

INTRODUCTION

With the passage of Part C of the Individuals with Disabilities Education Act (IDEA) in 1986, Congress gave states an opportunity to develop services for infants and toddlers with developmental delays and their families. The benefits of early intervention services have been demonstrated: The earlier intervention is started, the greater the ultimate dollar savings and the higher the rate of educational attainment for youngsters with disabilities. In addition, the quality of life for the child and the family is enhanced.

Kansas is committed to supporting a statewide, comprehensive, coordinated, multidisciplinary system of services for infants and toddlers with disabilities and their families. Kansas seeks to enhance the capacity of state and local agencies and service providers to identify, evaluate, and meet the needs of historically underrepresented populations (e.g., Native American Indians on reservations and homeless). Additional emphases include minority, low-income, inner-city, and rural populations. Principles used to guide this system's development and implementation includes:

1. The family is the most influential factor in a child's life.
2. The family is the most knowledgeable about the child's and family's needs.
3. All children with disabilities should have the opportunity to achieve their maximum potential.
4. All children should be checked periodically to ensure that they are growing and developing normally.
5. Child and family needs change rapidly during the child's first three years; therefore, services should be flexible.
6. To be most effective, services must be individualized to meet the needs of the child and family.
7. The local community is the preferred place for a child and family to receive needed services.
8. A child with a disability should be served in natural environments, including the home and community settings in which children without disabilities participate, to the maximum extent appropriate to meet the needs of the child.
9. No one agency or program can offer the full array of early intervention services that a child and family may need.
10. Comprehensive services can be achieved through coordinated efforts by various disciplines from multiple agencies.

I. Purpose

The purpose of this manual is to provide technical assistance for local Infant-Toddler Services/tiny-k networks, local interagency coordinating councils (LICC), contractors, and other agencies and organizations to support implementation of quality early intervention services for infants and toddlers with disabilities or at identified risk for developmental delay and their families.

The U.S. Congress reauthorized the IDEA in 2004 including Part C. However, at this date the Office of Special Education Programs (OSEP) has not provided regulations for IDEA 2004, Part C. Therefore, the procedures and guidelines established for Kansas by the Kansas Department of Health and Environment are based on IDEA 2004 and the federal regulations published for Part C in 1997. Where they are different, IDEA 2004 is the authority. **Kansas has adopted the federal regulations 34 CFR Part 303 by reference into state regulations.** State regulations to be implemented are in addition to federal regulations.

A complete and current copy of the federal and state statutes and regulations may be obtained at the following websites:

Federal Statute: IDEA 2004

<http://idea.ed.gov/explore/view/p/%2Croot%2Cstatute%2CI%2CC%2C>

Federal Regulations (1997) <http://www.nectac.org/idea/303regs.asp>

Kansas Statutes http://kansasstatutes.lesterama.org/Chapter_75/Article_56/75-5648.html
and http://kansasstatutes.lesterama.org/Chapter_75/Article_56/75-5649.html

Kansas State Regulations <http://www.kdheks.gov/its/kar28-4-550to572.html>

II. Statewide System

The 16 minimum components of the statewide system as described in Section 635 of Part C of IDEA 2004 are as follows:

1. A definition of "developmentally delayed" to be used by the state.
2. A timetable to ensure that early intervention services based on scientifically based research, to the extent practicable, are available to infants and toddlers with disabilities and their families, including Native American infant and toddlers on reservations and infants and toddlers who are homeless in the state.
3. Timely, comprehensive, multidisciplinary evaluations of the functioning of the child and the needs of families to appropriately assist in the development of the child.
4. Individualized family service plan and service coordination services.
5. A Child Find and referral system.
6. A public awareness program.

7. A central directory of services, resources, experts, as well as research and demonstration projects.
8. A comprehensive system of personnel development.
9. Policies and procedures for personnel standards.
10. A single line of authority in a lead agency designated or established by the governor.
11. A policy pertaining to contracting or making other arrangements with local service providers to provide early intervention services.
12. A procedure for timely reimbursement of funds.
13. Procedural safeguards.
14. A system for compiling data regarding the early intervention programs.
15. A State Interagency Coordinating Council.
16. Policies and procedures to ensure that, to the maximum extent appropriate, early intervention services are provided in natural environments or in another setting only when early intervention services cannot be achieved satisfactorily in a natural environment.

In Kansas, parents and service providers in local communities are integral to successful service delivery. Identification of children with disabilities or developmental delays occurs at varying locations and through various mechanisms. The Coordinating Council on Early Childhood Developmental Services (CCECDS) encourages and supports local interagency councils coordinating infant-toddler services in their community. The Local Health Departments are an identified point of contact in each community for questions regarding infants and toddlers with developmental concerns. Other agencies (e.g., local education agencies, private developmental centers, Community Developmental Disabilities Organizations [CDDO]) are also involved in activities with this age group.

At the state level, the Kansas Department of Health and Environment (KDHE) as the lead agency (with the support of the CCECDS) must assure the federal government that the statewide system is in place.