

Division of Special Education/Early Intervention Services

Part C Child Find and Public Awareness

The reauthorized Individuals with Disabilities Education Act (IDEA) was signed into law on December 3, 2004, by President George W. Bush. The provisions of the Act are effective July 1, 2005 with the exception of some elements of the definition of “highly qualified teacher” that took effect upon the signing of the Act. This is one in a series of documents, prepared by the Division of Special Education/Early Intervention Services, Maryland State Department of Education (MSDE) that cover a variety of high-interest topics to support local school systems, local Infants and Toddlers Programs, and other public agencies in preparing to implement the new requirements. This document only addresses the changes in the provisions regarding Part C Child Find and Public Awareness that take effect on July 1, 2005. It does not address any changes that may be made in the final federal regulations or potential changes to State statutes or regulations.

1. What Part C changes have been made with regard to Child Find requirements?

IDEA 2004 requires a comprehensive child find system, consistent with Part B, including a system for making referrals to service providers that includes timelines and provides for participation of primary referral sources that ensures rigorous standards for appropriately identifying infants and toddlers with disabilities for services under Part C that will reduce the need for future services. [§635(a)(5)]

In addition to the IDEA 1997 requirements to identify, evaluate, and meet the needs of historically underrepresented populations, particularly minority, low-income, inner city, and rural populations and the IDEA 2004 requirements with regard to targeting parents of premature infants or infants with other physical risk factors associated with learning or developmental complications, IDEA 2004 specifically refers to:

- Infants and toddlers in foster care [§ 631(a)(5)];
- Infants and toddlers with disabilities who are homeless children and their families [§ 634(1); 635(2)]
- Infants and toddlers with disabilities who are wards of the State [§ 634(1)];
- Children under the age of 3 who are involved in a substantiated case of child abuse or neglect [§ 637(a)(6)(A)];
- Children under the age of 3 who are identified as affected by illegal substance

abuse, or withdrawal symptoms resulting from parental drug exposure [§ 637(a)(6)(B)]

2. What is the definition of “infants and toddlers with disabilities who are homeless children and their families”?

The term “homeless children” is defined in section 725 of the McKinney-Vento Homeless Assistance Act [42 U.S.C. 11434a]. Homeless student is defined in COMAR 13A.05.09.02B.

3. What is the definition of “infants and toddlers with disabilities who are wards of the State” and what does the term “parent” mean?

The term “ward of the State” means a child who, as determined by the State where the child resides, is a foster child, is a ward of the State, or is in the custody of a public child welfare agency. The term does not include a foster child who has a foster parent who meets the definition of a parent under IDEA 2004, Part A, Sec. 602 (23).

Under IDEA 2004, Part A, Sec. 602 (23) a parent is defined as:

- A natural, adoptive, or foster parent of a child (unless a foster parent is prohibited by State law from serving as a parent*);
- A guardian (but not the State if the child is a ward of the State)
- An individual acting in the place of a natural or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child’s welfare; or
- An individual assigned under Part B or Part C to be a parent surrogate.

*Although the statute includes a foster parent in the definition of “parent,” the definition in Md. Ed. Art. 8-412 does not include a foster parent, unless the foster parent is a relative or stepparent. Therefore, individuals serving as foster parents who are not relatives or stepparents, must be appointed as the child’s parent surrogate in order to represent the child in the early intervention decision making process.

4. What are the requirements for referral and evaluation with regard to children under the age of three who are involved in a substantiated case of child abuse or neglect?

IDEA 2004 requires the State to submit to the Department of Education a description of the State policies and procedures that require the referral for early intervention services under Part C of a child under the age of 3 who is involved in a substantiated case of child abuse or neglect. MSDE, jointly with the Department of Human Resources (DHR) will develop State policies and procedures to address the requirement and provide guidance to local Infants and Toddlers Programs and Departments of Social Services in

developing local policies and procedures.

Federal guidance indicates that screening of such children may be conducted prior to evaluation and assessment under Part C to determine if evaluation and assessment is warranted, i.e. there is reason to suspect the child may be eligible for early intervention services under Part C. Substantiated child abuse or neglect alone does not equate with eligibility under Part C.

5. Will the requirements for referral of children under the age of 3 who are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from parental drug exposure be addressed similarly?

MSDE will develop State policies and procedures to address the requirement and provide guidance to local Infants and Toddlers Programs.

Maryland Infants and Toddlers Program (MITP) has included infants who have been affected by intrauterine drug exposure in its review of High Probability conditions which result in eligibility of a child for early intervention services. Refer to the task force report entitled "Clarification of High Probability".

6. What changes have been made to public awareness requirements?

IDEA 2004 requires a public awareness program focusing on early identification of infants and toddlers with disabilities, including:

- The preparation and dissemination by the lead agency to all primary referral sources, especially hospitals and physicians, of information to be given to parents, especially to inform parents with premature infants, or infants with other physical risk factors associated with learning or developmental complications, on the availability of early intervention services under Part C and under 619 of Part B;
- Procedures for assisting such sources in disseminating such information to parents of infants and toddlers with disabilities. [§635(a)(6)]

The Congressional Conference Report accompanying the new legislation indicates that the Conferees intend that public awareness programs include a broad range of referral sources such as homeless family shelters, clinics, and other health service related offices, public schools and officials, and staff in the child welfare system.

Local Infants and Toddlers Programs must ensure that annual local Public Awareness Plans include the preparation and dissemination of information on the services available under Part C and Part B (619) to primary referral sources, especially hospitals and physicians. Information disseminated to primary referral sources must emphasize the sharing of the information with parents, especially parents with premature infants or infants with other physical risk factors associated with learning or

developmental complications.

Local Infants and Toddlers Programs must also ensure that public awareness plans include activities to target the broad range of referral sources identified in the Congressional Conference Report, as appropriate, and address the specific groups of children identified in Question #1 above as well as any other children who may be eligible for early intervention services.

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