INDIVIDUALIZED FAMILY SERVICE PLAN

Introduction [34 CFR 303.20]

The Individualized Family Service Plan (IFSP) is the written agreement between the family and the local tiny-k program that documents a plan for services needed by eligible infants or toddlers between the ages of birth and age 3 and their families. Development of the IFSP is a dynamic process that involves a collaborative planning effort and partnership between the parents (and other identified family members or persons who know the infant or toddler and family) and the professionals who will deliver services and supports to the infant or toddler and family. It is intended as an ongoing process of planning and adjusting services for the changing developmental needs of the child and his or her family. The IFSP should be fully understood (i.e., be user- and reader-friendly) by the parents/family and professional team members. The IFSP process is family-centered and assists in empowering the family. Therefore, cultural values and beliefs should be sought and honored throughout the IFSP process.

Partnerships in the development of the IFSP include active participation among all team members, including the parents/family members and professionals. The parents are key team players in providing information about their infant’s or toddler’s strengths and needs, as well as the family’s strengths, resources, concerns, priorities, and preferences. However, it is the parents’ choice to decide the extent of their role and level of activity in the development and implementation of the IFSP. It is the professional’s role to fully explain the IFSP process so parents and other family members are empowered to choose their roles and levels of activity accordingly.

Parents are responsible for the ultimate decision in determining whether they, their infant or toddler, or other family members accept or decline services. The contents of the IFSP must be fully explained to parents and their informed written consent must be obtained prior to the provision of services described in the IFSP. The family’s signature on the IFSP indicates the family participated in the development of the IFSP.

The family service coordinator initiates the IFSP process and takes responsibility for the development, implementation, review, and revision of the IFSP.

Reasons for the Initial IFSP Process:

1) To summarize all information known regarding the infant’s or toddler’s strengths and needs and the family’s strengths, concerns, priorities, preferences, and current resources

2) To review the family’s identified routines, daily activities, and natural environments

3) To develop and refine outcomes the family has chosen (includes outcomes for both the infant or toddler and the family)

4) To develop strategies for meeting the identified outcomes

5) To determine appropriate services and supports that link to meeting the identified outcomes

6) To develop a written document that will guide the family, the family service coordinator, and the other service providers
7) To determine the responsibilities of each team member

8) To determine how communication between the parent and other team members will be maintained

9) To determine where (natural environments), when, and how services and supports will be delivered to the infant or toddler and family

I. Notice of the IFSP Meeting [34 CFR 303.342; § 303.421]

The Prior Written Notice Form can be found at:
http://www.ksits.org/download/Prior_Written_Notice.doc

Meeting arrangements must be made with, and written notice of the meeting provided to, the family and other participants early enough before the IFSP meeting date to ensure they will be able to attend. In Kansas, providers give the family and other participants a 10-calendar-day written notice of the IFSP meeting. Parents have the right to waive this notice. Parents must be informed of their rights prior to the meeting, including the right to bring a family member or other individual who knows the infant or toddler and family and can contribute to preparing the IFSP.

IFSP meetings must be conducted

A. in settings and at times convenient to families, and

B. in the native language of the family or other mode of communication used by the family, unless it is clearly not feasible to do so.

If parents are unable to attend the scheduled IFSP meeting, the team will not meet. The reason for the cancellation of the meeting must be documented in the infant’s or toddler’s records. The IFSP meeting must be rescheduled as soon as possible and at a time mutually agreed upon by the parents and other team members.

II. Timelines and IFSP Meetings [34 CFR 303.342(a)(b)(c); 303.20]

A. The first IFSP meeting is held after the initial evaluation (including any assessments of the infant or toddler and family) and determination of eligibility. The initial IFSP meeting must be conducted within the 45-calendar-day time period from receipt of the referral for the initial evaluation. The meeting is to be scheduled at a mutually convenient time and place for the family and other participants.

B. Periodic IFSP reviews for an infant or toddler and his or her family must be conducted every six months or more frequently if conditions warrant, or if the family requests a review. Quarterly reviews are encouraged. Reviews may be carried out at a face-to-face meeting or by another means acceptable to the parents and other participants (e.g., Skype, phone). The intent of this review is to ensure the constantly changing developmental needs of the infant or toddler and priorities of the family are acknowledged and documented. The purposes of the periodic review are to:

1) review and revise the IFSP, as appropriate,

2) determine the degree to which progress toward achieving the outcomes is occurring,
3) determine whether modification or revision of the outcomes or services is necessary,

4) discuss the family’s satisfaction with services being received,

5) review the results of any new evaluations and ongoing assessments,

6) share any other new and relevant information related to the infant or toddler and family, and

7) outline plans for the next six months.

