families. The current District Coordinating Council (DCC) contact information is provided by geographical areas/counties served. Please note that the DCC information may change periodically; therefore, you may want to call the Child Find number, 1-800-543-3098, to confirm your contact. A current listing of Alabama's LEAs also is provided, and contacts can be verified by calling Special Education Services at (334) 242-8114.

Various state organizations and agencies which usually can be found in local communities are listed along with the telephone number. Frequently called national toll-free numbers also are listed. Following the listing of resources, space is provided to write in the name and telephone number of your local contact.

Other names, addresses, and phone numbers may also be found in your local telephone directory.

To access Alabama's Central Resource Directory, call

1-800-543-3098
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<th>CITY</th>
<th>TELEPHONE</th>
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## Early Intervention System
### Alabama Department of Rehabilitation Services

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**STATE OFFICE**
Division of Early Intervention
2129 East South Boulevard • Montgomery, AL 36116-2455
(334) 281-8780 • 1-800-543-3098
FAX 334-613-3494
NATIONAL TOLL-FREE NUMBERS

AIDS
Hemophilia and AIDS/HIV Network for Dissemination of Information
1 (800) 424-2634 (V)

ALCOHOL AND OTHER DRUG ABUSE
National Institute on Drug Abuse Helpline
1 (800) 662-4357 (V)

ASSISTIVE TECHNOLOGY/DEVICES
Ablenet
1 (800) 322-0956

AT&T Accessible Communications
Product Center
1 (800) 233-1222 (V)
1 (800) 833-3232 (TT)

DISABILITY AWARENESS
Kids on the Block
1 (800) 368-5437

HOSPICE
Children's Hospice International
1 (800) 221-242-4453 (V/TT)

INFORMATION SERVICES
National Easter Seal Society
1 (800) 221-6827 (V)
(312) 726-4258 (TT)

National Information Clearinghouse for Infants with Disabilities and Life Threatening Conditions
1 (800) 922-9234, ext. 201 (V/TT)
1 (800) 922-1107, ext. 201 (V/TT, in SC)

BLINDNESS/VISUAL IMPAIRMENTS
Blind Children's Center
1 (800) 222-3566 (V)
1 (800) 222-3567 (V; in CA)

MENTAL HEALTH
National Clearinghouse on Family Support and Children's Mental Health
1 (800) 626-1696 (V)

MENTAL RETARDATION
The Arc
1 (800) 999-6673 (V/TT)

RARE SYNDROMES
National Organization for Rare Disorders
1 (800) 473-1727 (V)

RESPITE CARE
Access to Respite Care and Help (ARCH)
National Resource Center
1 (800) 487-2282 (V)

Lighthouse National Center for Vision and Child Development
1 (800) 334-5497 (V)
(212) 808-5544 (TT)

National Association of Parents of the Visually Impaired
1 (800) 562-6265 (V)

CANCER
Candlelighters Childhood Cancer Foundation
1 (800) 366-2223 (V)

CHILD ABUSE
Clearinghouse on Child Abuse and Neglect/Family Violence Information
1 (800) 394-3366 (V)

National Resource Center on Child Sexual Abuse
1 (800) 543-7006 (V)

COMMUNICATIONS DISORDERS
National Institute on Deafness and Other Communication Disorders Clearinghouse
1 (800) 241-1044 (V)
1 (800) 241-1055 (TT)

CRANIOFACIAL SYNDROMES
Children's Craniofacial Association
1 (800) 535-3643 (V)

DEAFNESS/HEARING IMPAIRMENTS
American Society for Crippled Children
1 (800) 942-2732 (V/TT)

MEDICAL/HEALTH DISORDERS
Shriners Hospital for Crippled Children
1 (800) 237-5055
1 (800) 282-9161 (V, in FL)

National Down Syndrome Society
1 (800) 221-4602 (V)

National Fragile X Foundation
1 (800) 688-8765 (V)

Spina Bifida Associations of America
1 (800) 621-3141 (V)

Sudden Infant Death Syndrome Alliance
1 (800) 221-7437 (V)

United Cerebral Palsy Associations
1 (800) 872-5827 (V/T/TT)

SUPPLEMENTAL SECURITY INCOME (SSI)
Social Security Administration
1 (800) 772-1213 (V)
1 (800) 325-0778 (TT)
1 (800) 392-0812 (TT; in MO)
RESOURCES IN ALABAMA
FREQUENTLY CALLED NUMBERS

Alabama Department of Education
Special Education Services ................................................................. (334) 242-8114
Alabama Department of Rehabilitation Services ......................... (334) 281-8780
Child Find .................................................................................. 1-800-543-3098
Early Intervention ................................................................. (334) 281-8780
ext.390
Children's Rehabilitation Services ...................................................... (334) 281-8780

