

# Rhode Island Early Intervention Certification Standards

## Policies and Procedures

### IV. Eligibility Determination

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Certified Early Intervention providers are required to develop policies and procedures to effectively identify children and families eligible for early intervention. Children ages birth through 2 who are developmentally delayed or have a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay are eligible for early intervention services. These delays are defined as follows:

#### Eligibility Criteria

#### Children with Established Conditions (Single Established Condition-SEC):

Children with established conditions that have a high probability of resulting in a significant developmental delay.

- A physical or mental condition known to impact development, including, but not limited to, medical diagnosis and established conditions such as:
  - Chromosomal Disorders such as Down Syndrome, Trisomy 18, Trisomy 13 and chromosomal deletions and duplications
  - Genetic Disorders including Neurocutaneous syndromes; Inborn errors of metabolism; Very long fatty chain disorders and other specific syndromes
  - Sensory Impairments such as moderate to severe hearing loss and/or visual impairments
  - Neurological Disorders such as Cerebral Palsy, Epilepsy, Degenerative Encephalopathy
  - Congenital Anomalies such as Spinal Bifida, Hydrocephalus, Cleft Palate
  - Socio-Communicative Disorders such as autism spectrum disorders
  - Infant Psychiatric Conditions such as Reactive Attachment Disorder, Childhood Depression, Pica, Adjustment Disorders
  - Medically Related Disorders such as Respiratory Insufficiency, AIDS/HIV(+), Failure to Thrive, Very Low Birth Weight and chronic disorders of various organ system
  - Prenatal exposures such as Neonatal Abstinence Syndrome, Fetal Alcohol Syndrome, Fetal Phenytoin Syndrome, Lead Intoxication; Prenatal infections such as Congenital Rubella, Congenital Syphilis; Perinatal events such as Severe birth asphyxia
  - Acquired Trauma Disorders such as Subdural hemorrhage, Spinal cord injury

(See RI Early Intervention Established Conditions List)

- If a medical diagnosis or condition that has been diagnosed by a physician or appropriate licensed professional is not included in the RI Early Intervention Established Conditions List and it is a condition associated with developmental delay approval by the Lead Agency is required for its use as a Single Established Condition.

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#### Eligibility Criteria

*(Continued)*

- All children diagnosed with established conditions that have a high probability of resulting in developmental delay, are eligible for early intervention services until the child's third birthday, unless there is a change in the status of a diagnosis, or the condition resolves with medical/surgical treatment. Evidence of diagnosis by a physician or appropriate licensed professional must be in the child's record.
- Conditions that are likely to improve may be used only in determining initial eligibility and require eligibility to be re-determined after one year. (See Established Conditions List for specific conditions). These children must meet the criteria for Significant Developmental Delay at that time or must be diagnosed with another qualifying established condition for continued enrollment in Early Intervention.

#### **Children with Established Delays (Significant Developmental Delay-SDD):**

Children who have developmental delays in one or more areas of development. The areas of development considered are (1) cognitive development, (2) physical development (including motor, vision and hearing), (3) communication development (including expressive and receptive language), (4) social and emotional development, and (5) adaptive development.

The determination of a developmental delay must occur in one of the two following ways:

1. Through the use of a norm referenced standardized tool that identifies a delay that is 2 standard deviations below the mean in at least one area of development, or 1.5 standard deviations below the mean in two or more areas of development.

Or

2. Through the use of informed clinical opinion, the multidisciplinary team identifies
  - a significant delay not captured by test scores
  - significant atypical behaviors
  - significant circumstance

In order to be eligible under informed clinical opinion there must be an impact on child/family functioning to the degree that without intervention developmental delay would result.

A clear description must be documented in the IFSP of how the delay, atypical behaviors and/or circumstances are impacting child and/or family functioning and participation in daily routines and activities. Outcomes and services must be directly related to the impact on child/family functioning. If there is no significant impact on child/family functioning, the child is not eligible for services.

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#### Eligibility Criteria (Continued)

Children with Significant Developmental Delay are eligible for early intervention services until their third birthday unless there is a change in functioning. When there has been significant progress and whenever eligibility is questioned a multidisciplinary evaluation/assessment to re-determine eligibility must occur.

A significant delay, significant atypical behaviors, or significant circumstances may include but are not limited to the following:

- Difficulties in attachment and interaction with primary caregivers and family members
- Injurious behavior to self and others
- Inappropriate or limited ways of engaging
- Inconsolability
- Poor attention
- Abnormal muscle tone
- Limited range of motion
- Poor quality of movement
- Significant feeding difficulties
- Multiple signs of sensory impairment
- Atypical responses to sensory input
- Unexplained loss of skills
- Social communication difficulties
- Restrictive and repetitive behaviors
- Significant difficulties with self-regulation
- Sleep disturbances
- Significant trauma or losses
- Multiple placements outside the birth home
- Withdrawal symptoms resulting from prenatal drug exposure, or other impact resulting from maternal use of addictive drugs
- Poor impulse control, anxiety
- History of abuse or neglect
- Family lacking basic needs and resources such as knowledge, education, food, social supports, shelter
- Significant parental physical health, mental health, or substance use concerns
- Intellectual disability of caregiver
- Frequent respiratory infections
- Feeding problems, including, but not limited to, swallowing, poor weight gain and growth concerns