SECTION I.  EARLY CHILDHOOD INTERVENTION SERVICES - SCOPE OF WORK

ECI strives to ensure that all eligible children under age three and their families receive quality early intervention services, resources and support needed to reach their developmental goals. These services are provided in partnerships with families within community contexts. Contractor will implement an early childhood intervention (ECI) program to include child find, eligibility determination, follow-along services, and for all eligible children, comprehensive services in Contractor’s approved service area. Follow-along services track the developmental progress of a child who is determined ineligible for, or whose parent declines, early intervention services. Follow-along services are provided only for a documented clinical reason, as determined by the interdisciplinary team. Contractor must obtain prior written parental consent before providing follow-along.

Contractor assumes sole responsibility for staff recruitment, public outreach and service delivery within the approved service area. Furthermore, Contractor assures it will make a good faith effort to coordinate service delivery and public outreach activities with other ECI contractors and health and human services agencies serving the same county(ies). Any modification to the approved application must be requested in writing to HHS-ECI and approved by HHS.

Contractor must provide and document supervision to all staff at the following minimum levels:

- One hour per week for
  - staff who are completing ECI Orientation,
  - staff who are completing their Individual Professional Development Plan (IPDP), and
  - Early Intervention Specialists employed as of August 31, 2011 who are still working to complete their competencies

- Three hours per quarter for
  - All staff employed as of August 31, 2011 (except for Early Intervention Specialists employed as of August 31, 2011 who are still working to complete their competencies) and
  - All staff who have a completed IPDP.
Contractor must comply with the requirements of 20 U.S.C. §1436(d) and 34 C.F.R. §303.344 regarding development of an Individualized Family Service Plan (IFSP). In addition, the IFSP must include other elements as required by ECI. Contractor must provide the array of ECI services identified in this provision in accordance with the IFSP through qualified service providers. To provide ECI services, the service provider must be knowledgeable in child development and developmentally appropriate behavior, as well as possess the requisite education, demonstrated competence and/or experience identified below. All staff must provide services to address the development of the whole child in the context of the family, and in the context of natural learning activities, in order to strengthen the capacity of the family to meet to unique needs of their child. ECI services must be delivered in accordance with IDEA Part C and 40 Tex. Admin. Code §§108.101-107.

1. **Specialized Skills Training**
   a. Specialized skills training may be provided through:
      i. direct one to one intervention with parent and child;
      ii. direct group intervention with parents and their children; or
      iii. direct intervention in childcare settings where ECI staff/subcontractor provides intervention by joining child in their childcare routines and activities, combined with consultation with childcare staff.
   b. Providers of specialized skills training must be knowledgeable in:
      i. implementing strategies across developmental domains; and
      ii. basic behavior intervention strategies (including rewards and consequences).
   c. Providers of specialized skills training must have knowledge and training in the domain in which the child has an identified developmental need.

2. **Occupational Therapy**
   a. Occupational therapy may be provided through:
      i. direct one-to-one intervention with the parent and child; or
      ii. direct group intervention with parents and their children.
   b. Occupational therapy must be provided by an:
i. Occupational Therapist (OT) licensed by the Texas Board of Occupational Therapy Examiners; or

ii. Occupational Therapy Assistant licensed by the Texas Board of Occupational Therapy Examiners, working under the direction of a Licensed Occupational Therapist.

3. **Physical Therapy**
   
a. Physical therapy may be provided through:
   
i. direct one-to-one intervention with the parent and child; or
   
ii. direct group intervention with parents and their children.
   
b. Physical therapy must be provided by a:
   
i. Licensed Physical Therapist (LPT) licensed by the Texas State Board of Physical Therapy Examiners; or
   
ii. Physical Therapy Assistant (PTA) licensed by the Texas State Board of Physical Therapy Examiners, working under the direction of a Licensed Physical Therapist.