Alabama Department of Human Resources ........................................ (334) 242-1160
Alabama Department of Insurance ..................................................... (334) 269-3550
Alabama Department of Mental Health/Mental Retardation .......... (334) 271-9207
Alabama Department of Public Health ................................................ (334) 242-5095
Alabama Disabilities Advocacy Program ........................................ 1-800-826-1675
Alabama Head Injury Foundation ....................................................... (334) 934-0844
Alabama Institute for Deaf and Blind .............................................. 1-800-362-1747
Alabama Medicaid Agency ............................................................. (334) 277-2710
Alabama Poison Center ................................................................. 1-800-462-0800

Alabama Relay Center
TDD Users ........................................................................... 1-800-548-2546
Hearing Persons ...................................................................... 1-800-548-2547

Alabama Special Olympics .............................................................. (334) 242-3383
Association for Retarded Citizens of Alabama ......................... (334) 270-5508
Camp ASCCA ........................................................................ (205) 825-9226
Children's Hospital of Alabama, Birmingham ......................... (205) 939-9100
Children's Medical Center, Mobile .............................................. (334) 342-3810
Children's Trust Fund ................................................................. (334) 242-5710
Civitan International Research Center, Birmingham ............... (205) 591-8910
Friends for Life ................................................................. (334) 272-8622
Head Start Training and Resource Specialist
Gadsden ................................................................. (256) 546-9497
Troy ................................................................. (334) 566-1712
Wetumpka ...........................................................(334) 567-7298

Monsky Developmental Clinic, Montgomery .............................. (334) 272-8622

Partners in Policy Making of Alabama (PIPA) ......................... 1-800-237-0665

Special Education Action Committee Inc. ................................. (334) 478-1208

University of Alabama at Birmingham, UAB Sparks Center for
Developmental and Learning Disabilities .............................. (205) 934-5471

IMPORTANT PHONE NUMBERS

My allied health professionals’ phone numbers are:

Audiologist: ________________________________

Occupational therapist: ________________________________

Physical therapist: ________________________________

Speech/language pathologist: ________________________________

Vision specialist: ________________________________

Specialist(s): ________________________________

My area Medicaid SOBRA SITE number is: ________________________________

My area Agency on Aging number is: ________________________________

My area camp for children/adults with disabilities number is: ________________________________

My local Ala. Coalition Against Hunger number is: ________________________________

My local Community Action Agency number is: ________________________________
My local Alabama Institute for Deaf and Blind Regional Office number is: ____________________________

Kinderprep class number is: ____________________________

Service Coordinator: ____________________________

Parent Infant Program: ____________________________

My local American Red Cross number is: ____________________________

My local Association for Retarded Citizens (ARC) number is: ____________________________

Local member chapter for the ARC: ____________________________

My local Child Abuse prevention/services number is: ____________________________

My local Child Care Resource Center number is: ____________________________

My local Child Care Center(s) number is: ____________________________

My local Children's Rehabilitation Service number is: ____________________________

My local county Department of Human Resources number is: ____________________________

Aid to Families with Dependent Children (AFDC): ____________________________

Child Abuse and Neglect: ____________________________

Child Support: ____________________________

Child Care information: ____________________________

Food Stamps: ____________________________

Foster Care: ____________________________

Medicaid information: ____________________________

Public assistance: ____________________________
My local/regional developmental evaluation center number is: ___________________________________

My local early intervention program(s) number is: _______________________________________

My local early intervention service coordinator number is: ________________________________

My local Easter Seals Society number is: _______________________________________________

My local Head Start number is: _______________________________________________________

My local county Health Department number is: _________________________________________

   EPSDT information: _______________________________________________________________

   Medicaid out station worker: _______________________________________________________

   Regional neonatal intensive care unit: _________________________________

   Regional perinatal clinic: _________________________________________________________

   Women, Infants & Children (WIC): _________________________________________________

My local home health number is: _____________________________________________________

My local hospital number is: _________________________________________________________

My Local Coordinating Council number is: _____________________________________________

   Regional Receiving Person: _______________________________________________________

My local organization for volunteer services number is: ________________________________

My Local School System number is: _________________________________________________

   Special Education Coordinator: ___________________________________________________

   Teacher: ______________________________________________________________________

My Medicaid District Office number is: _______________________________________________
My local/regional medical genetics program number is: _______________________

My local Mental Health/Mental Retardation office number is: _______________________

