



Please Note:

This webinar was recorded prior to the March 7, 2015 Rule Amendments.
As of 3/7/2015:

- An LPHA must serve on every interdisciplinary team for evaluation and assessments and for the development of the IFSP.
- Teams do not need to complete the BDI-2 for children with an adjusted age of 0 (zero) months before moving to Qualitative Determination of Delay (QDD).
- Each program must have written procedures that establish a system of clinical oversight for eligibility determination. Clinical oversight, which is conducted by a person with knowledge of evaluation and assessment of young children, includes ensuring that:
 - (1) DARS ECI eligibility criteria is applied consistently to children evaluated;
 - (2) testing is administered and scored accurately according to the requirements of the tool;
 - (3) evaluations to determine eligibility are comprehensive;
 - (4) test scores are interpreted and determination of delay includes the application of informed clinical opinion; and
 - (5) eligibility decisions are fully documented in:
 - (A) the eligibility statement; and
 - (B) progress note or evaluation report.
- All IFSP services must be monitored for child progress, not just SST.
- The opportunity for the caregiver's return demonstration must be documented in each service delivery progress note.