Early Intervention (EI)

Introduction
If your child has been diagnosed with a disability or developmental delay, or if you are concerned that your child is at risk of a developmental delay, this fact sheet will give you information about the Illinois Early Intervention Program (EI) and let you know what resources are out there to help maximize your child’s development.

What is EI?
- Early Intervention (EI) is a program that serves children under age 3 who have developmental delays, disabilities, or are in at-risk conditions for developmental delays.
- At no cost, the EI program will test infants and toddlers to see if the child has a delay in movement, learning, dealing with others, behavior, or self-help skills.
- If your child has a developmental delay or a disability, a service coordinator will be assigned to assist your family. Service Coordinators do the following:
  - Assist the family and other Individual Family Service Plan (IFSP) team members in the development of a plan of services that meets the child’s individual needs and addresses the concerns and priorities of the family;
  - Link the family to service providers and offer information needed to make informed decisions; and
  - Coordinate and monitor the delivery of services to make sure that the family is receiving the services it needs.
- EI may help provide your child the best possible start in life, prevent or lessen the need for more intervention in the future and reduce related costs.

Who is Eligible for EI?
Children under the age of 3 who:
- Are experiencing developmental delays in any of the following areas:
• Have been diagnosed with certain physical or mental conditions which have a high probability of resulting in developmental delays (such as cerebral palsy or Down syndrome)\(^1\); or

• Have certain family circumstances that put them at risk of having substantial delays, such as:
  o A Parent diagnosed with a Developmental Disability;
  o A Parent diagnosed with severe mental disorder; or
  o Any three of the following:
    ▪ Primary caregiver currently abuses alcohol or other substances;
    ▪ Primary caregiver is currently less than 15 years of age;
    ▪ Child is currently homeless;
    ▪ Chronic illness of the primary caregiver;
    ▪ Mother abused alcohol or other substances during pregnancy;
    ▪ Primary caregiver has an education level equal to or less than the 10\(^{th}\) grade, unless that level is appropriate to the primary caregiver's age; or
    ▪ Indicated case of abuse or neglect regarding the child and the child has not been removed from those circumstances.

**Steps of the Process**

1. REFERRAL to Child and Family Connections (CFC) office
2. INTAKE completed by a CFC service coordinator
3. EVALUATION (to determine eligibility) and ASSESSMENT
4. Individualized Family Service Plan (IFSP) development
5. PARENT CONSENT for services
6. SERVICES PROVIDED
7. IFSP REVIEW every six months or more frequently, if needed
8. TRANSITION to a program for 3 – 5 year old children

What Services are Offered?

- assistive technology devices and services
- early identification screening and assessment services
- family training, counseling and home visits
- health services necessary to enable the infant or toddler to benefit from the other early intervention services
- medical services (only for diagnostic or evaluation purposes)
- nursing services
- nutrition services
- occupational therapy
- physical therapy
- psychological services
- service coordination
- social work services
- special instruction/developmental therapy
- speech language pathology and audiology services
- transportation and related costs
- vision services

Who Provides the Services?

Early Intervention services are available through public and private providers who have met state qualification requirements and service standards. Services provided differ based on each child and family’s needs. Examples include the following:

- special educators
  (developmental therapists)
- speech/language pathologists
  and audiologists
- occupational therapists
- physical therapists
- psychologists
- social workers
- nurses
- dietitian nutritionists
- family therapists
- orientation and mobility specialists
- pediatricians and other physicians
- optometrists

Who Pays for the Services?

Services are paid for with a combination of government and family resources. The cost of evaluation, assessment, development of a service plan, and service coordination are always paid by the program and provided to families at no cost. Ongoing Early Intervention services are paid for by a combination of health
insurance, family contributions, and EI funds. If a family has private health insurance, the cost of services is first billed to the insurance. Additional costs not covered by insurance are paid with EI funds. Families contribute to the cost of services by paying an annual fee assessed on a sliding scale based on income. Families with annual incomes below certain levels or who meet other criteria do not pay a fee.

**How do I learn more about Early Intervention?**

Children and families access the Early Intervention service system through one of 25 regional Child and Family Connections agencies (CFCs). To find a local CFC, call (800) 323-4769.

**DO YOU HAVE A QUESTION?**
Contact Equip for Equality’s Special Education Clinic Helpline
1-866-KIDS-046 (voice) or 800-610-02779 (TTY)
SpecialED@equipforequality.org
www.equipforequality.org

This resource material is intended as a guide for people with disabilities. Nothing written here shall be understood to be legal advice. For specific legal advice, an attorney should be consulted. Equip for Equality, an independent nonprofit organization, is the Illinois state Protection & Advocacy System whose mission is to advance the human and civil rights of children and adults with disabilities. The Special Education Helpline seeks to empower parents to advocate effectively. The Special Education Clinic, Helpline, and these publications were made possible by grants from the Chicago Bar Foundation, The Field Foundation, Illinois Bar Foundation, Illinois Equal Justice Foundation, Polk Bros Foundation, and the State of Illinois Department of Human Services. The contents of this publication are the sole responsibility of the authors and do not represent the official views of the grantors.

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