C. An annual meeting to evaluate the IFSP for an infant or toddler and his or her family must be conducted to update its contents. The results of any current evaluations and any other information available from the ongoing assessment of the infant or toddler and family must be used in determining what outcomes are developed and services are needed to achieve those outcomes. The annual review of the IFSP should be consistent with the development of the initial IFSP with regard to participants and purpose.

III. Participants in IFSP Meetings [34 CFR 303.343]

A. Participants in the initial IFSP and annual review of the IFSP must include:

1) the parent or parents of the infant or toddler,

2) the family service coordinator who has been working with the family or who has been designated by the local tiny-k program to be responsible for the implementation of the IFSP,

3) other family members as requested by the parent;

4) an advocate or other person outside of the family as requested by the parent,

5) the person or people directly involved in conducting the evaluations and assessments. If unable to attend, input from any of these individuals shall be provided through other means, including one of the following

   (a) Participating in a conference call

   (b) Having a knowledgeable authorized representative attend

   (c) Making pertinent records available at the meeting

6) as appropriate, the people who will be providing services to the infant or toddler, family, or both.

B. Participants in the periodic review of the IFSP shall include

1) the parent or parents of the infant or toddler,

2) the family service coordinator,

3) other family members as requested by the parent,
4) an advocate or other person outside of the family as requested by the parent, and

5) others as deemed appropriate or necessary by the local tiny-k program and agreed upon by the parent(s).

IV. IFSP Content Requirements [34 CFR 303.344]

The IFSP Document can be found at: http://www.ksits.org/download/IFSP.doc

The IFSP must include specified content that reflects the unique needs of the infant or toddler and his or her family. The content of the IFSP is to be fully explained to the parents so they understand the importance of their input into its preparation. The IFSP is to reflect the concerns, needs, priorities, and resources of the parents. It must be responsive to both family’s and child’s needs.

The content of the IFSP must be understandable by all team members, including the parents and other individuals invited by the parents; therefore, it should be free of jargon and professional terminology and be sensitive to the family. The IFSP is to be written in the parent’s native language or mode of communication, unless it is clearly not feasible to do so. Copies of the IFSP in both languages, English and the family’s native language, are to be kept on file with the local tiny-k program.

A. The IFSP must include:

1) **Information about the child’s status** based on information from the child’s evaluation and/or assessments. This information establishes a baseline in order to measure progress including present level of the following developmental domains:

   (a) Physical development

      i. Health (including nutrition)

      ii. Vision

      iii. Hearing

      iv. Motor (fine and gross)

   (b) Cognitive development

   (c) Communication, language, and speech development

   (d) Social or emotional development

   (e) Adaptive/self-help development

In Kansas, we have integrated the early childhood outcomes so all developmental domains (cognitive, communication: expressive and receptive, fine motor, gross motor, self-help and social-emotional) must be integrated into the three identified functional areas of positive social relationships, acquiring and using knowledge and skills, and taking action to meet needs.
2) With concurrence of the family, the IFSP must include a statement of the family’s resources, priorities, and concerns related to enhancing the development of the child as identified through the assessment of the family. In Kansas, the belief is held that in order for a family to truly enhance the development of their child, their needs as a family must first be met. The identification of these resources, priorities and concerns is key in meeting family needs.

Family assessment is voluntary. In Kansas we safeguard this right by making very clear that the parents have the right to not answer any question asked and to only give the information they are comfortable sharing. Families have the right to limit who sees the information collected.

3) A statement of the measurable results or outcomes developed and written by the IFSP team (including family members) expected to be achieved for the family and/or child (including pre-literacy and language skills, as developmentally appropriate for the child).

4) The criteria, procedures and timelines used to determine

(a) the degree to which progress toward achieving the results or outcomes is being made, and

(b) whether modifications or revisions of the results/outcomes or services and supports are necessary.

