

Early Intervention

Early Intervention (EI) is a service delivery system for families with children with a diagnosed condition, or demonstrate a developmental delay in any area of development, or are at risk for developmental delays. The Early Intervention Program in Illinois provides an array of services, designed to provide families with resources and supports to assist them in fostering their child's development.

The critical period for learning language occurs during the first five years of life and research indicates that the first three years be the most important. Therefore, children with hearing loss are at an increased risk of language delays in any communication mode, which may result in future difficulty with learning and social-emotional development. The earlier a child acquires language, the better chance that child has of developing typical language and communication skills. It is vitally important for you to know how to communicate effectively with your child and to begin teaching your child language as soon as possible. Early Intervention service providers will help you learn strategies to optimize your child's language learning in whatever communication mode you choose. You are your child's first and most important teacher. As a caregiver, you have the capacity to significantly shape your child's development.

Overview of the Illinois Early Intervention (EI) Program

A variety of services are offered by the Early Intervention Program of Illinois. A description of the services offered and how they may benefit you and your child are listed below. A handbook for all parents titled *The Illinois Early Intervention Program: A Guide for Families* provides an overview of the system and is available in both English and Spanish at <http://www.wiu.edu/ProviderConnections/guideFamilies.php>.

The **DEPARTMENT OF HUMAN SERVICES (DHS)** is the lead agency for Early Intervention Services in Illinois. The **BUREAU OF EARLY INTERVENTION** is part of DHS, and their Website is: <http://www.state.il.us/agency/dhs/eisnp>.

HEARING AND VISION EARLY INTERVENTION OUTREACH (HVEIO) is a state-wide Early Intervention training, resource, referral and technical assistance program for infants and toddlers who are deaf, hard of hearing, or visually impaired. Families and/or providers may contact HVEIO for information and support as well as links to local resources. Please contact HVEIO if you have any questions regarding your child's hearing loss or the services your family needs. HVEIO can be reached at 217-479-4318. The Website is: <http://www.illinoisdeaf.org/Outreach/HVEIO.htm>.

CHILD AND FAMILY CONNECTIONS (CFC) serves as the regional partner for DHS. CFC is responsible for ensuring the timely process of referrals to the Early Intervention System, the provision and eligibility determination services, the development of the initial

Individualized Family Service Plan (IFSP), referral to service providers, and transition. For more information visit CFC's Website: www.dhs.state.il.us/ei. Contact your local CFC to enroll in the program as quickly as possible.

Each Child and Family Connections office has **DESIGNATED SERVICE COORDINATORS** for families of children with a hearing or vision loss. These service coordinators participate in detailed training provided by Hearing and Vision Early Intervention Outreach, specific to service delivery for children with hearing and/or vision loss.

The Bureau of Early Intervention and Hearing and Vision Early Intervention Outreach keeps a list available of current designated service coordinators. Changes in designated service coordinator contact information should be reported by the CFC to The Bureau of Early Intervention who revise and disseminate the list at least semi-annually.

The **SERVICE COORDINATOR**, employed by CFC, works with your family to ensure that you and your child receive all necessary services and supports. The service coordinator links families to resources and informs family members of their rights, obligations and responsibilities under the Early Intervention Services System. The service coordinator assists you and the Individualized Family Service Plan (IFSP) team members in the development and implementation of the IFSP. The service coordinator also assists in your child's transition out of the Early Intervention Services System as they approach three.

FAMILY RIGHTS in Early Intervention include: the right to a timely and free evaluation, development of a coordinated plan (IFSP), privacy, consent or refusal of services, prior notice of all meetings, evaluations, and changes in service, review of your child's records, understanding of information, and the right to disagree. For more information about family rights in Early Intervention, refer to the booklet, *State of Illinois Infant/Toddler and Family Rights Under IDEA for the Early Intervention System*, available at <http://www.dhs.state.il.us/page.aspx?item=32264>.

