

Maryland Infants and Toddlers Program

Physician's Guide

For Referring Children with Developmental Delays and Disabilities to Maryland's System of Early Intervention Services



The Maryland Infants and Toddlers Program is coordinated by State and local agencies and organizations. Maryland State Department of Education, Division of Special Education/Early Intervention Services is the lead agency.

Through the Maryland Infants and Toddlers Program, young children with developmental disabilities may be eligible for early intervention—a statewide system of services and supports designed to enhance the potential for growth and development in children with developmental disabilities and the ability of families to meet the special needs of their children. A pediatrician, NICU doctor, family physician, or other health care provider is often a family's first link to early intervention. If you or a child's family has a concern about a child's development, please refer the child and family for early intervention.

Complete the **Maryland Infants and Toddlers Program Referral Form** (see inside). Then phone or fax the referral to the local Infants and Toddlers Program in the jurisdiction where the child and family live.

Allegany County	(PH) 301-759-2415	(Fax) 301-759-2420
Anne Arundel County	(PH) 410-222-6911	(Fax) 410-222-6916
Baltimore City	(PH) 410-396-1666	(Fax) 410-547-8292
Baltimore County	(PH) 410-887-2169	(Fax) 410-339-3946
Calvert County	(PH) 410-414-7034	(Fax) 410-535-7383
Caroline County	(PH) 410-479-3246	(Fax) 410-479-4204
Carroll County	(PH) 410-876-4437, x2277	(Fax) 410-751-3496
Cecil County	(PH) 410-996-5444	(Fax) 410-996-1062
Charles County	(PH) 301-609-6808	(Fax) 301-609-6691
Dorchester County	(PH) 410-221-1111, x1024	(Fax) 410-221-5215
Frederick County	(PH) 301-600-1612	(Fax) 301-600-3280
Garrett County	(PH) 301-533-0240	(Fax) 301-334-7978
Harford County	(PH) 410-638-3823	(Fax) 410-638-3825
Howard County	(PH) 410-313-7017	(Fax) 410-872-4918
Kent County	(PH) 410-778-7164	(Fax) 410-778-6193
Montgomery County	(PH) 240-777-3997	(Fax) 240-777-3132
Prince George's County	(PH) 301-265-8415	(Fax) 301-883-3907
Queen Anne's County	(PH) 410-758-0720, x4458	(Fax) 410-758-2838
Somerset County	(PH) 410-651-1616, x239	(Fax) 410-651-2931
St. Mary's County	(PH) 301-475-5511, x32223	(Fax) 301-475-2469
Talbot County	(PH) 410-820-0319	(Fax) 410-822-9508
Washington County	(PH) 301-766-8217	(Fax) 301-791-6716
Wicomico County	(PH) 410-677-5250	(Fax) 410-677-5817
Worcester County	(PH) 410-632-5033	(Fax) 410-632-3867

If you suspect developmental delay or atypical development in a child age birth to three years, or if a child has a high probability medical condition, refer the child and family to the Maryland Infants and Toddlers Program for early intervention services. See page 4 for examples of atypical development. High probability medical conditions that necessitate referral, include but are not limited to the following:

- AIDS
- Birth weight <1,200 grams
- Chronic Lung Disease (CLD)
- Congenital Infection—Symptomatic
- Congenital Malformation—Severe
- Encephalopathy—Severe
- Epilepsy—Severe
- Fetal Alcohol Syndrome
- Hearing Impairment (Bilateral or Unilateral)
- Inborn Error of Metabolism
- Intraventricular Hemorrhage (IVH) Grades III/IV
- Lead Poisoning—Elevated Blood Lead Level $\geq 20 \mu\text{g/dL}$
- Necrotizing Enterocolitis (NEC)—Surgical
- Neonatal Abstinence Syndrome
- Neurodegenerative Disorder
- Periventricular Leukomalacia (PVL)
- Visual Impairment

Be the link. Make the referral.
The earlier, the better.