4. **Speech-Language Pathology**
   
a. Speech-language pathology may be provided through:
   
i. direct one-to-one intervention with the parent and child; or
   
ii. direct group intervention with parents and their children.
   
b. Speech-language pathology must be provided by a:
   
i. Speech-Language Pathologist (SLP) licensed by the Texas State Board of Examiners for Speech-Language Pathology and Audiology;
   
ii. Speech-Language Pathologist – Clinical Fellowship Year (SLP-CFY) officially engaged in clinical fellowship year; or
   
iii. Speech-Language Pathology Associate (SLPA) licensed by the Texas State Board of Examiners for Speech-Language Pathology and Audiology, working under the direction of a licensed Speech-Language Pathologist.
5. **Psychological Services**
   
a. Psychological services may be provided through:
   
i. direct one-to-one intervention with the parent and child; or
   
ii. direct group intervention with parents and their children.
   
b. Psychological services must be provided by a:
   
i. Licensed Psychologist (LP) licensed by the Texas State Board of Examiners of Psychologists; or
   
ii. Psychological Associate (LPA) licensed by the Texas State Board of Examiners of Psychologists, working under the direction of a Licensed Psychologist.

6. **Social Work**
   
a. Social work must be provided by a:
   
i. Licensed Baccalaureate Social Worker (LBSW) licensed by the Texas State Board of Social Work Examiners;
   
ii. Licensed Master Social Worker (LMSW) licensed by the Texas State Board of Social Work Examiners; or
   
iii. Licensed Clinical Social Worker (LCSW) licensed by the Texas State Board of Social Work Examiners.

7. **Counseling**
   
a. Counseling services may be provided through:
   
i. direct one-to-one intervention with the parent and ECI enrolled child; or
   
ii. direct group intervention with parents and their ECI eligible children.
   
b. ECI counseling services do not include, and ECI program funds may not be used for, behavioral health services to adults, siblings or other family members related to problems outside of the parent–child relationship. Examples include substance abuse, domestic violence, specific mental health diagnoses, and marital issues. These services may be provided through referral to other community service delivery systems.
c. Counseling must be provided (within scope of their state licensure) by a:

i. Licensed Clinical Social Worker (LCSW) licensed by the Texas State Board of Social Work Examiners;

ii. Licensed Professional Counselor (LPC) licensed by the Texas State Board of Examiners of Professional Counselors;

iii. Licensed Marriage and Family Therapist (LMFT) licensed by the Texas State Board of Examiners of Marriage and Family Therapists; or

iv. Licensed Psychologist (LP) licensed by the Texas State Board of Examiners of Psychologists.

8. Behavioral Intervention

a. Services are delivered through a structured plan to strengthen developmental skills while specifically addressing severely challenging behaviors as determined by the IFSP team. A behavior plan is developed by the IFSP team (that includes the plan supervisor) to:

i. identify goals;

ii. conduct a functional assessment to determine the motivation for the behavior;

iii. develop a hypothesis;

iv. design support plans; and

v. implement, monitor, and evaluate outcomes.

b. Behavioral intervention is provided through direct one-to-one intervention with the child combined with direct intervention with the parent and child.

c. Behavioral intervention must be provided by individuals with:

i. knowledge of child development;

ii. knowledge of developmentally appropriate behavior; and

iii. skills to utilize behavior analysis techniques and intervention in ways that help achieve the desired behavior change.
d. Behavioral intervention must be provided according to a structured plan supervised by one of the following:

i. Board Certified Behavior Analyst

ii. one of the following who is trained in Positive Behavior Supports or Applied Behavior Analysis:

- Licensed Psychologist (LP) licensed by the Texas State Board of Examiners of Psychologists
- Licensed Psychological Associate (LPA) licensed by the Texas State Board of Examiners of Psychologists
- Licensed Professional Counselor (LPC) licensed by the Texas State Board of Examiners of Professional Counselors
- Licensed Clinical Social Worker (LCSW) licensed by the Texas State Board of Social Work Examiners
- Licensed Marriage and Family Therapist (LMFT) licensed by the Texas State Board of Examiners of Marriage and Family Therapists

e. The team and the parent may specify a provider with the requisite knowledge, skills and training.

