AzEIP Assistive Technology

DECEMBER 2017

- Assistive Technology (AT) devices and services, is one of 17 developmental services defined under IDEA Part C.
- ► All infants and toddlers who are eligible for Part C early intervention services are also eligible to receive AT, if included as part of the child's IFSP.

IDEA Definitions

AT Service

- "...any service that directly assists an infant or toddler with a disability in the selection, acquisition, or use of an assistive technology device." Including:
 - ► Assessment of the child's needs in the natural environment:
 - Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices;
 - Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
 - Coordinating and using other therapies, interventions, or services with assistive technology devices;
 - Ongoing services, including training for the family and professionals on the child's early intervention team.

IDEA Definitions cont.

AT Device

- "...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 an infant or toddler with a disability."
- ► IDEA does <u>not</u> include the following AT devices:
 - ▶ Any medical device(s) that are surgically implanted, including a cochlear implant, or the optimization (e.g., mapping), maintenance, or replacement of that device.
 - ▶ Devices that are provided to meet the medical, daily living, or life-sustaining needs of a child.
 - ▶ Devices that are not specifically designed to increase, maintain, or improve the functional capabilities of a child with a disability.

- ► For infants and toddlers enrolled in early intervention, AT must serve a developmental purpose by supporting the child's ability to participate in everyday activities and routines in one or more of the following domains:
 - * Physical
 - Communication
 - * Cognitive
 - * Social Emotional
 - * Adaptive

- ▶ Where is AT provided?
 - In natural environments, such as the child's home, childcare program or other community settings





AT falls on a continuum, ranging from low tech home made solutions to high tech equipment.







Low-tech

High-tech

Off the shelf

Devices designed universally for all children with or without disabilities.



Modified

Adapted off the shelf or specialized/customized devices.



Customized

Specialty items designed for children with disabilities.





AzEIP Assistive Technology Contract

On July 1, 2017, Southwest Human Development (SWHD) was awarded an Assistive Technology Services and Devices contract to serve Maricopa County.

Southwest Human Development's Assistive Technology program helps young children with disabilities, ages birth to 5, develop the competence and confidence they need to become independent and active participants in their home, school and community.





AzEIP AT Contractor

- SWHD's Assistive Technology AzEIP Contract
 - SWHD's specialists will partner with IFSP teams serving Maricopa County to support children and their families achieve the best possible outcomes.
 - Services provided by SWHD's AT AzEIP Contract include:
 - ▶ Training and technical assistance for the IFSP team and family.
 - ► Coordinating with other therapies, intervention, or services with AT devices, such as those associated with existing IFSPs.
 - ▶ Identification of and demonstration of AT devices.
 - ▶ Assistance in determining the appropriate route for purchasing, leasing, or providing for the acquisition of AT devices.
 - ▶ Selecting, designing, fitting, customizing, adapting, and applying devices.
 - Access to commercial equipment through a <u>loan closet</u>.

AzEIP AT Contractor

► If accessing AT through SWHD's AzeIP AT Contract follow the process flow outlined in the Job Aide.

Assistive Technology Process Flow



• If the IFSP team determines an AT Assessment is needed, the service will be added to the IFSP as an "Assistive Technology Assessment" 30-days out from the IFSP date.



- SC and TL will complete and submit the AT referral packet and cover sheet to AT Contractor within 48 hours of adding an AT Assessment to the IFSP, and the family consenting to the service.
- SC shall call the AT Contractor to review the referral packet, identify appropriate AT discipline to be assigned in ITEAMs and added to the AT Referral Coversheet, and invite to participate in the upcoming Team Meeting.



- AT Contractor and TL will meet together on or before the IFSP start date for the AT Assessment
- AT Contractor will complete the AT Assessment and submit their report to the SC within 5 calendar days.
- If determined AT is not necessary:
- Document the reasons and continue providing services as detailed on IFSP.
- If the family disagrees, the family can be supported through the grievance process.
- If AT service and/or device is determined necessary, move to the next step.