Early Intervention **ELIGIBILITY** refers to meeting the criteria that is established in Illinois to qualify for services. Determination of eligibility for Early Intervention occurs once the audiological screening, evaluation and assessments have been completed and received by the CFC. Children with a diagnosed hearing loss are eligible for the early intervention services if they are experiencing developmental delays of at least 30% in one or more areas of development. However, a child is automatically eligible for the early intervention program if he/she has been diagnosed with a hearing loss of 30 decibels (dB) or greater at any two of the following frequencies: 500, 1000, 2000, 4000 and 8000 Hertz (Hz), or hearing loss of 35 dB or greater at any one of the following frequencies: 500, 1000 and 2000 (Hz) involving one or both ears.

Following the determination of eligibility, an **INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP)** will be developed. The IFSP is both a process and a written document that considers your family's identified priorities, concerns, resources and important outcomes for you and your family. The IFSP will identify the types of services you and your child will need to reach your outcomes. The IFSP is reviewed and updated every six months with the

entire IFSP team. As your child grows and changes, your family may need different services. Although the IFSP is reviewed every 6 months, it can be reviewed and changed more often as needed.

SERVICE PROVIDERS are qualified professionals with an IL Early Intervention Credential, who work closely with you and your family to ensure you receive the appropriate education, resources, and supports to assist you with reaching your identified IFSP outcomes. The most common services required for a child who is deaf or hard of hearing include: assistive technology (hearing aids, ear molds, etc), audiology (amplification fitting, follow-up, monitoring), aural rehabilitation (developmental therapist/hearing), counseling, service coordination, speech pathology and family support (interpreter, deaf mentor). You and the IFSP team will discuss the service options which will best support you and your family in reaching your IFSP goals.

When working with providers, it's important to ask a variety of questions in order to find a provider who is qualified, who you feel comfortable with, and who can help you achieve your goals for your child.

Below are suggested questions to ask the provider:

What is your background or degree?

What training and experience do you have with hearing loss?

What training and experience do you have with infants and toddlers?

What is your communication philosophy?

How do you feel about a family using more than one communication option and therapies?

Do you provide opportunities to meet other families?

Do you provide an educational setting for toddlers?

How will you help my child?

Why do you do this work?

Can you help me find additional resources if needed?

Can you explain the transition process out of early intervention?

DEVELOPMENTAL THERAPIST - HEARING SPECIALIST (DTH) is a professional with extensive knowledge regarding hearing loss and has a degree in deaf education. A DTH provides services that are specific to your infant's overall development as it is directly affected by the hearing loss. DTHs can help you through the maze of amplification options, communication and language options, educational choices, assistive technology, and social issues. DTHs can explain and support the language acquisition strategies for your child who is deaf or hard of hearing.

DEAF MENTORS are adults who have a hearing loss, and consider themselves a part of the Deaf community. They make regular visits to your home to interact with your child and to share

their language, culture, and personal knowledge on deafness. Deaf mentors provide a communication model, as well as a connection to the Deaf community.

To provide support for parents of children who are deaf or hard of hearing, the CFC (also known as Provider Connections) created **PARENT LIASIONS**. Parent liaisons are parents of children with special needs who have experienced the Early Intervention System firsthand, and can help other parents who are going through the same process.

In addition to the services described above, Early Intervention also provides services in the areas of: physical development (movement), cognitive development (learning), communication development (interaction), social or emotional development (behavior), adaptive development (use of existing skills). Your service coordinator will explain these services to you.

After identifying your family's priorities and concerns, you and the IFSP team will determine appropriate outcomes and strategies to help support you and your child's growth towards those outcomes. Remember that you, the parent, are part of the team and an important voice.

Making a Plan for Your Child



***IFSP Considerations for Children who
are Deaf and Hard of Hearing***

National Center on Birth Defects and Developmental Disabilities
Division of Human Development and Disability



23-2011

Child's name:

Parent(s) name:

Date of birth:

Today's date:

This document is designed to guide conversations between you and your Individualized Family Service Plan (IFSP) team as you address the unique communication considerations for your child.

[You will hear a number of new terms as you build your IFSP. Some of them are bold and **blue** and included in a glossary at the end of this document.]

