**Section 500.55 Early Intervention Services/Devices**

EI services may include the following as deemed necessary under the IFSP:

a) Assistive technology, including:

1) Assistive technology devices, meaning any item, piece of equipment or product system, whether acquired commercially off the shelf, modified or customized, that is used to increase, maintain or improve the functional capabilities of children with disabilities. The term does not include a medical device that is surgically implanted, including cochlear implant, or the optimization (e.g., mapping), maintenance or replacement of that device. Devices must be approved prior to purchase by the Department. Prior approval will not exclude assistive technology devices as defined in this Part that are required in order to meet the child's EI needs. Devices that meet the medical, life sustaining or routine daily needs of the child do not fall within the definition of assistive technology device.

2) Assistive technology services, meaning services that directly assist an infant or toddler with a disability in selection, acquisition or use of an assistive technology device. Assistive technology services include:

A) Evaluating the needs of an infant or toddler with a disability, including a functional evaluation of the infant or toddler with a disability in the child's customary environment;

B) Selecting, designing, fitting, customizing, adapting, maintaining or repairing assistive technology devices;

C) Coordinating and using other therapies, interventions or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs; and

D) Training or technical assistance for an infant or toddler with a disability or, if appropriate, that child's family.

b) Audiology, aural rehabilitation/other related services for the purposes of:

1) Identification of children with auditory impairment, using at risk criteria and appropriate audiologic screening techniques;

2) Determination of the range, nature, and degree of hearing loss and communication functions by use of audiological evaluation procedures;

3) Referral for medical and other services necessary for the habilitation or rehabilitation of an infant or toddler with a disability who has an auditory impairment;

4) Provision of auditory training, aural rehabilitation, speech reading and listening device orientation and training, and other related services;

5) Determination of the child's individual amplification, including selecting, fitting, and dispensing appropriate listening and vibrotactile devices, and evaluating the effectiveness of those devices;

6) Provision of services for prevention of hearing loss; and

7) Family training, education and support provided to assist the child's family in understanding the child's special needs as related to audiology, aural rehabilitation and other related services and to enhancing the child's development.

c) Developmental therapy services for the purposes of:

1) Evaluation to determine a child's developmental status and need for EI services;

2) The design of learning environments and activities that promote the infant's or toddler's acquisition of skills in a variety of developmental areas, including cognitive processes and social interaction;

3) Curriculum planning, including the planned interaction of personnel, materials, and time and space, that leads to achieving the outcomes in the IFSP for the infant or toddler with a disability;

4) Providing families with information, skills and support related to enhancing the skill development of the child;

5) Working with the infant or toddler with a disability to enhance the child's development; and

6) Family training, education and support provided to assist the child's family in understanding the child's special needs as related to developmental therapy services and to enhance the child's development.

d) Family training and support that can include education provided to assist the family of an eligible child in understanding the needs of the child as related to the provider's specific discipline and to enhance the child's development.

e) Health consultation by a licensed physician who has provided recent and/or ongoing medical treatment for the child with service providers who are identified on a child's IFSP as members of the child's multidisciplinary team concerning the health care needs of infants and toddlers with disabilities that will need to be addressed in the course of providing other EI services.

f) Medical services for diagnostic or evaluation purposes provided by a licensed physician to determine a child's developmental status and need for EI services.

g) Nursing services for the purposes of:

1) Evaluation to determine a child's developmental status and need for EI services;

2) Assessment to determine a child's health status for the purpose of providing nursing care, including the identification of patterns of human response to actual or potential health problems;

3) Provision of required nursing care to prevent health problems, restore or improve functioning, and promote optimal health and development during the time the child is receiving other EI services, such as:

A) administration of medications, treatments, and regimens prescribed by a licensed physician; and

B) clean intermittent catheterization, tracheostomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services as required to allow the child to participate in other EI services;

4) Family training, education and support provided to assist the child's family in understanding the child's needs as related to nursing services and to enhancing the child's development. Nursing services do not include hospital or home health nursing care required due to surgical or medical intervention or medical health services such as immunizations and regular "well child" care that are routinely recommended for all children.

h) Nutrition services for the purposes of:

1) Conducting individual assessments in nutritional history and dietary intake, anthropometric, biochemical, and clinical variables, feeding skills and feeding problems, and food habits and food preferences;

2) Developing and monitoring appropriate plans to address the nutritional needs of the eligible child based upon individual assessment;

3) Making referrals to appropriate community resources to carry out nutrition goals; and

4) Family training, education and support provided to assist the child's family in understanding the child's needs as related to nutrition services and to enhancing the child's development.

i) Occupational therapy services to address the functional needs of an infant or toddler with a disability related to adaptive development; adaptive behavior and play; and sensory, motor, and postural development. These services are designed to improve the child's functional ability to perform tasks in home, school, and community settings and include:

1) Identification, evaluation, assessment and intervention;

2) Adaptation of the environment and selection, design and fabrication of assistive and orthotic devices to facilitate development and promote the acquisition of functional skills;

3) Prevention or minimization of the impact of initial or future impairment, delay in development, or loss of functional ability; and

4) Family training, education and support provided to assist the child's family in understanding the child's needs as related to occupational therapy services and to enhancing the child's development.

j) Physical therapy services to address the promotion of sensorimotor function through enhancement of musculoskeletal status, neurobehavioral organization, perceptual and motor development, cardiopulmonary status, and effective environmental adaptation. These services include:

1) Evaluation, screening and assessment of infants and toddlers to identify movement dysfunction;

