

# 14. CHILDREN (BIRTH TO 3 YEARS OLD)

## IDENTIFYING YOUNG CHILDREN WITH SPECIAL NEEDS

Early intervention is especially important for young children. Effective services (help) can often prevent or minimize future and long-term problems. Services should be designed to address the child and the child's family, offering the professional support the family needs to help the child learn and grow.

### A child's early growth and development = building blocks for future development.

The law provides for services for children and their families when a child has or is at risk of having a disabling condition.

## QUALIFYING CHILD:

### BIRTH TO 3

Eligible children have:

- Significant delays in at least one area of development.

"Development" means ability to:

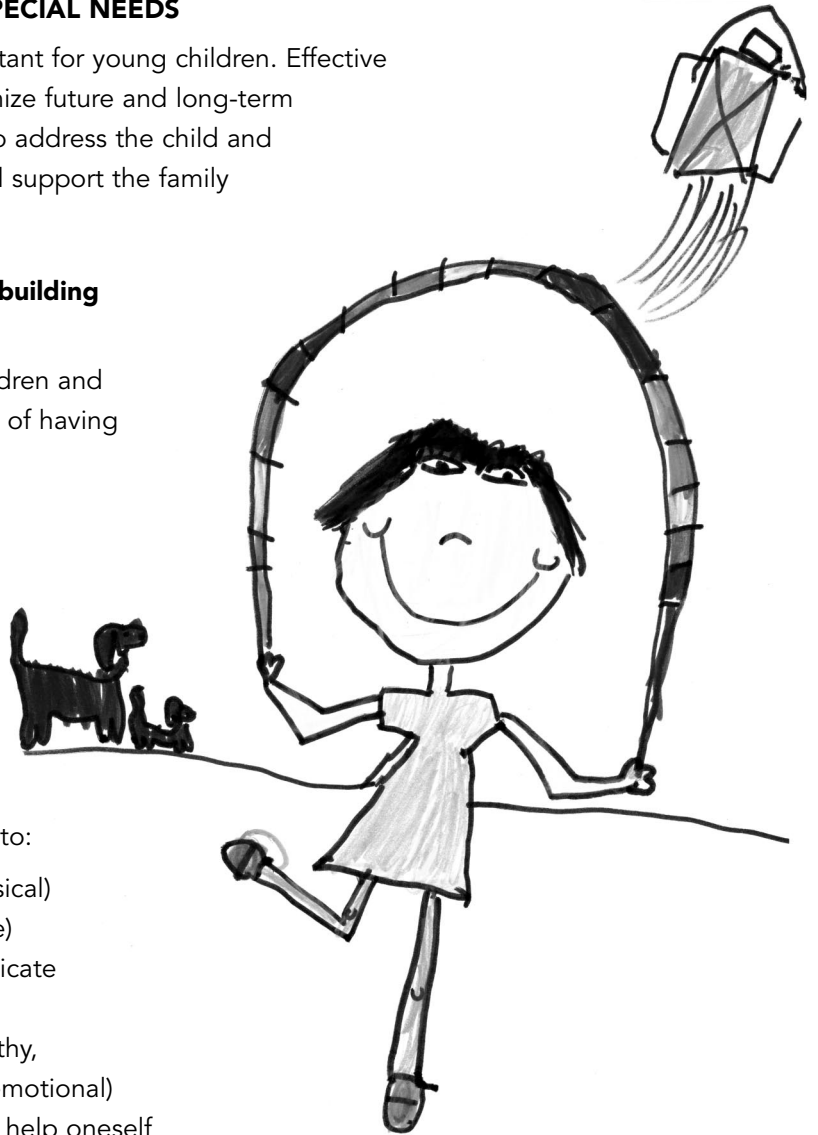
- Move, see and hear (physical)
- Think and learn (cognitive)
- Understand and communicate (language and speech)
- Relate to others in a healthy, positive way (social and emotional)
- Eat, dress and care for or help oneself (adaptive)

- Have a condition with a known probability of causing a disability or delay (Down's Syndrome, low birth weight, extreme environment stress, abuse or neglect).
- Are at high risk for having a developmental disability if services are not provided (i.e., prenatal exposure to drugs and alcohol)

The child's pediatrician has information about developmental milestones (the age range at which a child should be learning certain skills). The advocate can ask for a checklist if there are any concerns.

### DOING SOMETHING:

The parent or advocate can check with the child's pediatrician, care providers, family members, social worker and service providers to see if they have any concerns.



Referral and assessment is much less traumatic for a younger child. If the parent or advocate feels the child is or may be experiencing delays, he or she can make a referral to Humboldt County's Early Start Program or Regional Center (see Reference section). The parent or advocate can also ask the child's pediatrician, care provider or social worker to make the referral. The parent or advocate should document any concerns and relevant observations and present them when making a referral.

