WHAT DOES THE LAW SAY?

The Part C/tiny-k program is the Part C Early Intervention Program in Kansas. It is governed under the federal Individuals with Disabilities Education Act (IDEA). Part C establishes a comprehensive, coordinated multidisciplinary, interagency system of early intervention supports for infants and toddlers with disabilities from birth to age three and their families.

The Individuals with Disabilities Act was reauthorized and signed into law on December 3, 2004 as the Individuals with Disabilities Education Improvement Act of 2004, Public Law 108-446. The new law includes several new requirements effective July 1, 2005, including that states establish “policies and procedures that require the referral for early intervention services of a child under the age of three who is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure” [Section637(a)(6)(B)].

The Keeping Children and Families Safe Act of 2003 also added a number of new requirements under the Child Abuse Prevention and Treatment Act (CAPTA) including a requirement that states have policies and procedures requiring health care providers to notify Child Protective Services of “infants born and identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure.”

HOW MANY INFANTS ARE BORN EACH YEAR AND IDENTIFIED AS AFFECTED BY ILLEGAL SUBSTANCE ABUSE?

It is unclear exactly how many children are actually born affected by substance abuse. Research findings of estimates differ, however the following studies shed some light on the situation.

- According to a study conducted by the National Association for Perinatal Addiction Research and Education, an estimated 375,000 newborns per year face serious health hazards due to their mother’s prenatal drug exposure. It has been estimated that 11 – 15% of the babies born in the United States today were exposed in utero to alcohol and/or other illicit drugs (Poulsen, 1991).
- A 2002 Substance Abuse and Mental Health Services Administration (SAMHSA) National Survey on Drug Use and Health found that more than 3% of the women reported using an illicit drug, including cocaine during pregnancy (NCADI,2003)
- The American Academy of Pediatrics estimates that 1 out of every ten newborns has been exposed to an illicit drug (1990). When we consider that in 2004 there were 39,553 births in Kansas, the number of infants affected by illegal substances would be estimated as more than 3,900.

HOW IS A REFERRAL TO PART C/tiny-k PROGRAMS MADE?

Children born and identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure must be referred to a local tiny-k early intervention program. Any personnel with Social and Rehabilitation Services or Child Protective Services who is aware of an infant/child in these circumstances must make a referral by forwarding the contact information for the family to the local coordinator for the Part C/tiny-k network in which the child resides. A list of the local networks and contact information may be accessed by calling 1-800-332-6262 or by visiting: http://www.kdheks.gov/lts/download/netowrk_brochure.pdf

WHAT HAPPENS AFTER A REFERRAL IS MADE?

Upon receipt of the referral information, a staff person with the local Part C/tiny-k program will contact the family and begin the Part C screening/evaluation process. A determination will be made whether the child is
CAPTA, IDEA and Part C/tiny-k EARLY INTERVENTION PROGRAMS

eligible for early intervention services. The infant or toddler must need these services because the child (1) is experiencing significant developmental delays in one or more of the areas of cognitive development, physical development, communication development, social or emotional development and adaptive development; or (2) has a diagnosed physical or mental condition that has a high probability of resulting in developmental delay. Early intervention services are designed to meet the developmental needs of an infant or toddler with a disability, as identified by the individualized family service plan team. If a child is not determined eligible for tiny-k services, then appropriate referrals will be made to community resources.

HOW WILL I KNOW IF A CHILD IS RECEIVING PART C/tiny-k EARLY INTERVENTION SERVICES?

Consent of the biological parent is required before early intervention services can be implemented. If parental rights have been severed, then a Child Advocate will need to be appointed to represent the child and advocate for needed services. When biological parent or Child Advocate consent is received, a referral feedback form will be sent to the referring agency by the tiny-k program, documenting eligibility and plan of action.

How can I find out more information about local tiny-k programs?

For additional information regarding tiny-k services, call the Kansas Resource Guide at 1-800-332-626 or visit http://www.kdheks.gov/its/.

Document 10-2013