- Within 10 calendar days after the SC receives and it is determined AT device/service is necessary, complete an IFSP addendum meeting:
 - Record the discussion on the IFSP, and the AT service or device is added to IFSP services page.
- The team will determine a feasible AT device and/or service start date and frequency.
- SC will submit AT Assessment, IFSP, and supporting documentation to child's Physician if there is a consent to share on file. Additionally, for children with ALTCS eligiblity a script must be obtained.



- The AT service and/or device shall begin on or before the planned start date and will be provided during a joint visit with the TL.
- The IFSP Team should complete joint visit planning tools with the AT provider for maximum benefit and assist the family in making sure the device and/or service are supportive to the child and family's routine.

AzEIP AT Contractor



For more information:

- SWHD's <u>AT Webpage</u>
- SWHD's <u>ADAPT Webpage</u>

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Before considering AT...

- What expertise do team members have with AT?
- Does AT already exist or can something be modified in the environment?
- What has the family tried?
- What has the team tried?
- What strategies have been discussed during team meetings?

DEC Recommended Practices Topic Area: ENVIRONMENT Checklist #5 of 5

See DEC RPs: E1, 4, 5, 6, and Ins4

Assistive Technology Checklist

This checklist includes procedures for identifying and using assistive technology (AT) to promote child participation in learning activities to enhance child competence. The checklist indicators focus on identification of a child's need for AT, the selection of the appropriate AT for addressing a child's need, and the use of AT to promote a child's participation in learning activities.

The checklist indicators can be used by a practitioner to conduct an AT assessment and develop an action plan to use AT to promote child participation in learning activities. The checklist rating scale can be used to do a self-evaluation to determine if the necessary steps were followed to use AT as part of a child's individualized intervention plan.

Pra	actitioner:		Child:	Date:		
ch pa	ease indicate which AT practice aracteristics you were able to use as rt of an assessment/intervention with child:	Seldom or Never (0-25%)	Some of the Time (25-50%)	As Often As I Can (50-75%)	Most of the Time (75-100%)	Notes
1.	Observe the child's attempts to engage in everyday learning activities and routines					
2.	Identify the child's particular difficulties or challenges interfering with participation in learning activities					
3.	Identify the strengths, interests, preferences, etc. that the child demonstrates and that motivate him or her to attempt interactions with other persons and materials					
4.	Determine the type of AT best suited for addressing the child's need and that incorporates child strengths into AT use					
5.	Employ the AT to determine how well it permits child participation in learning activities					
6.	Incorporate the AT into everyday activities and routines to ensure ongoing participation in child learning activities					
7.	Reduce or eliminate the use of AT as the child becomes more independent as part of engagement in everyday activities and routines					

DEC Recommended Practices are available at http://www.dec-eped.org/recommendedpractices Access this checklist and other ECTA Center products at http://www.ectacenter.org/decrp/ Copyright © 2017 Early Childhood Technical Assistance Center



Step 1: consideration of AT

- The IFSP team will need to consider if AT may be needed to support the child's participation in daily routines and activities <u>and</u> meet IFSP outcomes.
 - ► The team will need to gather information about the child's and family's interests, abilities, and routines.
 - ► The team will need to consider and trial adapting the child's environment to make an activity easier/simpler to accomplish.

Step 2: AT Assessment

- ▶ If the IFSP team has reason to believe that the child may benefit from AT, after exhausting <u>all</u> other options, an AT Assessment will need to be completed by a qualified AT Specialist.
- ► The AT Specialist must have expertise, and meet qualifications to provide assistive technology. This includes having an understanding of infant and toddler development, types of devices/technology, learning tools, adapted equipment, etc. The AT Specialist may be:
 - ▶ A qualified member of the Core Team;
 - ▶ The child's medical provider;
 - AzEIP AT Contractor (SWHD);
 - ► Community partner, etc.

