



## **ESTABLISHING CHILD FIND SYSTEMS TO IDENTIFY ELIGIBLE INFANTS AND TODDLERS UNDER THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT PART C PROGRAM**

### **A VISION OF SERVING ALL INFANTS AND TODDLERS WITH DELAYS AND DISABILITIES**

The vision of the U.S. Department of Education (ED) is that all infants and toddlers with delays or disabilities receive high-quality early intervention services and supports as early as possible to empower them to thrive and meet their and their family's individualized needs.

To meet this vision, State and local agencies must have a comprehensive system in place so that all infants and toddlers with delays or disabilities who are eligible for the Individual with Disabilities Education Act (IDEA) Part C early intervention services are promptly and equitably identified and evaluated. This requires that States and local agencies continuously examine and improve policies and practices aimed at identifying and evaluating infants and toddlers for delays and disabilities, particularly those who have been historically underserved by IDEA Part C, including infants and toddlers of color and those from low-income families, rural communities, and whose first language is not English.

To support these efforts, ED is releasing this document and accompanying implementation technical assistance guides. These resources provide guiding principles, identify specific strategies, and highlight resources and best practices for ensuring that families have equitable access to IDEA Part C services. This information is intended for IDEA Part C coordinators, State and local early childhood program administrators, early childhood and health providers, families, policymakers and any individuals or organizations committed to improving outcomes for infants and toddlers with disabilities.



## **IDEA PART C CAN DRAMATICALLY IMPROVE OUTCOMES, BUT MANY FAMILIES STRUGGLE TO ACCESS SERVICES**

The IDEA Part C program is designed to promote the development of infants and toddlers with delays or disabilities, enhance the capacity of families to meet the developmental needs of their infants and toddlers, minimize the need for special education and related services when children enter school, and enhance children's long-term outcomes. A strong evidence base indicates that IDEA Part C services can dramatically improve children's cognitive, physical, communication, and social-emotional development. Furthermore, studies demonstrate that the earlier infants and toddlers with or at risk for disabilities are identified and served, the better the outcomes for the child, the family, and the educational and social systems that serve them.

IDEA Part C requires States to have a comprehensive child find system in place to identify, locate, and evaluate, as early as possible, all infants and toddlers with delays or disabilities in the State who may be eligible for early intervention services.<sup>1</sup> The comprehensive child find system must be coordinated with other State agencies who serve young children, include a referral system, and focus on early identification of infants and toddlers with disabilities and at risk for developmental delays. Missed opportunities within the child find system can have significant short- and long-term effects. Infants and toddlers who are not identified as early as possible may not receive services critical to helping them meet developmental milestones in a timely manner, resulting in a delay of foundational skills needed to support ongoing development and learning, and in turn impacting their long-term academic, behavioral, and developmental outcomes.

However, data shows that child find systems in many States are not being implemented as effectively or equitably as they should be. Recent data for IDEA Part C<sup>2</sup> showed that nationally, 3.2 percent of infants and toddlers are receiving services, but the percentage of infants and toddlers served varies across States from less than 1 percent to more than 10 percent. Studies have found that the process of identification, referral, and evaluation leaves a high percentage of eligible infants and toddlers behind who never receive early intervention services. For example, one study found that only 20 percent of infant and toddlers who would be eligible for early intervention services were referred for an evaluation, and only 5 percent of those received services.<sup>3</sup>

In addition, there are groups of infants and toddlers, particularly infants and toddlers of color, those from low-income families, and those living in rural areas, that are disproportionately less likely to be identified and evaluated for IDEA Part C. For example, one study found that at 24 months of age, eligible Black children were five times less likely to receive services than White children.<sup>4</sup> IDEA Part C program data has also revealed service gaps for Native American children compared to White children. Research has shown children from low-income families are 10 to 14 percent less likely to receive early intervention services than their peers from wealthier families.<sup>5</sup> These gaps are driven by a variety of factors, including disparities in access to pediatric care, societal biases, and constrained resources that limit robust informational and outreach activities to underserved communities.



## **ADHERING TO GUIDING PRINCIPLES IN IDEA PART C POLICIES AND PRACTICES CAN INCREASE ACCESS TO SERVICES**

There are many individuals, agencies, and organizations involved in IDEA Part C that work to ensure all eligible infants and toddlers and their families are identified and receive services. ED formed a federal interagency workgroup to support State efforts in implementing an equitable and comprehensive system that identifies and evaluates infants and toddlers with disabilities. Staff from ED, the Department of Health and Human Services, and other federal partners comprised the federal interagency workgroup, focusing on the eligibility process of the IDEA Part C child find system. This workgroup reviewed the current research and program data and held listening sessions with State early childhood administrators, Part C coordinators, families, service providers, researchers, national professional organizations, and early childhood technical assistance providers to better understand, and provide technical assistance on, how systems were being implemented across the country, key challenges, and successful practices for identifying and evaluating infants and toddlers with disabilities.

Based on the data, research, and conversations, the federal interagency workgroup identified the following key guiding principles:

- Families of infants and toddlers with disabilities have **access** to IDEA Part C services regardless of race, ethnicity, language, socio-economic status, gender identification, and location;
- Policies and practices promote the **earliest possible identification** of developmental delay or disability to increase the possibility that all infants and toddlers will reach their full potential;
- **Data and evidence** inform policies and practices and drive a culture of continuous improvement;
- **Family voice** is valued and informs the child find system and guides the eligibility process;
- **Culturally and linguistically responsive** practices, processes, and policies are used throughout the child find system and within the eligibility process to support an inclusive, equitable, and just system;
- The **individualized needs of each and every infant and toddler** are considered within the context of their family, community, and daily routines. This includes how social determinants of health and development and adverse child experiences impact all aspects of a child's development and learning and how relational health can build resilience and adaptive skills; and
- Ongoing and intentional **interagency collaboration** promotes comprehensive services and a seamless experience for infants and toddlers and families that is equitable across families.