For additional information, call the Maryland Infants and Toddlers Program: 410-767-0261 or toll free 1-800-535-0182.

As the central figure in a child's medical home, you can be the link between families and the early intervention process.



The Physician's Role in Early Intervention

Early identification is critical.

"Early identification of developmental disorders is critical to the well-being of children and their families. It is an integral function of the primary care medical home and an appropriate responsibility of all pediatric health care professionals... children who have positive screening results for developmental problems should be referred to early developmental intervention and early childhood services and scheduled for earlier return visits to increase developmental surveillance."

-Council on Children with Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee and Medical Home Initiatives for Children With Special Needs Project Advisory Committee; PEDIATRICS Vol. 118 No. 1 July 2006.

Link families to early intervention.

As a primary health care provider and a central figure in a child's medical home, you are often a family's first link to early intervention services. Parents may bring a developmental concern to your attention or you may identify a concern as part of a routine visit or developmental screening. You can help families engage in the early intervention process in five simple ways.

1. **Screen** infants and toddlers for developmental delay, atypical development, and high probability medical conditions.
2. **Refer** infants and toddlers ages birth to 3 to their local Infants and Toddlers Program as soon as you or the family becomes concerned about the child's development. When making a referral, provide as many details as possible about the child's developmental and health status, and include essential information requested on the **Maryland Infants and Toddlers Referral and Feedback Form**. This information will help the local Infants and Toddlers Program prepare for an initial evaluation of the child, and develop an Individualized Family Service Plan (IFSP) if the child is determined eligible.
3. **Arrange** for appropriate medical etiologic diagnostic evaluations and share the findings with the child's family. With the parent's permission, also share the findings with the local Infants and Toddlers Program so that relevant information can be shared with early intervention service providers and the child's IFSP can be modified, if needed.
4. **Review** the child's initial and annual assessment results and routinely speak with the family about the child's progress towards meeting goals addressed on the IFSP. With the parent's permission, the local Infants and Toddlers Program will provide you with initial and annual assessment results, as well as ongoing information about the child's early intervention services.
5. **Provide** medical updates, offer recommendations, and share your concerns about the child's development with the local Infants and Toddlers Program staff. As a vital member of the child's early intervention team, your input is extremely valuable.

Together, physicians and early intervention personnel can help parents make a difference in the lives of their children with disabilities.



After a Physician Makes the Referral

Eligibility is determined.

After you phone or fax referral information to the appropriate number, the local Infants and Toddlers Program contacts the family to describe the program. If the family consents, a multidisciplinary eligibility evaluation is scheduled to determine whether the child is eligible for early intervention. See side bar at right for eligibility criteria. A multidisciplinary eligibility evaluation includes at least two professionals from different disciplines. As the child's primary care physician, you can be one of those professionals. The child's adaptive, cognitive, language, motor, and social-emotional development are assessed as part of this process, as are the child's hearing, vision, and general health status.

Individualized Family Service Plan is developed.

If the child is determined eligible for early intervention, the local Infants and Toddlers Program develops an Individualized Family Service Plan (IFSP) with the family, within 45 days of your referral. The IFSP is the working document that identifies services and supports (including frequency and duration) to meet specific early intervention outcomes for the child, based on the unique needs of the child and family. In most cases, early intervention services listed on the IFSP begin within 30 days of the date of the parent's signature on the plan. The IFSP is reviewed on an ongoing basis and modifications are made as appropriate. The IFSP is re-written annually, or more often if necessary.

Child receives early intervention services.

Children who are eligible for early intervention due to a $\geq 25\%$ delay and/or atypical development will continue to receive early intervention services until the delay or atypical development resolves. If the concerns are resolved, the local Infants and Toddlers Program will help the child and family transition to other community resources as appropriate. If concerns persist to age 3, the local Infants and Toddlers Program will transition the child and family to community services, or services through an Extended IFSP until the beginning of the school year following the child's 4th birthday, or school services under an Individualized Education Program (IEP). On the other hand, children who are eligible for early intervention due to a high probability condition are eligible to participate in early intervention until age 3. Depending whether or not concerns exist at age 3, the local program may transition the child and family to community services, or services through an Extended IFSP, or school services under an Individualized Education Program (IEP).