Step 3: AT Recommendations

After an AT assessment is completed, recommendations may include but is not limited to:

- ► Community resources.
- ▶ Trialing commercial equipment through a loan closet or community partner.
- ▶ Training, technical assistance, coaching for IFSP team and family.
- ► On-going IFSP services.
- ► Navigating through equipment systems.
- Assistance in determining the appropriate route for purchasing, leasing, or providing for the acquisition of AT device.
- Device recommendation.
- ▶ If the IFSP team and family agree with the recommendations, an IFSP addendum meeting will need to be held to add AT (services, devices).

Parent Rights

- ▶ Parent participation is in the development of the IFSP including the assessment, selection, implementation and maintenance of AT.
- ▶ If the family and IFSP team disagree on the outcome of an AT Assessment and/or selection of AT Device, the family has a right to share their concerns:
 - ► Informally, such as discussing concerns with program leadership
 - Formally, such as a written complaint, mediation and/or hearing

Transition

- During the transition planning conference, assistive technology concerns need to be discussed.
- ▶ It is important that documentation details how the AT service or device will be acquired or transferred from Early Intervention to the preschool system once the child reaches the age of three.

GCI-1021A FORFF (2-17) (IFSP Packet)

ARIZONA DEPARTMENT OF ECONOMIC SECURITY

Arizona Early Intervention Program (AzEIP)



This is the INDIVIDUALIZED FAMILY SERVICE PLAN (IFSP)

For				and Family
	Interim IFSP	Initial IFSP	Annual IFSP	
	Date:			
	Service Coordinator:			
	Team Lead:			

Our Mission - Early intervention builds upon and provides supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities.

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request. Disponible en español en línea o en la oficina local.

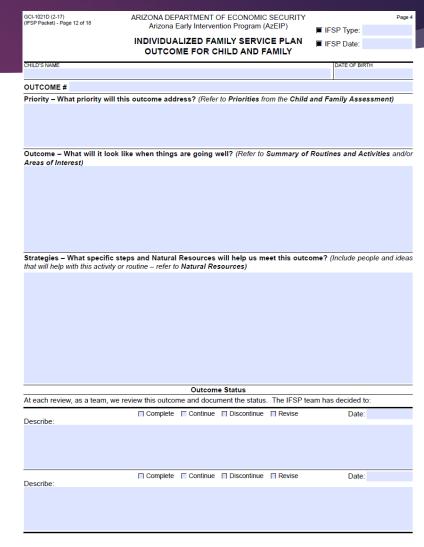
- The "Child and Family Assessment" (GCI-1021C) page of the IFSP must indicate the present levels of development that will support the need for AT.
- If AT is used by the child already, be sure to include a description. (e.g., communicates words and phrases using a picture exchange system).

ARIZONA	DEPARTMENT OF ECO	NOMIC SECURITY		Page 1						
(IFSP Packet) - Page 3 of 18 Arizona Early Intervention Program (AzEIP) ■ IFSP Type:										
INDIVI	DUALIZED FAMILY	SERVICE PLAN	■ IESP Date:							
CHI	LD AND FAMILY AS	SESSMENT								
			DATE OF BIRT	Н						
Summary of Cl	hild Development within	n Routines and Activ	ities							
This Child and Family Assessment will capture all areas of my child's development within the contexts of everyday routines and activities that are important to our family. We will discuss areas that we identify are going well and areas that are not going well, while discussing all areas of my child's development. I can follow along with my copy of the Child and Family Assessment Guide for Families. Communication Movement Thinking/Learning Social/Behavior Self-help Vision Hearing										
overnent Thi	•	<u> </u>	ii-rieip vision	Hearing						
Drossing		nej								
		or each question)								
Going well	Some concerns		ns							
Going well	Some concerns	A lot of concern	ns							
Going well	Some concerns	A lot of concerr	ns							
2. What is happening now?										
	Summary of Clessment will capt ordant to our faming all areas of my millies. Overment Thi Dressing Outings Bedtime/Naps How is Going well Going well activity?	Arizona Early Intervention Pro INDIVIDUALIZED FAMILY 3 CHILD AND FAMILY AS Summary of Child Development withing the sament will capture all areas of my child's ortant to our family. We will discuss areas on all areas of my child's development. I child to summary and areas of my child's development. I child to summary and areas of my child's development. I child to summary and areas of my child's development. I child to summary and areas of my child's development. I child to summary and areas of my child to summary and areas of my child to summary and areas of the	INDIVIDUALIZED FAMILY SERVICE PLAN CHILD AND FAMILY ASSESSMENT Summary of Child Development within Routines and Activessment will capture all areas of my child's development within ortant to our family. We will discuss areas that we identify are on all areas of my child's development. I can follow along with milies. Overment Thinking/Learning Social/Behavior Selection Common Dispersion Dispersion County (Check one) Dressing Diapering/Toileting Outings Play Other: (describe) How is it going? (Check one for each question) Going well Some concerns A lot of concern Going well Some concerns A lot of concern Going well Some concerns A lot of concern activity?	Arizona Early Intervention Program (AzEIP) INDIVIDUALIZED FAMILY SERVICE PLAN CHILD AND FAMILY ASSESSMENT IFSP Date:						