**EXAMPLES:**

- The child has been walking for six months but now seems unsteady and falls often
- Child does not respond to loud noises or when his or her name is called
- Child does not seem to recognize or respond to care providers
- Child has experienced a dramatic change in health or behavior
- Child seems listless (has little energy)
- Child does not make noises (baby sounds or words)
- Child avoids interaction or touch

Children can also experience problems when they have been removed from primary care providers or experience attachment disorders. These children may also need services to prevent long-term problems.

**Insecurely attached infant may experience:**

- Decreasing IQ level as child matures
- Fear or distrust of new situations
- Frequent frustration
- More than normal distress—crying easily, not responsive to attention/comfort
- Resistance—kicking , hitting, avoidance to physical touch/comfort

**Insecurely attached toddler may be:**

- Angry, easily frustrated, aggressive, unenthusiastic
- Aggressive and harassing of peers
- Clingy and dependent on teacher
- Hyperactive or withdrawn
- Easily distracted/unfocused
- Impulsive
- Poorly adapted to group activities and peer interaction

All of these behaviors can interfere with the child's ability to grow and develop normally. Many times the child will benefit from early intervention services.

After receiving a referral, an agency (such as the Regional Center) will assign a case manager to the child and the child's family. This case manager will work with the family to coordinate assessments to determine if the child is experiencing delays in one or more developmental areas.

(Please see section on "Assessments" for more information on how the advocate can participate in this process).

The case manager has 45 days to complete the evaluation and assessment process and to hold an Individual Family Service Plan (IFSP) meeting. This meeting will be used to discuss assessment results and determine if the child needs services.

It is very important for the parent or advocate to communicate all concerns to the case manager. Services cannot begin and problems cannot be addressed without the parent's involvement and support.

If assessments reveal that the child qualifies for services under the law, a service plan will be developed. While family participation is encouraged in this process, it is not mandatory. The case manager will remain the contact person for the child's family and will coordinate needed services between various agencies.

The IFSP must include a statement of the child's present levels of physical development (including vision, hearing, and health status), cognitive, communication, social or emotional, and adaptive development. If the family agrees, the IFSP should also include a statement of the family's resources, priorities and concerns related to the child's health and development. The plan must include goals, and early intervention services necessary to help the child achieve those goals. Like the IEP, the IFSP must include the location, frequency, and duration of services. These services must be provided at no cost to the family.

## **Transition into a pre-school program**

When a young child with special needs is moved from one program, such as Special Beginnings for infants, to a pre-school program, many things are affected by the change. The child may no longer have home visits and the child may experience a new environment (preschool) and service providers (teachers). The caregiver and child may experience separation anxiety or the caregiver may have new concerns about the child or service needs.

### **LAW REQUIRES:**

The law has established specific guidelines to ensure a child's rights are protected during transition and that the child will continue to get all the services needed to benefit from his or her education program.

At least 90 days before the child's third birthday, a meeting should be held to determine if the child will be eligible for continued services after his or her third birthday. If the child is eligible, an IEP (Individual Education Program) or an IFSP (Individual Family Service Plan), should be developed for the child. This plan is developed by the designated lead agency (the agency in charge of coordinating the child's services), the parents or care provider, local education agency (school) and service providers, social worker and CASA if available. The team should address transition planning and how all necessary

services will be continued for the child.

If the child remains eligible for special services after his or her third birthday, these services will be coordinated through the school in the district where the child lives.

If the child is found ineligible (does not have a qualifying condition under the law) the conference can be used to identify other community resources to help the child.

## Preparation for child

The child's emotional health should also be considered when planning transitions. While it may be standard to transition a child to preschool at age 3, the child may not be ready for a pre-school program. It is important that the advocate discuss all concerns with service providers when forming an IEP or IFSP for the child.

If the child is changing service locations, the child's care giver should provide the child with an opportunity to meet and gradually get comfortable with a new environment, and service providers.

### Transitions are a good time to:

- Re-evaluate services
- Conduct assessments
- Address other potential needs

## COMPLAINTS

If the advocate feels the child's needs are not being met in an appropriate or timely fashion, he or she can submit a complaint.

Complaints regarding infants and toddlers, ages birth to 3, who are or may be eligible for services under the California Early Intervention Services Act (Title 14) may be filed in writing with the:

California Department of Developmental Services (DDS)  
1600 9th St.  
Sacramento, CA 95814

### More information on local infant and toddler referrals and program options is available by contacting:

Redwood Coast Regional Center  
707-445-0893

Special Needs Connection  
Humboldt Child Care Council  
707-445-1195

Humboldt County Health Department CCS  
707-445-6212