The Individualized Family Service Plan is developed by you and your early intervention providers working together to support your child's healthy development. This is an ongoing process. It begins when your child is referred to **Part C** early intervention services and it continues through your child's transition out of early intervention by the time he or she is 3 years of age (in most states). The key to achieving your vision for your child's future is your continuing work as an empowered parent. As you provide information, you are the driving force to help others see the unique communication needs of your child. The best way to produce successful outcomes for your child is to combine your effort as a deeply invested parent with the help of a responsive, qualified team of early interventionists.

There are many resources available to ground you in the basic IFSP process. The IFSP process includes tasks like deciding who should be at the meeting, writing appropriate functional outcomes, or developing strategies, etc. Hearing loss is considered a "**low incidence disability**". So, often it is up to the parent to ensure that important topics are addressed. These include **language**, communication choices, access to support, and other considerations unique to hearing loss. This document focuses on things you and your early intervention providers will want to discuss as a team.

*Try this link for more resources on IFSP's - <http://www.nichcy.org/babies/IFSP/Pages/default.aspx> <http://www.nectac.org/topics/families/ifspprocess.asp>

Some of the unique communication considerations are:

- Decisions about how to communicate with your child.
- Possible use of assistive technology (for example, amplification options and FM system).
- Family training, counseling, and home visits to help you serve as **language models**, to facilitate your child's language development and to become primary advocates for your child.
- How to benefit from peers and role models who are deaf or hard of hearing.
- The best way to work with the family service coordinator. This person should be one of the family's key service providers. Part C of the Individuals with Disabilities Education Act (IDEA) states that the family service coordinator is to be "from the profession most immediately relevant to the infant's, toddler's, or family's needs."
- How to link with qualified, knowledgeable service providers. They should have expertise, experience, and training in assessing and working with deaf or hard of hearing children from birth to 3 years of age. They should also know a lot about your family's chosen communication option, if you have decided on one. (Each service provider should have the appropriate certification.)
- Choosing **assessments** and curriculums that are tailored for children who are deaf or hard of hearing.

Making a Plan for Your Child

A good team listens to the concerns and ideas of each of its members. You are the decision-maker for your child's **modality**. Your confidence in your decision making comes from listening to and learning from the professionals who surround you. Know what you want, or at least which approach you most favor. Understand that your family's needs might change over time depending on many factors. These factors could include:

- Degree of your child's hearing loss,
- Technology your child might use,
- Primary language used in your home,
- And other special needs your child might have.

With your qualified team, develop family goals and outcomes that address the strengths and challenges specific to your child. You will be gaining knowledge about emerging **communication** considerations and making decisions related to communication. The outcomes you develop should reflect your new knowledge. The outcomes should be functional; that is, they should take into consideration communication during important family routines, such as meals, bedtime, and play. The "Communication Plan" on the next page will help you gather your thoughts and help shape discussions with your team.

Notes:

IFSP COMMUNICATION CONSIDERATIONS FOR A CHILD WHO IS DEAF OR HARD OF HEARING

The IFSP team should consider each the following areas and provide opportunities, regardless of the child's hearing level, the ability of the parent(s) to communicate, or the child's experience with other communication modes. (Please ask your IFSP team or other resource people to provide information on any of the following terms that are not familiar.)

1. Language and Communication

a. The language(s) we currently use in our home are: *(Check all that apply)*

- Home language (English, American Sign Language (ASL), Spanish etc), Specify _____
 Combination of several languages

Describe:

b. We currently communicate with our child using: *(Check all that apply)*

- | | | |
|---|---|---|
| <input type="checkbox"/> American Sign Language (ASL) | <input type="checkbox"/> Fingerspelling | <input type="checkbox"/> Signing Exact English/Signed English |
| <input type="checkbox"/> Conceptual signs (Pidgin Signed English or Conceptually Accurate Signed English) | <input type="checkbox"/> Gestures | <input type="checkbox"/> Speechreading |
| <input type="checkbox"/> Cued Speech/Cued English | <input type="checkbox"/> Home signs | <input type="checkbox"/> Tactile/Object |
| | <input type="checkbox"/> Listening and spoken language | <input type="checkbox"/> Other, please explain _____ |
| | <input type="checkbox"/> Picture symbols/pictures/photographs | |

c. We are considering or would like more information on the following: *(Check all that apply)*