2) Obtaining, interpreting, and integrating information appropriate to program planning to prevent, alleviate, or compensate for movement dysfunction and related functional problems;

3) Providing individual and group services or treatment to prevent, alleviate, or compensate for movement dysfunction and related functional problems; and

4) Family training, education and support provided to assist the child's family in understanding the child's needs as related to physical therapy services and to enhancing the child's development.

k) Psychological services for the purposes of:

1) Evaluation to determine a child's developmental status and need for EI services;

2) Administering psychological and developmental tests and assessment procedures to determine the need for psychological or other counseling services;

3) Interpreting assessment results;

4) Obtaining, integrating and interpreting information about child behavior and child and family conditions related to learning, mental health and development;

5) Planning and managing a program of psychological or other counseling services, including psychological or other counseling for children and parents, family counseling, consultation on child development, parent training and education programs;

6) Family training, education and support provided to assist the child's family in understanding the child's needs as related to psychological or other counseling services and to enhancing the child's development; and

7) Identifying, mobilizing and coordinating community resources and services to enable the child and family to receive maximum benefit from EI services.

l) Service coordination carried out by a Service Coordinator to assist and enable an infant or toddler with a disability and the child's family to receive the services and rights, including procedural safeguards, and services that are authorized to be provided through the State's EI Program, including:

1) Assisting parents of infants and toddlers with disabilities in obtaining access to needed EI services and other services identified in the IFSP, including making referrals to providers for needed services and scheduling appointments for infants and toddlers with disabilities and their families;

2) Coordinating the provision of EI services and other services (such as educational, social and medical services that are not provided for diagnostic or evaluative purposes) that the child needs or is being provided;

3) Coordinating evaluations and assessment;

4) Facilitating and participating in the development, review and evaluation of IFSPs;

5) Conducting referral and other activities to assist families in identifying available EI services providers;

6) Coordinating, facilitating and monitoring the delivery of EI services to ensure that the services are provided in a timely manner;

7) Conducting follow-up activities to determine that appropriate Part C services are being provided;

8) Informing families of their rights and procedural safeguards and related resources;

9) Coordinating the funding sources for services required under this Part;

10) Facilitating the development of a transition plan to preschool, school or, if appropriate, other services;

11) Contacting the child/family at a minimum of one time per month to coordinate and monitor the provision of needed evaluation/assessments and services;

12) Developing and maintaining the child's permanent and electronic EI record at the regional intake entity; and

13) Informing families of the availability of advocacy services.

m) Sign language and cued language services, including teaching sign language, cued language, and auditory/oral language, providing oral transliteration services (such as amplification), and providing sign and cued language interpretation. These services shall be covered under the existing EI services.

n) Social work services for the purposes of:

1) Evaluation to determine a child's developmental status and need for EI services;

2) Making home visits to evaluate a child's living conditions and patterns of parent-child interaction to determine the need for social work or other counseling services;

3) Preparing a social or emotional developmental assessment of the infant or toddler within the family context;

4) Providing individual and family group counseling with parents and other family members, and appropriate social skill building activities with the infant or toddler and parents;

5) Working with those problems in the living situation (home, community, and any center where EI services are provided) of an infant or toddler with a disability and the family of that child that affect the child's maximum utilization of EI services;

6) Identifying, mobilizing, and coordinating community resources and services to enable the infant or toddler with a disability and family to receive maximum benefit from EI services; and

7) Family training, education and support provided to assist the child's family in understanding the child's needs as related to social work or other counseling services and to enhancing the child's development.

o) Speech-language pathology services for the purposes of:

1) Evaluation/assessment activities to identify children with communicative or language disorders and delays in development of communication skills, including the diagnosis and appraisal of specific disorders, and delays in those skills;

2) Referral for medical or other professional services necessary for the habilitation or rehabilitation of children with communicative or language disorders and delays in development of communication skills;

3) Provision of services for the habilitation, rehabilitation, or prevention of communication or language disorders and delays in development of communication skills; and

4) Family training, education and support provided to assist the child's family in understanding the child's needs as related to speech therapy services and to enhancing the child's development.

p) Transportation services and related costs include the cost of travel (e.g., loaded mileage for travel by taxi, service car or private auto) provided in accordance with the Department's EI transportation policies that are necessary to enable an infant or toddler with a disability and the child's family to travel to and from the location where the child receives another EI service.

q) Vision services for the purposes of:

1) Evaluation/assessment of visual functioning, including the diagnosis and appraisal of specific visual disorders, delays and abilities that affect early childhood development;

2) Referral for medical or other professional services necessary for the habilitation and/or rehabilitation of visual functioning disorders;

3) Communication skills training, orientation and mobility training for all environments, visual training, and additional training necessary to activate visual motor abilities; and

4) Family training, education and support provided to assist the child's family in understanding the child's needs as related to vision services and to enhancing the child's development.

r) Other Services

1) The services and personnel do not comprise exhaustive lists of the types of services that may constitute early intervention services. Nothing prohibits the identification in the IFSP of another type of service as long as the service meets the criteria identified under Section 500.20 under the definition of "EI services" and personnel have met the requirements of Section 500.60 and Appendix C.

2) EI services do not include services that are surgical in nature; purely medical in nature; related to the implementation, optimization, maintenance or replacement of a medical device that is surgically implanted, including a cochlear implant; devices (such as heart monitors, respirators and oxygen, and gastrointestinal feeding tubes and pumps) necessary to control or treat a medical condition; and medical-health services (such as immunizations and regular "well-baby" care that are routinely recommended for all children).

(Source: Amended at 39 Ill. Reg. 14900, effective October 27, 2015)