Eligibility Criteria

Children ages birth to 3 years may be eligible if they meet one of the following criteria:

1. $\geq 25\%$ delay compared to chronological age or adjusted age* in one or more of the following domains:
 - adaptive
 - language (expressive or receptive)
 - motor (fine or gross)
 - social-emotional
 - cognitive
2. Diagnosed condition that has a high probability of resulting in delayed or atypical development**
3. Atypical development in one or more of the above domains

*A child's adjusted age is used to determine eligibility if the child was born prior to 37 weeks gestational age. A child's adjusted age is used until the child's adjusted age is 12 months.

**Atypical development refers to quality of performance. A child may demonstrate skills that are age appropriate but that are of atypical quality.

Examples of Atypical Development:

- **Adaptive:** Refusal to take foods of a certain texture
- **Language:** Perseverative repetition of words
- **Motor:** Hypertonicity and arching that results in early rolling (gross motor) or tremulousness and overshooting when reaching for objects (fine motor)
- **Social-emotional:** Decreased initiation of communication for social purposes
- **Cognitive:** Repetitive and stereotyped patterns of play with objects

Research shows that interventions are most effective when they are family-centered and goals are individualized.



More About Early Intervention In Maryland

The **Maryland Infants and Toddlers Program (MITP)** provides family-centered early intervention services and supports to help families enhance their children's developmental potential. In **2012**, the MITP provided early intervention services to more than **16,100** children and their families through 24 local Infants and Toddlers Programs. The MITP provides early intervention services at no direct cost to families.

Research and best practices demonstrate that infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts. The MITP bases its early intervention practices on best available research and evidence-based practice, while adhering to relevant laws and regulations under Part C of the Individuals with Disabilities Education Act (IDEA).

Acknowledging the primary role of the family in the early intervention process, Maryland's early intervention system has evolved from a traditional child-centered "clinical model" to a family-centered developmental model where service providers work with the family in planning and providing services to help foster the development of their child. The family participates as a member of the Individualized Family Service Plan (IFSP) team that decides which services are best for that individual child and family. Outcomes are generated by the IFSP team based on the unique needs, interests, and resources of that child and family.

Since each family has its own aspiration for its child and family, individualized early intervention outcomes are likely to differ from one child to another despite the fact that children may have the same disability. Similarly, the frequency, duration, and types of services may differ for children who share the same disability. Factors such as severity of the disability, the child's age and temperament, and the family needs and resources, contribute to decisions regarding the type and amount of early intervention services provided. For more information on Maryland's early intervention system and other early childhood initiatives, call 410-767-0863, or visit www.mdecgateway.org.

Family-Centered Services

"Research demonstrates that interventions are most effective when they are family-centered; goals are individualized to meet the specific needs, interests, and resources of the children and families served; and strategies and activities target everyday childhood experiences."

-Shonkoff, JP and Phillips, DA (Eds.) (2000). From Neurons to Neighborhoods. The Science of Early Child Development. Washington, D.C.: National Academy Press.

The Maryland Infants and Toddlers Program provides family-centered services by:

- Treating families with dignity and respect,
- Providing choices to meet individual family priorities and concerns,
- Sharing all available information so that families can make informed decisions, and
- Providing support that empowers families and enhances parental competence.

Maryland Infants and Toddlers Program Referral and Feedback Form

Please complete this form for each child you refer for early intervention. Diagnosis of a specific condition or disorder is not necessary for referral.