Community Mental Health center: _______________________

Local MR 310 Authorization: _______________________

Mental Retardation community program(s): _______________________

My local pediatrician(s) number is: _______________________

My local physician(s) number is: _______________________

My local special transportation system number is: _______________________

My local Social Security Administration (SSI) office number is: _______________________

My local United Cerebral Palsy number is: _______________________

My local United Way number is: _______________________

My local university or college number is: _______________________

Other important phone numbers are:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
**SPECIAL EDUCATION PROCESS**

*Initial Referral Through IEP Implementation*

**School Receives Referral**

- Provide parents *Notice of Proposed Meeting* regarding referral and a copy of the *Special Education Rights* for parents to sign. After provision of notice, the IEP Team convenes to review existing data and referral and determine the need for evaluation.

**If Yes**

- The *Alabama Administrative Code* requires minimum evaluations to determine initial eligibility. It is the responsibility of the IEP Team to determine if additional evaluations are needed. *Notice and Consent for Initial Evaluation* must be obtained from parents prior to conducting initial evaluations.

- Conduct initial evaluations.

- Provide parents *Notice of Proposed Meeting* regarding initial eligibility determination. If the IEP Team is making the eligibility decision, an IEP may be developed at this meeting if the child is eligible. Initial IEP development should be checked on the notice and a copy of the *Special Education Rights* should be provided to the parents.

- Convene IEP Team or eligibility team, including parents, to determine eligibility for special education. After eligibility determination, provide parents a copy of *Notice and Eligibility Decision Regarding Special Education Services* which includes the evaluation data.

- **If Eligible**

  - A meeting to develop the IEP must be conducted within 30 days from date of eligibility determination.

  - If IEP Team determined eligibility, IEP can be developed after completion of the eligibility report. Provide parents a copy of the IEP.

  - If the Eligibility Team, including the parents, determined eligibility, then provide parents *Notice of Proposed Meeting* to develop IEP and a copy of the *Special Education Rights*.

    - IEP Team develops IEP. Provide parents a copy of the IEP.

**If No**

- Provide parents *Notice of Education Agency's Intent Regarding Special Education Services and Special Education Rights*.

- **END**

**If Not Eligible**

- If Not Eligible

  - END

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*Notice and Consent for the Provision of Special Education Services* must be obtained from parents prior to the provision of special education services. Provision of special education services occurs immediately following the IEP meeting except when the meeting occurs during the summer or vacation period or when there are circumstances which require a short delay (e.g., working out transportation, finding a qualified service provider).
While there are many similarities between Early Intervention and Special Education, there are also some basic differences that families and professionals need to know.

**SIMILARITIES & DIFFERENCES**

<table>
<thead>
<tr>
<th>EARLY INTERVENTION, PART C, (Birth to Three)</th>
<th>PRESCHOOL SPECIAL EDUCATION, PART B, (Three through Five)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Part C refers to Early Intervention for eligible infants and toddlers, birth through 2 years of age, inclusive.</td>
<td>1. Part B refers to special education for children with disabilities, ages 3-21. Part B does not lower the age for compulsory education.</td>
</tr>
<tr>
<td>2. Part C is an entitlement, but is not mandated.</td>
<td>2. Part B mandates and assures all services are available through local education agencies.</td>
</tr>
<tr>
<td>3. In Part C there are no categories. An infant or toddler qualifies if he/she has a physical or mental condition with a high probability of resulting in developmental delay or if he/she has a 25% delay in one or more areas of physical development (including vision or hearing), cognitive development, adaptive skills, communication development, social, or emotional development.</td>
<td>3. Part B is based on precise and distinct categories of disabilities. The child must need special education and related services because the disability adversely affects his/her educational performance. A preschooler qualifies if he/she has a delay of at least 2.0 Standard Deviations below the mean in one area of development or at least 1.5 Standard Deviations below the mean in two or more of the five developmental areas or meets the eligibility criteria for one of the other 12 categories of disability.</td>
</tr>
<tr>
<td>4. All services are termed Early Intervention Services.</td>
<td>4. Services include special education and related services. Related services can only be given to support special education; they cannot be provided as stand-alone services.</td>
</tr>
<tr>
<td>5. Early Intervention services are developmental services and may include: Family training, counseling, and home visits Special instruction Speech and language pathology Audiology Occupational therapy Physical therapy Psychological services Service coordination Medical services for diagnostic or evaluation purposes</td>
<td>5. Related services are required to assist a child in benefiting from special education and may include: Audiology Counseling services Early identification and assessment Occupational therapy Physical therapy Parent counseling and training Psychological services</td>
</tr>
</tbody>
</table>
**SIMILARITIES & DIFFERENCES**

