

Early Support for Infants & Toddlers



Kids' Potential, Our Purpose

Guidance: Collaboration between Early Support for Infants and Toddlers and Other Home Visiting Service Program Providers

Overview

This guidance is meant to be used in conjunction with the Memorandum of Understanding (MOU) established between the Early Support for Infants and Toddlers (ESIT) program and the Home Visiting Services Account (HVSA) (Refer to the MOU for more detail). While the MOU provides the guidelines for all providers to follow when collaborating on behalf of families, this guidance includes more detail on best practice and suggestions for teaming to ensure families receive a comprehensive and seamless set of services. The MOU specifically applies to the partnership between ESIT and HVSA but this guidance is to be applied to collaboration with all local home visiting programs including Early Head Start and other programs not included in the HVSA.

Guidance

Screening and Referral

Developmental screenings are used by both Early Intervention (EI) providers and Home Visiting (HV) providers. EI providers use developmental screening tools primarily to determine the need for a full developmental evaluation and to provide additional information in conjunction with an evaluation. HV providers use screenings to monitor development and identify a need for a referral out for further services. HV providers refer any time there are screening results in one or more domains or parent/provider concern.

Children already enrolled in HV services

Once a referral has been received from a HV provider or other referral source, EI providers must follow the steps below:

- If the referral included screening results in one or more areas of development within three months prior to the referral, EI providers must notify parents of their rights to evaluation.
 - If a screening had not been done and there are no documented provider or parent concerns, it may be appropriate to complete a developmental screening to determine the need for an evaluation.
- Request parent consent to:
 - Include any HV providers working with the family in the family assessment process.
 - Follow up with the HV provider working with the family to share the results of the evaluation and any other pertinent information.

Children not already enrolled in HV services

- Any concerns identified during the ESIT family assessment or evaluation that may be addressed by a HV program may trigger a referral for those services.*
- ESIT providers should share other HV options with families not already enrolled in a long-term HV program. This can happen during the intake and the family assessment process. Referrals to HV

should be offered whether or not the child will be receiving ESIT services and require a Release of Information.

Service Coordination and Follow-up

Children already enrolled in HV services

Offer the family a release of information to communicate with the HV provider and ask the family to sign the release. With the family's consent, the Family Resources Coordinator (FRC) must:

- Share the Individualized Family Service Plan (IFSP), enrollment status and progress updates with the HV provider.
- Invite the HV provider to IFSP meetings. If all providers are not able to attend they can contribute in writing or during a separate face-to-face or phone meeting with the FRC.

With the family's consent, the following is recommended:

- Supporting families to design and achieve shared goals, whenever possible, which will allow for integration of goals set within the IFSP or goals planning between home visitors with families
- Reflecting HV services in IFSP outcomes when applicable
- Listing HV services as "other service" on the IFSP when applicable
- Collaboration between EI and HV providers in the form of:
 - Joint home visits. Take advantage of any opportunity to share visits with HV providers and is a wonderful opportunity for providers to coach each other to use strategies that will benefit the child and family.
 - Consultation. Communicate often with HV providers to discuss progress, current outcomes and specific interventions, so information can be reinforced by all providers to promote consistent guidance for parents.
 - Regular case conferencing for families experiencing particularly acute challenges in order to provide well-coordinated services.
 - These practices should happen as often as possible for families receiving both services. This allows for more continuity of care and will reduce the impact of services of the family's regular routine.

Data and Information Sharing and Coordination

- Sharing individual child/family information:
 - Release of information for information sharing and case conferencing is always required for both providers
 - Follow Health Insurance Portability and Accountability Act (HIPAA) and Family Educational Rights and Privacy Act (FERPA) guidelines
- Sharing general program information:
 - Partnering and general information sharing should happen at a local level. Opportunities for this might include ESIT's Local Interagency Coordinating Council meetings or regular meetings between providing agencies.
 - Arrange a meeting between ESIT and HV Local Implementation Agencies at least once a year to ensure up to date information, knowledge of providers, program requirements, and develop a plan for communication and collaboration for the coming year.

*Call the Family Health Hotline **1-800-322-2588** or visit www.parenthelp123.org for support in finding other home visiting services in your county.