- ► The "Child and Family Assessment" (GCI-1021C) page of the IFSP must indicate any resources that currently support the child and family.
- If AT is already used by the child, document:
 - How the family obtained the device;
 - Any training that the family has received or is currently receiving.

GCI-1021C (2-17)		OF ECONOMIC SECURITY	Page
(IFSP Packet) - Page 7 of 18	Arizona Early Interve	ntion Program (AzEIP)	■ IFSP Type:
		MILY SERVICE PLAN	■ IFSP Date:
CHILD'S NAME (First, M.I. Last)			DATE OF BIRTH
List the constant of the const		Resources	t
	s that support your family: (e.g., f social, church or other faith-base		amily, neighborhood play group
, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	g p - y.	
	Areas o	f Interest	
Check items your family wou	ald like more information about		
Places where my child ca	n play with other children in the	community	
Childcare	. ,	,	
Clothing, food, etc.			
Housing Assistance			
Health care and/or health	insurance for my child		
My child's diagnosis or dis	sability		
Talking with other parents			
Parent support/ training/a	dvocacy		
Other:			
Other:			
Ouler.	Dele	rities	
From the Summary of Routin	nes and Activities and Areas of I		tify which are the most importa
	tt 3-6 months. Include the reso		
the priority.			
Pri	iorities	Natural	Resources

- ► The "Outcome for Child and Family" (GCI-1021D) page of the IFSP must state the way in which AT is expected to increase, maintain, or enhance the child and family outcomes.
- If the child is already using AT, document how it plays a role in everyday activities and routines.



GCI-1021D (2-17) (IFSP Packet) - Page 10 of 18

ARIZONA DEPARTMENT OF ECONOMIC SECURITY Arizona Early Intervention Program (AzeIP) Page 2

(IP) ■IFSP Type: Annual

INDIVIDUALIZED FAMILY SERVICE PLAN OUTCOME FOR CHILD AND FAMILY

■IFSP Date: 12/22/2017

HILD'S NAME Baby AzEIP

11/01/2016

OUTCOME#

Priority – What priority will this outcome address? (Refer to Priorities from the Child and Family Assessment)
Playtime.

Outcome – What will it look like when things are going well? (Refer to Summary of Routines and Activities and/or Areas of Interest)

Exploration stage example #1: Baby AzEIP will play at the water table at daycare.

Exploration stage example #2: Baby AzEIP will play with her toys so mom can make dinner.

Strategies – What specific steps and Natural Resources will help us meet this outcome? (Include people and ideas that will help with this activity or routine – refer to Natural Resources)

Exploration stage example #1: The daycare teacher will offer Baby AzEIP a step stool when she gets tired playing at the water table. Team Lead and Physical Therapist will provide mom more information on standers.