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<td>— Health services</td>
<td>— Recreation</td>
</tr>
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<td>— Vision services</td>
<td>— School health services</td>
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<tr>
<td>— Assistive technology</td>
<td>— Social work services</td>
</tr>
<tr>
<td>— Transportation and related costs</td>
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</tr>
<tr>
<td>— Nursing</td>
<td>— Speech pathology</td>
</tr>
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<td>— Nutrition</td>
<td>— Behavior management</td>
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<td>— Communication</td>
</tr>
<tr>
<td></td>
<td>— Medical services for diagnosis and evaluation</td>
</tr>
</tbody>
</table>

6. Child Find is a Part C requirement to identify, locate and evaluate infants and toddlers, birth to 3 and is conducted in cooperation with Special Education Services, the District Coordinating Council, District Service Coordinator, and Direct Service Providers.

7. Part C evaluation is the procedure used by two or more professionals (disciplines) to determine a child’s initial and continuing eligibility, including determination of the child’s status in the five developmental areas. Evaluation and assessment should include:
   A. Developmental, health, and medical history (including vision and hearing)
   B. An evaluation in each area of development
   C. At least one other assessment procedure
   D. An informed clinical opinion
   E. A voluntary family assessment

These evaluations may also be used by Part B as is appropriate.

8. Eligibility for Part C is determined by comparing the evaluation results to the state definition. Parents may choose whether or not they want their child to receive some or all of their early intervention services.

9. Part C requires an Individualized Family Service Plan (IFSP). IFSPs are reviewed at least every six months.

10. Family involvement is essential in the IFSP, and informed parental consent is necessary.

6. Child Find is also a Part B requirement to identify, locate, and evaluate children ages birth to 21. (The IEP Team determines which referrals are accepted for evaluation.)

7. Under Part B, children are administered a developmental assessment to cover adaptive/self-help development, cognitive development, communication development, social/emotional development, and motor development. If an area of disability other than developmentally delayed is suspected, assessments specific to identification of that area of disability are administered. Assessments used for Part C eligibility and programming may provide valuable information for preschool eligibility and programming.

8. Eligibility under Part B is determined by the IEP Team or a team of qualified individuals, including the parent.

9. Part B requires an Individualized Education Program (IEP). IEPs are reviewed at least annually.

10. Part B requires the opportunity for parent participation in the special education process (referral assessment, eligibility and IEP development).
## SIMILARITIES & DIFFERENCES

| **EARLY INTERVENTION, PART C,** *(Birth to Three)* | **PRESCHOOL SPECIAL EDUCATION,**
| **PART B, (Three through Five)* |
| --- | --- |
| 11. For Part C, a service coordinator who is responsible for coordinating all public and private early intervention services is designated on the IFSP. | 11. Under Part B, there is no Service Coordinator designated. |
| 12. Under Part C, transition procedures are included on the IFSP. | 12. An LEA representative participates in the meeting to discuss transition of a child who is age 30 months. This is to ensure that the IEP goals address activities which will facilitate transition. |
| 13. Part C allows for a system of fees for services if the state law allows. | 13. Under Part B, a free, appropriate public education (FAPE) must be available to all eligible preschoolers on their third birthday. |
| 15. Qualified personnel must meet the highest standard in the state and are defined by Part C as:  
  - Special educators  
  - Speech and language pathologists  
  - Occupational therapists  
  - Physical therapists  
  - Psychologists  
  - Social workers  
  - Nurses  
  - Nutritionists  
  - Audiologists  
  - Family therapists  
  - Orientation and mobility specialists  
  - Pediatricians  
  - Other physicians | 15. Under Part B, personnel standards are specified in the *Alabama Administrative Code* and include those certified or licensed. |
| 16. Part C requires a Comprehensive System of Personnel Development (CSPD). There is a CSPD Advisory group and a Part B staff member serves on the Part C CSPD. | 16. Part B requires a Comprehensive System of Personnel Development. There is a CSPD Advisory Committee through Special Education and a Part C staff member serves on the Part B CSPD. |
| 17. Part C requires the development of interagency agreements. | 17. Part B requires the development of interagency agreements. |
| 18. Part C federal funds are allocated by a census count of infants and toddlers in each state. | 18. Part B preschool funds are allocated based on the December Child Count. |
It is the official policy of the Alabama State Department of Education that no person in Alabama shall, on the grounds of race, color, disability, sex, religion, national origin, or age, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment.

Funding for this project was provided by the United States Department of Education, Office of Special Education and Rehabilitation Services, through Grant #H173A990088 to the Alabama Department of Education.

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