5) The IFSP must include a statement of the specific early intervention services, based on peer-reviewed research (to the extent practicable), necessary to meet the unique needs of the child and the family to achieve the identified results or outcomes. These services are defined in Section XIII of this manual.

a. Part C services include, but are not limited to the following:

- Assistive technology services and devices
- Audiology
- Family training and counseling, and home visits
- Health services
- Medical services only for diagnostic or evaluation purposes
- Nursing services
- Nutrition services
- Occupational therapy
- Physical therapy
- Psychological services
- Service coordination services
- Sign language and cued language services
- Social work services
- Special instruction
b. For each service listed, a statement must include the following:

i. The *dates* projected for initiation of services (as soon as possible after the IFSP meeting) and the anticipated length, duration, frequency, intensity, and method of delivering the services.

ii. *Length* means the length of time the service is provided during each session of that service (such as one hour or some other specified time period).

iii. *Duration* means a projection of when a given service will no longer be provided (such as when the infant or toddler is expected to achieve the results or outcomes in his or her IFSP).

iv. *Frequency and intensity* mean the number of days or sessions a service will be provided.

v. *Method* means how a service is provided (direct, indirect, multidisciplinary, transdisciplinary, consultative, etc.).

vi. *The natural environments* (location/places) in which the services will be provided. The statement must include a justification of the extent, if any, to which the services will not be provided in a natural environment.

The determination of the appropriate setting for providing Part C services to an infant or toddler with a disability, including any justification for not providing a particular Part C service in the natural environment for that infant or toddler and service, must be

- made by the IFSP team (which includes the parent and other team members),
- consistent with the provisions in Part C services, native language of the child, and Part C services in the natural environment, and
- based on the infant’s or toddler’s outcomes, which are identified by the IFSP team.

Early Intervention services for infants and toddlers with disabilities are to be provided

- to the maximum extent appropriate, in natural environments, and
- in settings other than the natural environment that are most appropriate as determined by the parent and the IFSP team, only when early intervention services cannot be provided satisfactorily in a natural environment.

“Natural environments” means settings that are natural or normal for the infant’s or toddler’s age peers who have no disability, and includes those individuals who typically interact with the infant or toddler on a regular basis. Examples of natural environment
settings include the home or community settings in which children without disabilities participate.

vii. A statement of local funding sources, including Medicaid/KanCare and Categorical Aid. Part C funding must always be a payor of last resort for all services.

viii. The people or agencies responsible for providing the Part C services and supports.

6) Family service coordinator identified by name. This person can be from the profession most immediately relevant to the child’s or family’s needs or somebody who is otherwise qualified to carry out all applicable responsibilities under Part C of IDEA. The family service coordinator will be responsible for ensuring implementation of the IFSP and coordination with other agencies and persons. The family service coordinator’s responsibilities include:

(a) Initiation, development, and reviews of the IFSP, and implementation of part C services

(b) Coordination with other agencies and/or people of their services and supports

(c) Transitions within local tiny-k programs’ areas, from Part C to Part B services, or other appropriate services. For further clarification regarding transitions from local tiny-k program please see IFSP Guidance Document and the transition section of the procedure manual.

The IFSP Guidance Document can be found at:

7) Other services, to the extent appropriate, that should be included on the IFSP are the following:

a. Other services the infant, toddler, or family needs or is receiving through other sources, but that are neither required nor funded under Kansas Infant-Toddler Services. The funding sources used to pay for those services or steps taken to obtain those services through public or private sources are to be included within this description.

b. If those services are not currently being provided, a description should be included on the steps the service coordinator or family may take to assist the infant or toddler and family in securing such other services.

Note: The other services described above are services an infant, toddler, or family needs, but are neither required nor funded under Part C of IDEA. Listing of these non-required services does not mean these services must be provided. By listing them, the IFSP provides a comprehensive picture of the infant’s or toddler’s total service needs (not only Part C services but medical and health services as well), which can be helpful to both the infant’s or toddler’s family and the family service coordinator. It is appropriate for the family service coordinator to assist the family in securing these non-required services.

8) Transition from a local tiny-k program [34 CFR 344(h)]
B. Transition Plan [34 CFR 303.209]

A transition plan, inclusive of steps to exit from the program and to appropriate services, is a part of the Individualized Family Service Plan (IFSP). This plan must be developed not fewer than 90 days, and at the discretion of all parties, not more than nine months before the child’s third birthday.

1) The transition team, including the parent(s), is responsible for developing the transition plan.

2) The local tiny-k program may develop the transition plan as part of the IFSP at the transition conference. In some instances, the transition plan may be a continuing part of the IFSP, and the transition conference for a child potentially eligible for Part B is conducted in a separate meeting.