Exploration stage example #2: Team Lead and Physical Therapist will conduct a trial of adaptive seating devices with mom to determine the most effective device for Baby AzEIP.

GCI-1021D (2-17) (IFSP Packet) - Page 9 of 18

ARIZONA DEPARTMENT OF ECONOMIC SECURITY Arizona Early Intervention Program (AzEIP)

■IFSP Type: Annual

INDIVIDUALIZED FAMILY SERVICE PLAN OUTCOME FOR CHILD AND FAMILY

■IFSP Date: 12/22/2017

Page 1

DIS NAME Baby AzEIP DATE OF BIRTH 11/01/2016

OUTCOME#

Priority – What priority will this outcome address? (Refer to Priorities from the Child and Family Assessment)
Playtime

Outcome – What will it look like when things are going well? (Refer to Summary of Routines and Activities and/or Areas of Interest)

Implementation stage example #1: Baby AzEIP will play at the water table at daycare using a stander.

Implementation stage example #2: Baby AzEIP will help mom make dinner while sitting in her adaptive chair

Strategies – What specific steps and Natural Resources will help us meet this outcome? (Include people and ideas that will help with this activity or routine – refer to Natural Resources)

Implementation stage example #1: Team Lead and Physical Therapist providing training to mom and daycare teacher on use of stander and positioning.

Implementation stage example #2: Team Lead and Physical Therapist will train mom in positioning Baby AzEIP in adaptive seating device.

IFSP Services Page (GCI-1021G) Documentation	Outcome #	Early Intervention Service	Intensity	# of session s	# of minutes per session	Servic e Setting	Metho d	Duration
AT Assessment	Link to corresponding outcome documented on the "Outcome for Child & Family" (GCI-1021D) IFSP page.	"Assistive Technology Assessment"	Individual, (2) Multiple children (2), (3+) Multiple children	1	120	Varies	JV, TC	30 days from the date of the IFSP, but no later than 45 days.
<u>AT Services</u>	Link to corresponding outcome documented on the "Outcome for Child & Family" (GCI-1021D) IFSP page.	"Assistive Technology Services/(discipline)	Individual, (2) Multiple children (2), (3+) Multiple children	Reflects the number of AT sessions needed.	Reflects the duration of AT sessions.	Varies	JV, TC	Expected date of AT Services to start/end
**AT Devices (only for SWHD AT clients)	Link to corresponding outcome documented on the "Outcome for Child & Family" (GCI-1021D) IFSP page.	"Assistive Technology Device"	Individual, (2) Multiple children (2), (3+) Multiple children	N/A	N/A	N/A	N/A	Expected date of AT device to be delivered.

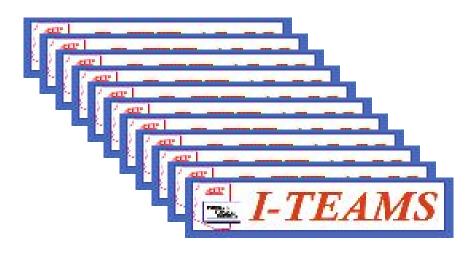
ome ‡	Early Intervention Service	*Intensity	# of Sessions	# of minutes per session	O = Other (if other, complete the justification below)	TC = Team Conferencing NTL = Non Team Lead	Planned Start Date	Planned End Date
	Assistive Technology Assessment	1	1	120	⊠н □с □о	JV	1/21/18	2/9/18

tcome #	Early Intervention Service	*Intensity	# of Sessions	# of minutes per session	H = Home C = Community O = Other (if other, complete the justification below)	TL = Team Lead JV = Joint Visits TC = Team Conferencing NTL = Non Team Lead	Planned Start Date	Planned End Date
	Assistive Technology Services - Physical Therapy	I	2	30	⊠н □с □о	JV	2/11/18	3/2/18
	Assistive Technology Device	N/A	N/A		□н □с □о	N/A	2/11/18	2/11/18

The "Payment Arrangements For Services" (GCI-1021H) page of the IFSP must be completed, and all possible funding sources <u>must</u> be explored prior to using state or IDEA Part C funds.