9. **Family Education and Training**

   a. Family education and training may be provided through:

   i. direct one-to-one service to the parent (or parent and child); or

   ii. direct group service to parents and their children.

   b. Family education and training must be provided by direct service staff with the requisite knowledge, training or skills in the information being provided.

10. **Assistive Technology**

    a. Assistive technology services may be provided as a distinct service planned on the IFSP by a Licensed OT, PT, or SLP according to the requirements of their profession, or as an activity or strategy for an IFSP outcome by the OT, PT or SLP or other staff as determined by the IFSP team.
b. Purchase of assistive technology devices or equipment may be authorized when the need is clearly stated in the child record with documentation from the child’s Physician, Registered Nurse,Licensed Occupational Therapist, Licensed Physical Therapist, Licensed Speech-Language Pathologist, or other qualified professional, including Auditory Impairment Teachers, Audiologists, and Teachers of the Visually Impaired.

c. Documentation must justify that the purchase is necessary for implementation of the outcomes and strategies in the IFSP. Only assistive technology that cannot be obtained through a third party source will be reimbursed by ECI program funds.

d. For low-tech and readily available materials, authorization is not required. Documentation in IFSP strategies and progress notes identifies the need.

11. **Audiology Services**

a. Audiology services must be provided by a:

i. Licensed Audiologist licensed by the Texas State Board of Examiners for Speech-Language Pathology and Audiology (including only those activities in the definition within the scope of license); or

ii. Teacher of the Deaf and Hard of Hearing certified by the Texas State Board of Education (including only those activities within the scope of the certification).

12. **Vision Services**

a. Vision services must be provided by a Teacher of the Visually Impaired certified by the Texas State Board of Education.

b. Orientation and mobility services are provided by an Orientation and Mobility Specialist certified by the Academy for Certification of Vision Rehabilitation and Education Professionals.

13. **Nutrition**
a. Nutrition services include conducting individual assessments/evaluations for nutritional history and dietary intake, body measurements, biochemical and clinical variables.

b. Nutrition addresses feeding skills and feeding problems, as well as food habits and food preferences.

c. The service involves the development and monitoring of appropriate plans to address the nutritional needs of an enrolled child, and making referrals to appropriate community resources to carry out nutrition goals.

d. Nutrition services must be provided by a Dietitian licensed by the Texas State Board of Examiners of Dietitians.

14. Health Services

Health services may be provided by health professionals acting within the scope of their license and with appropriate training.

15. Nursing Services

a. Nursing services must be provided by a:

i. Registered Nurse licensed by the Texas Board of Nursing

ii. Vocational Nurse licensed by the Texas Board of Nursing

16. Medical Services

Only medical services, by professionals acting within the scope of their license, for the purpose of eligibility determination, that cannot be obtained through a third party source will be reimbursed by ECI program funds.

Contractor will receive referrals from the Texas Early Hearing Detection and Intervention (TEHDI) system and report how the referrals are handled to the Department of State Health Services through the TEHDI system, consider the email notification of a referral as the date of referral, follow procedures in the TEHDI-ECI training manual, and obtain written parental consent before reporting the disposition of the referral.

Contractor will provide the information developed by HHS-ECI relevant to velocardiofacial syndrome to parents of a child who is known by Contractor to have at least two of the conditions listed in Tex. Hum. Res. Code §117.076(b).
Contractor will provide respite care services when necessary to enable a family to participate in or receive other early intervention services under Part C of the IDEA, as provided through this contract.

Contractor will, at a minimum, have staff available to process referrals and meet service delivery needs of families between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday. Contractor must demonstrate the capacity to provide services for 52 weeks each year. Each year Contractor may select up to ten days from the official state or federal holidays to close business. This policy does not eliminate the requirement for Contractor to also offer services to families in the evening or at other times outside 8:00 a.m. through 5:00 p.m. when appropriate to meet individual family needs.