3) The transition team must review program options for the child with a disability who is potentially eligible for Part B services for the period from that child’s third birthday through the remainder of the school year.

The Statewide IFSP includes required transition steps in the Part C Transition Planning Timelines and Procedures. These are the steps to be taken to support the transition of the child to services after the age of three. This includes Part B, if eligible and elected by the parent(s), or other preschool services, including early education, Head Start and Early Head Start, community child care programs, or other appropriate services.

The family service coordinator, LEA representative, and the parent(s) work closely together to ensure decisions regarding child and family needs for transition services are made collectively by the team. All activities must be documented in the IFSP.

The Service Coordinator facilitates the development of the transition plan in the IFSP.

The steps in the IFSP process to ensure a smooth transition include these elements:

1) Arrangement for the transition conference, with approval of parent(s), in a timely manner and at a place convenient to the participants

2) Discussion with and training of the parent(s), as appropriate, about possible future placements and other matters related to the child’s transition

3) Procedures to prepare the child for changes in service delivery, including steps to help the child adjust to and function in a new setting, if appropriate

4) Confirmation that child find (referral) information has been transmitted to the LEA or with parental permission, another relevant agency

5) With written parental consent, transferring information about the child to the new provider to ensure continuity of services, including evaluation and assessment information and a copy of the current IFSP

6) Discussing what is needed for eligibility for other programs/services (decisions about the responsibility for performing or sharing evaluations of children are included in the process)
7) Identifying transition services and other activities that the IFSP team determines are necessary to support the transition of the child

8) Determining a timeline for review and update of the transition plan to ensure:

(a) services provided by the local tiny-k program continue until the child’s third birthday, or other date near the third birthday, depending on appropriate service options,

(b) the plan delineates responsibilities of the local tiny-k program and other service agencies, and

(c) Part B preschool special education services, if eligible and elected by the parent(s), become available to eligible children upon the third birthday, or other date near the third birthday, depending on Part C/Part B determinations.

V. Interim IFSP [34 CFR 303.345]

A. In Kansas, the interim IFSP should be used only in a rare circumstance. The interim IFSP does not circumvent the requirements for the timely evaluation, assessments, and development of the IFSP within the 45-calendar-day timeline from the receipt of referral. If an interim IFSP is being considered, the KDHE state staff should be contacted. If an interim IFSP is used, it must meet these conditions:

1) Written parental consent is obtained indicating their knowledge of, and agreement to, the desire to begin services before evaluation, and/or the delay in completing the evaluation.

2) An interim IFSP is developed that includes

(a) the name of the family service coordinator who will be responsible for implementation of the interim IFSP and coordination with other agencies and people, and

(b) the Part C services that have been determined to be needed immediately by the infant or toddler and family.

VI. Parent Consent for Services in the IFSP [34 CFR 303.342(e); §§303.403, 303.404, and 303.405]

The IFSP Document can be found at:
http://www.ksits.org/download/IFSP.doc

The contents of the IFSP must be fully explained to the parents and informed written consent must be obtained prior to the provision of any early intervention services described in the IFSP. The early intervention services for which parental consent is obtained must be provided.

A. The parent must be provided with prior written notice and a request for consent in his or her native language indicating the local tiny-k program is proposing to provide early intervention services for the infant or toddler and the family and the reason for providing the early intervention services.

B. The local tiny-k program must also provide the parent with the parent rights (procedural safeguards) information.
C. The parent must provide informed written consent for the provision of early intervention services.

D. The parent may determine whether the family will accept or decline any early intervention service written into the IFSP without jeopardizing the right to receive other early intervention services. If the parent does not provide consent for the services, or some part of the services, only the services to which consent has been obtained must be provided.

**VII. Timelines for Implementing Services [34 CFR 303.20(c)]**

Services in the IFSP must be implemented within 30 days once parental consent for the early intervention services in the IFSP is obtained.

**VIII. Exiting From Services**

An IFSP meeting/Review is required for every instance of a child exiting from services including those who transition at age 3. The statewide IFSP form and supporting documents are required.

The IFSP Document can be found at:
http://www.ksits.org/download/IFSP.doc

The IFSP Guidance Document can be found at:

Once the infant or toddler has been determined eligible and the parent has consented to early intervention services, a child/family cannot be exited unless the infant or toddler is no longer eligible or the parents have withdrawn their consent for services. An individual service identified on the IFSP may end based on the duration of services agreed to on the IFSP. However, an IFSP does not “officially” expire until the annual due date. In all cases, the parent must be provided with prior written notice of the action.