- | | | |
|---|--|--|
| <input type="checkbox"/> American Sign Language | <input type="checkbox"/> Gestures | <input type="checkbox"/> Speechreading |
| <input type="checkbox"/> Conceptual signs (Pidgin Signed English or Conceptually Accurate Signed English) | <input type="checkbox"/> Home signs | <input type="checkbox"/> Tactile/objects |
| <input type="checkbox"/> Cued Speech/Cued English | <input type="checkbox"/> Listening and Spoken language | <input type="checkbox"/> Other, please explain _____ |
| <input type="checkbox"/> Fingerspelling | <input type="checkbox"/> Pictures symbols/pictures/photographs | |
| | <input type="checkbox"/> Signing Exact English/Signed English | |

Action Plan, if any:

d. Describe the supports that are necessary to increase the ability of parents and family members to become language models

Considerations:

Action Plan, if any:

- 2.** Assistive technology (AT) is any item that supports a child's ability to participate actively in his or her home, child care program, school, or other community settings. (Some examples are hearing aids, cochlear implants, special FM systems, closed captions, videophones, and adaptive toys.)

a. We are currently using the following assistive technology devices:

b. We are considering or would like more information on the following:

Action Plan, if any:

- 3.** Identify opportunities for direct communication with others who are deaf/hard of hearing. Discuss what supports are needed to: Get adult role model connections for the family and identify opportunities for the child to have direct interaction with other children the same age who are deaf or hard of hearing.

Opportunities considered:

Action Plan, if any

- 4.** Discuss supports the family needs to access the services and resources recommended or developed by the early intervention team. That could include the environment in which these might need to be provided.

Services/Programs considered:

Action Plan, if any:

- 5.** List the qualified service providers on the IFSP team who have expertise, experience, and training in assessing and working with children from birth to 3 years of age who are deaf or hard of hearing. Specifically, indicate those service providers with the expertise, experience, and training in the child's and family's chosen communication option(s), if the family has decided on the option(s). (Make sure the providers have appropriate certification).

Considerations:

Action Plan, if any:

- 6.a.** Identify the community opportunities and activities in which the family would like to participate (for example, playgroups, baby gyms, music programs, and story time at the library).

Considerations:

Action Plan, if any:

- b.** Discuss resources and supports needed to let the child and family fully participate in these community settings with full communication access (for example: visuals, seating, interpreting, FM systems, sound field, and appropriate group size).

Considerations:

Action Plan, if any:

GLOSSARY OF NEW TERMS

ASSESSMENT

The way in which service providers document a child's progress and determine his or her developmental level. The methods used can be formal or informal.

COMMUNICATION

The exchange of information with intent (can be verbal, nonverbal, gestural, primitive, or iconic).

INDIVIDUAL FAMILY SERVICE PLAN (IFSP)

Written plan developed by parents or guardians and a multidisciplinary team. The IFSP will do the following:

- a. Address the family's strengths, needs, concerns, and priorities.
- b. Identify support services available to meet these needs.
- c. Empower the family to meet the developmental needs of their child with a disability.

LANGUAGE

The systematic and rule-governed, conventional method of communicating. More sophisticated than "just" communication, language inspires cognition and cognition inspires language. They are intricately intertwined.

LANGUAGE MODEL

Anyone who provides a good demonstration of the family's chosen language(s) to communicate with the child.

LOW-INCIDENCE DISABILITY

Individuals with disabilities that make up a small percentage of the population. Some examples of these might be having a visual impairment, hearing loss, a deaf-blindness disability, or significant cognitive impairment. The definition of low-incidence disability varies from state to state.

MODALITY

The sensory channels (that is, vision, touch, or hearing, or a combination of these) through which the family will communicate.