## **PUTTING THE GUIDING PRINCIPLES INTO PRACTICE**

Putting the guiding principles into practice requires that State and local agencies implement equitable and comprehensive systems that include, at minimum, the following components:

- Public awareness and outreach strategies that clearly communicate the role of Part C services and are differentiated to support referral sources, providers, and families from all backgrounds in understanding their role in the eligibility process;
- Communication and data sharing structures for seamless transmission of information between referral sources and Part C systems, so families can easily move from one step of the eligibility process to the next;
- Data systems to monitor and track developmental screenings in the community, as well as the infants and toddlers who are referred to IDEA Part C, so early childhood systems can analyze disaggregated data on how families progressed through the eligibility process and any disparities in their access to these services;
- Evaluation and assessment procedures that are evidence-based, rigorous and include culturally and linguistically appropriate measures that accurately identify infants and toddlers' strengths and developmental needs;
- Eligibility determination practices that consider the needs of the whole child, including social-emotional and mental health and the service and support needs of the family;
- A racial, ethnic, and culturally diverse workforce with the knowledge, skills, and competencies to make informed and equitable decisions on eligibility and the services and supports the family and infant or toddler need; and
- Early childhood systems and programs at the State and local level that value inclusive, equitable services and collaboration with families, commit to their roles and responsibilities within their collaborative partnerships, align services across programs, and devote resources and implementation supports to sustain a comprehensive child find system.



## **TO SUPPORT THIS VISION, ED IS PUBLISHING NEW RESOURCES FOR STATE AND LOCAL AGENCIES, PROVIDERS, AND FAMILIES**

While many State and local early childhood systems and programs, early childhood and health providers, and families are working toward designing and sustaining systems that include the above components and reflect the guiding principles, the federal interagency workgroup heard through the listening sessions a desire for additional resources, technical assistance, and information on best practices to support these efforts. Therefore, ED will release a series of implementation briefs over the next several months. The implementation briefs are aligned to the components of an equitable and comprehensive system that identifies, locates, and evaluates infants and toddlers with disabilities and include the following topics: outreach and engagement with families, screening and referral, evaluation and assessment, establishing eligibility, promoting interagency collaboration, personnel development, fiscal systems, and data-based decision making.

Based on feedback on what would be most useful, each of the implementation guides are built on key principles of the IDEA statute and ED's IDEA regulations and include:

-  An *Introduction* with a brief review of the research, relevant data, and discussion of barriers and challenges
-  A local or State *Case Study* that offers a descriptive example of a success story relevant to the topic
-  *Strategies* or best practices for addressing the barriers described to successful implementation of the topic
-  *Strategies in Action* with examples from the field that State administrators can adopt to implement the strategies successfully and with an explicit focus on equity
-  *Resources for Support* in implementing the strategies, such as additional guidance or technical assistance centers

## **WORKING TOGETHER**

The IDEA Part C program is an effective program that can dramatically improve long-term academic, behavioral, developmental, and social outcomes. ED and its federal partners are committed to supporting IDEA Part C systems as they connect to and serve all eligible infants and toddlers with disabilities and their families, particularly those who have been historically underserved by IDEA Part C. We look forward to ongoing partnerships with program administrators, referral sources, families, and providers to promote equitable and comprehensive policies and practices so that all infants and toddlers with delays and disabilities receive high-quality services and supports that empower them to thrive and meet their and their family's individualized needs.

## **ENDNOTES**

1. 34 CFR 303.302
2. U.S. Department of Education, EDFacts Metadata and Process System (EMAPS): "IDEA Part C Child Count and Settings Survey," 2020. Data extracted as of July 7, 2021.
3. McManus et al. (2020). Child characteristics and early intervention referral and receipt of services: A retrospective cohort study. *BMC Pediatrics*. 20. 10.1186/s12887-020-1965-x.
4. Feinberg et al. The impact of race on participation in Part C early intervention services. *Journal of Developmental and Behavioral Pediatrics*. 2011;32(4):284–291.
5. McManus et al. (2020). Child characteristics and early intervention referral and receipt of services: A retrospective cohort study. *BMC Pediatrics*. 20. 10.1186/s12887-020-1965-x.

## **STOCK PHOTO ATTRIBUTIONS**

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## **DISCLAIMER**

Other than statutory and regulatory requirements included in the document, the contents of this document do not have the force or effect of law and are not meant to bind the public. This document is intended only to provide clarity to the public regarding existing requirements under the law or agency policies. This document is intended as a resource on identifying, locating, and evaluating infants and toddlers for Individuals with Disabilities Education Act (IDEA) Part C services. Further, this document does not provide specific guidance on Federal disability laws.

This document contains resources and examples that are provided for the user's convenience. The inclusion of these materials is not intended to reflect their importance, nor is it intended to endorse any views expressed, or products or services offered. These materials may contain the views and recommendations of various subject-matter experts as well as hypertext links, contact addresses and websites to information created and maintained by other public and private organizations. The opinions expressed in any of these materials do not necessarily reflect the positions or policies of the U.S. Department of Education (Department). The Department does not control or guarantee the accuracy, relevance, timeliness, or completeness of any outside information included in these materials. For the reader's convenience, this document contains examples of potentially useful products and resources. Inclusion of such information does not constitute an endorsement by the Department or the Federal government, nor a preference/support for these examples as compared with others that might be available and be presented.