A. Exit Criteria

The criteria for exit include the following conditions:

1) The child reaches age 3 (no longer eligible), or

2) For an infant or toddler who was eligible due to a developmental delay as defined in Kansas: the infant or toddler functions within his age range in all developmental areas as measured by an assessment or evaluation tool and informed clinical opinion, or

3) Parents choose to withdraw their infant or toddler (enrollment in the system is voluntary).

B. Exit Process

1) No Longer Eligible
(a) Once the child reaches age 3, he/she is no longer eligible for early intervention services under Kansas Infant-Toddler Services regulations and policies.

(b) If a local tiny-k program is considering the dismissal of a child before the age of three, a reevaluation of eligibility is required. Separate consent for evaluation shall be provided by the parent. (A local tiny-k program can never consider dismissal of an automatically eligible child. The parent can however, choose to withdraw from the program.)

(c) The family service coordinator should schedule an IFSP review to discuss the updated evaluation/assessment results. Written notice of the IFSP meeting must be given to the family to notify them that the child’s IFSP will be reviewed and that the need for continued services will be determined based on the updated evaluation/assessment results/review.

2) Parent Request for Exit

The family may request that the infant or toddler exit early intervention services. Services are voluntary on the part of the family. In this case the infant or toddler may exit without an IFSP review. The Declining Participation form must be completed by the local tiny-k program and signed by the parent(s).

The Declining Participation Form can be found at: http://www.ksits.org/download/Declining_Participation.doc

3) Prior Written Notice

The family service coordinator must provide written notice to the parent upon the infant or toddler exiting the services. The notice must state what the action is (exiting early intervention services) and the reason for the action (no longer eligible, parent request, end of services on IFSP, etc.). The notice is to be presented to the parent with a copy of the Child and Family Rights and KS ITS Complaints Process. There should be documentation signed by the parent, showing the family is aware of their rights and is in agreement with their child's exiting.

The Prior Written Notice Form can be found at: http://www.ksits.org/download/Prior_Written_Notify.doc


4) Exit Plan and Meeting

Prior to the discontinuation of services, the family service coordinator is responsible for convening an exit meeting with the family to develop an exit plan. This exit meeting may be combined with other meetings already occurring (e.g., IFSP meeting, IEP meeting, or transition conference). The exit plan should include activities to prepare for exiting and a reasonable time frame for completing them. The plan should also include procedures to connect the family with community resources or to transfer to other programs.
C. Child/Family Not Available

There are instances in which families are not home when the service provider arrives and the visit has not been canceled ahead of time. In such a case, the service provider should leave a note explaining she or he will contact the family to reschedule and remind them of the need to cancel appointments prior to the visit whenever possible.

If the family is not home for three consecutive scheduled visits without any advance cancellation (or appropriate explanation), the program may send the family written notice of an IFSP review and inform them services will be suspended until the plan can be reviewed. Documentation of all attempts to contact the family must be maintained.

If possible, the family service coordinator will try to convene an IFSP review meeting with the family to determine what, if any, services the family wants to receive and how those services can best be configured to meet the family’s needs. If the family states at the meeting that they no longer want to receive services, the family service coordinator should document the family’s desire to withdraw by completing the Declining Participation form. At a minimum, hold an immediate exit meeting with the family to discuss other available community resources.

The Declining Participation Form can be found at:
http://www.ksits.org/download/Declining_Participation.doc

The local tiny-k program service coordinator then exits the infant or toddler from services using “parent withdrew” as the exit status for the Kansas Infant-Toddler Services’ data system. The service coordinator should remind the family that if they change their mind, they may re-refer their infant or toddler.

D. Child/Family Cannot Be Located

If a family cannot be reached as described in “C” above, the local tiny-k program should send a letter to the address on file, requesting the family contact the program with new contact information. If the family does not respond to the first letter, the program should send a certified letter to the address on file giving the family written notice of an IFSP review and inform the family that services will be suspended until the IFSP can be reviewed.

If the family does not contact the local tiny-k program by the time the IFSP expires, the program can exit the infant or toddler upon expiration of the IFSP under the exit reason of “child/family could not be located.” Documentation of all attempts to contact the family is to be maintained.