PART C OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

Part C is the section of Public Law 105-17 (IDEA) that refers to early intervention services available to eligible children from birth through 2 years of age and their families.



Other resources are available at the following link:

<http://www.cdc.gov/ncbdd/hearingloss/index.html>.

Families also might be interested in the *Decision Guide to Communication Choices for Parents of Children who are Deaf or Hard of Hearing*, available at the same site.

Organizations for Support

CHOICES for Parents is a statewide coalition of parents and professionals that provides information, resources, advocacy and support to parents whose children have a hearing loss. CHOICES for Parents supports families from diagnosis through early intervention, school placement and transitions, assisting families when needed. CHOICES for Parents created this notebook, *Children and Hearing Loss*, works closely with Latino families and promotes early literacy through its READ Program. For more information, contact info@choicesforparents.org or visit the website choicesforparents.org (click "Español" for Spanish).

ILLINOIS HANDS AND VOICES (IL H&V) is a statewide parent organization for families of children with hearing loss. IL H&V provides families with resources, networking opportunities, and information regardless of the communication mode they have chosen. Ongoing parent-to-parent dialogue is a highly desirable and effective support provided through IL H&V. For more information, contact ilhandsandvoices@gmail.com or visit the website: www.ilhandsandvoices.org.

GUIDE BY YOUR SIDE offers parent-to-parent emotional support statewide. Parents of children who are deaf and hard of hearing have been trained to provide unbiased support and resources, and to mentor other parents whose children have been identified as having a hearing loss. CHOICES for Parents has partnered with Illinois Hands & Voices and the Illinois Early Hearing Detection and Intervention Program to offer Guide By Your Side. To request free support from a trained Parent Guide, please call 224-343-1873 or email GBYS@choicesforparents.org.

ALEXANDER GRAHAM BELL ASSOCIATION FOR THE DEAF AND HARD OF HEARING (AGBell) is another organization designed to support families of children and adults who are deaf. AGBell works as a resource, support network, and advocate for listening, learning, talking and living independently with hearing loss. Through publications, events, outreach, training, scholarships and financial aid, AG Bell promotes the use of spoken language and hearing technology. For more information you can email them at info@agbell or visit the website: <http://listeningandspokenlanguage.org/>.

INSTITUTE FOR PARENTS OF PRESCHOOL CHILDREN WHO ARE DEAF OR HARD OF HEARING is a week-long educational program for parents of children under the age of five who are deaf or hard of hearing. The Institute is held in June on the campus of the Illinois School for the Deaf. The Institute is an opportunity for parents to learn more about deafness and to learn about their child's individual strengths and needs. It may be a first opportunity for some parents to meet face to face with other parents who have children who are deaf and to share common concerns and feelings. Families sign up through the **DIVISION OF SPECIALIZED CARE FOR CHILDREN (DSCC)**. DS CC provides care coordination, information provision, and referral for any children with eligible medical condi-

tions, not limited to hearing loss. DSAC also provides financial assistance for families who are eligible. DSAC can help families obtain hearing aids, cochlear implants, ENT (Ear Nose Throat) care, medications, educational services and other community resources that may be beneficial to families. DSAC can be contacted at (800) 322-3722. Regional Office information can be obtained from their website: <http://dsac.uic.edu/>.

The **JOHN TRACY CLINIC** also offers free Correspondence Courses for parents of deaf and hard of hearing babies and preschoolers, as well as for parents of young deaf-blind children. These classes are available by mail and e-mail through John Tracy Clinic's Correspondence Program. Building a language-rich environment, auditory learning, and speech and child development are some of the topics covered. More information is available at: www.jtc.org.

TRANSITION from Early Intervention to school services begins when your child is 2 1/2 years old (30 months). The process officially begins when your service coordinator contacts your **LOCAL EDUCATION AGENCY (LEA)**. Throughout the transition process you will have the opportunity to talk with your EI team about what to expect, the differences in services and service delivery, how to prepare your child for the transition, etc.

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