GCI-1021H (2-17) (IFSP Packet) - Page 16 of 18									
INDIVIDUALIZED FAMILY SERVICE PLAN INFISP Date:									
P	YMENT	ARRANGEME	NTS FOR SERVIC						
CHILD'S NAME (First, M.I. Last)				DATE OF BIRTH					
Service coordinator and family of	liceuseed u	eo of family's pub	lie and/or private incura	neo:					
Public Insurance:	iiscusseu u	se or raining s pub	iic and/or private irisdra	nice.					
AHCCCS CMDP IHS	☐ DDD/AI	LTCS Other (e.	g., EPD/ALTCS):						
Health Plan:									
Private Insurance Plan:		did i	-1						
(Consent is required before billin	g public and	d private insuranc	e)						
Early Intervention Service (no acronyms)		Discipl	ine	***Funding Source(s) (include all that apply)					
***Funding Source:									
1 = Medicaid (AHCCCS/CMDP)			f Developmental Disabilities (I						
2 = Private Insurance (PI) 3 = Arizona Early Intervention Program (Azi	EIP)	5 = Arizona Long Term Care System (ALTCS) P) 6 = Arizona State Schools for the Deaf and the Blind (ASDB)							
Services such as medical recrea		ner Services <i>(in p</i>		services not required or funded					
under early intervention, that co			na other chila relatea	services not required or funded					
 Resources your family has ALTCS). 	that are hel	pful in meeting the	e needs of your child/fan	nily (e.g., respite, as covered under					
 Resources that you are interest. 	erested in to	help your family	(e.g., WIC, health care,	etc.).					
Resource(s), Service(s), and Support(s)	Check if needed	Payment Source		eps to be Taken on responsible and timeline)					

Assistive Technology & ITEAMS



Assistive Technology & ITEAMS

For more information on how to enter AT into ITEAMs please refer to the AT – ITEAMS guidance document.

AzEIP I-TEAMS User Guide for Assistive Technology (AT)

1. IFSP Information Page

Once the IFSP team determines the need for AT and the IFSP has been updated to include AT, the Service Coordinator (SC) shall contact the AT Contractor to identify the appropriate AT discipline within 24-48 hours of the IFSP and/or invite the AT Contractor to the next team meeting. After contacting the AT Contractor and identifying the appropriate AT discipline, the SC must enter the IFSP into I-TEAMS within 10 business days.

- a) Click on the Create New IFSP button and enter all information as written on the plan.
- b) Click on the Save IFSP button.
- c) Click on the Add New Services button and enter all information as written on the plan.
- d) From the Service menu, select Assistive Technology Services.
- e) From the Discipline menu, select AT Discipline (i.e. AT-PT, AT-DSI, etc.).
 - ***NOTE: Only staff employed under the AT Contract can have their discipline assigned as AT.
- f) Complete all other required fields.
- g) Save by clicking on Add Service.



2. Assign / Change Team Members Page

Once it has been determined that AT is needed and it has been added to the IFSP, the AT Contractor will need to be assigned. Please note that the AT Contractor cannot be the primary contractor.

Assigning Contractor (Completed by SC or designated data entry personnel)

- a) Under the Agency drop down menu, select AT.
- b) Under Contract Provider Name, select the AT Contractor.
- c) Enter the Assignment Start Date as indicated on the IFSP.
 - ***NOTE: The start date must match what is entered on the IFSP page.
 - a. Once the service ends, the end date will need to be entered into I-TEAMS within 10 business days.
- d) Select Update to save the entry.

Myths

- ▶ A child must be enrolled in early intervention for at least 6 months before benefiting from AT.
- ► AT prevents a child from engaging like age typical peers.
- ► AT is expensive and is designed only for children with disabilities.

Questions?