SECTION 1— To be completed by Physician/Health Care Provider/Referring Agency

Parent/Child Contact Information:

Child Name: _____

Date of Birth: _____/_____/_____ Child Age in Months: _____ Gender: M / F

Home Address: _____

City: _____ State: **Maryland** Zip Code: _____

Parent/Guardian: _____ Relationship to Child: _____

Primary Language: _____ Home Phone: _____ Other Phone: _____

Reason(s) for Referral to Early Intervention: *Please check all that apply.*

☐ Identified condition or diagnosis (e.g., spina bifida, Down syndrome, Birthweight <1200g): _____

☐ Suspected developmental delay or concern (*Please circle areas of concern*):

Motor/Physical Cognitive Social/Emotional Speech/Language Behavior Other: _____

☐ Failed Standardized Developmental Screening Tool (*Please indicate screen used and attach screen results*):

☐ Ages and Stages ☐ PEDS ☐ Other: _____

☐ At Risk/High Probability Factor (*Describe*): _____

☐ Other (*Describe*): _____

Referral Source Contact Information:

Person Making Referral: _____ Date of Referral: _____/_____/_____

Address: _____ City/State: _____ Zip: _____

Office Phone: _____ Office Fax: _____ E-mail: _____

SECTION 2— To be completed by the Parent/Guardian

Parent/Guardian Consent to Release Information:

I, _____ (*print name of parent or guardian*), give my permission for my pediatric health care provider (listed above) and the Maryland Infants and Toddlers Program to share and communicate any and all pertinent information regarding my child (*print child's name*) _____.

Parent/Guardian Signature: _____ Date: _____/_____/_____

SECTION 3— To be completed by Local Early Intervention System (local Infants and Toddlers Program) and returned to the Referral Source (e.g., physician)

Date Referral Received: _____/_____/_____

Attempts to Contact Unsuccessful: ☐

Name of Assigned Service Coordinator: _____

Office Phone: _____ Office Fax: _____ E-mail: _____

Eligible for Early Intervention Services? ☐ Yes ☐ No

Initial Results of IFSP (*Attach IFSP Part II, Section A*):

Areas of Development to be Addressed:

☐ Cognitive

☐ Expressive Language

☐ Receptive Language

☐ Social-Emotional

☐ Adaptive/Self-Help

☐ Gross Motor

☐ Fine Motor

Initial Services to be Provided:

☐ Special Instruction

☐ Speech/Language Therapy

☐ Occupational Therapy

☐ Physical Therapy

☐ _____ ☐ _____

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For more information:

Call or write:

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Division of Special Education/Early Intervention Services
Policy and Accountability Branch
200 West Baltimore Street, 9th Floor
Baltimore, Maryland 21201
Phone: 410-767-0863
Toll Free: 1-800-535-0182
Fax: 410-333-8165

Or visit the Maryland Early Childhood Gateway: www.mdecgateway.org

The Maryland Early Childhood Gateway is an online resource for providers and families of young children with disabilities, birth through 5, developed and maintained through a partnership between the Maryland State Department of Education, Division of Special Education/Early Intervention Services and the Johns Hopkins University, School of Education, Center for Technology in Education.

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This publication was developed and produced by the Maryland State Department of Education, Division of Special Education/Early Intervention Services with funds from the U.S. Department of Education. Users who copy or share the information contained in this publication must credit the Maryland State Department of Education, Division of Special Education/Early Intervention Services. The Maryland State Department of Education is the lead agency for the Maryland Infants and Toddlers Program, the statewide program of services and supports coordinated by State and local agencies and organizations. The Maryland State Department of Education does not discriminate on the basis of race, color, sex, age, national origin, religion, disability, or sexual orientation in matters affecting employment or in providing access to programs. For inquiries related to Department policy, contact the Equity Assurance and Compliance Branch, Office of the Deputy State Superintendent for Administration, Maryland State Department of Education, 200 W. Baltimore Street, 6th Floor, Baltimore, MD 21201-2595, 410-767-0433, Fax 410-767-0431, TTY/TDD 410-333-6442, www.MarylandPublicSchools.org.

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Division of Special Education/Early Intervention Services

Revised August 2013



Division of Special Education/Early Intervention Services