

## Maryland Infants and Toddlers Program

# Physician's Guide

For Referring Children with  
Developmental Delays and  
Disabilities to Maryland's System  
of Early Intervention Services



The Maryland Infants and Toddlers Program is coordinated by State and local agencies and organizations. Maryland State Department of Education, Division of Special Education/Early Intervention Services is the lead agency.

Through the **Maryland Infants and Toddlers Program**, infants and toddlers with developmental disabilities may be eligible for early intervention—a statewide system of services and supports designed to enhance the potential for growth and development in children with developmental disabilities and the ability of families to meet the special needs of their children. A pediatrician, NICU doctor, family physician, or other health care provider is often a family's first link to early intervention. If you or a child's family has a concern about a child's development, please refer the child and family for early intervention services.

**Complete the *Maryland Infants and Toddlers Program Referral Form*** provided in this brochure. Then **phone or fax the referral to the local Infants and Toddlers Program** in the jurisdiction where the child and family live.

### Local Infants and Toddlers Programs in Maryland

Jurisdiction/County	Phone Number	Fax Number
Allegany	301-759-2415	301-689-3834
Anne Arundel	410-222-6911	410-222-6916
Baltimore City	410-396-1666	410-547-8292
Baltimore County	410-887-2169	410-339-3946
Calvert	410-414-7034	410-535-7380
Caroline	410-479-3246	410-479-0108
Carroll	410-876-4437, ext. 2277	410-751-3954
Cecil	410-996-5444	410-996-5454
Charles	301-609-6808	301-609-6691
Dorchester	410-221-1111, ext. 1024	410-221-5215
Frederick	301-600-1612	301-600-3280
Garrett	301-533-0240	301-334-1893
Harford	410-638-3823	410-638-3825
Howard	410-313-7017	410-313-7103
Kent	410-778-7164	410-778-2896
Montgomery	240-777-3997	240-777-3132
Prince George's	301-760-3832	301-760-3882
Queen Anne's	410-758-0720, ext. 4458	410-758-2838
Somerset	410-651-1616, ext. 239	410-651-2931
St. Mary's	301-475-5511, ext. 32223	301-475-4350
Talbot	410-820-0319	410-822-9508
Washington	301-766-8217	301-791-6716
Wicomico	410-677-5250	410-677-5817
Worcester	410-632-5033	410-632-3867

If you suspect developmental delay or atypical development in a child age birth to three years, or if a child has a high probability medical condition, please refer the child and family to the Maryland Infants and Toddlers Program for early intervention services. See page 4 for examples of atypical development. High probability medical conditions that necessitate referral, include but are not limited to the following:

- AIDS
- Birth weight <1,200 grams
- Chronic Lung Disease (CLD)
- Congenital Infection—Symptomatic
- Congenital Malformation—Severe
- Encephalopathy—Severe
- Epilepsy—Severe
- Fetal Alcohol Syndrome
- Hearing Impairment (Bilateral or Unilateral)
- Inborn Error of Metabolism
- Intraventricular Hemorrhage (IVH) Grades III/IV
- Lead Poisoning—Elevated Blood Lead Level  $\geq 20 \mu\text{g/dL}$
- Necrotizing Enterocolitis (NEC)—Surgical
- Neonatal Abstinence Syndrome
- Neurodegenerative Disorder
- Periventricular Leukomalacia (PVL)
- Visual Impairment

**Be the link. Make the referral.**  
*The earlier, the better.*

**For additional information: Call the Maryland Infants and Toddlers Program: 410-767-0261 or toll free 1-800-535-0182.**

**As the central figure in a child's medical home, you can be the link between families and the early intervention process.**



## The Physician's Role in Early Intervention

### Early identification is critical.

"Early identification of developmental disorders is critical to the well-being of children and their families. It is an integral function of the primary care medical home and an appropriate responsibility of all pediatric health care professionals... children who have positive screening results for developmental problems should be referred to early developmental intervention and early childhood services and scheduled for earlier return visits to increase developmental surveillance."

-Council on Children with Disabilities, Section on Developmental Behavioral Pediatrics, Bright Futures Steering Committee and Medical Home Initiatives for Children With Special Needs Project Advisory Committee; PEDIATRICS Vol. 118 No. 1 July 2006.

### Link families to early intervention.

As a primary health care provider and a central figure in a child's medical home, you are often a family's first link to early intervention services. Parents may bring a developmental concern to your attention or you may identify a concern as part of a routine visit or developmental screening. You can help families engage in the early intervention process in five simple ways.

- 1. Screen** infants and toddlers for developmental delay, atypical development, and high probability medical conditions.
- 2. Refer** infants and toddlers ages birth to 3 to their local Infants and Toddlers Program as soon as you or the family becomes concerned about the child's development. When making a referral, provide as many details as possible about the child's developmental and health status, and include essential information requested on the **Maryland Infants and Toddlers Referral and Feedback Form**. This information will help the local Infants and Toddlers Program prepare for an initial evaluation of the child, and develop an Individualized Family Service Plan (IFSP) if the child is determined eligible.
- 3. Arrange** for appropriate medical etiologic diagnostic evaluations and share the findings with the child's family. With the parent's permission, also share the findings with the local Infants and Toddlers Program so that relevant information can be shared with early intervention service providers and the child's IFSP can be modified, if needed.
- 4. Review** the child's initial and annual assessment results and routinely speak with the family about the child's progress towards meeting goals addressed on the IFSP. With the parent's permission, the local Infants and Toddlers Program will provide you with initial and annual assessment results, as well as ongoing information about the child's early intervention services.
- 5. Provide** medical updates, offer recommendations, and share your concerns about the child's development with the local Infants and Toddlers Program staff. As a vital member of the child's early intervention team, your input is extremely valuable.

**Together, physicians and early intervention personnel can help parents make a difference in the lives of their children with disabilities.**



## After a Physician Makes the Referral

### Eligibility is determined.

After you phone or fax referral information to the appropriate number, the local Infants and Toddlers Program contacts the family to describe the program. If the family consents, a multidisciplinary eligibility evaluation is scheduled to determine whether the child is eligible for early intervention. See side bar at right for eligibility criteria. A multidisciplinary eligibility evaluation includes at least two professionals from different disciplines. As the child's primary care physician, you can be one of those professionals. The child's adaptive, cognitive, language, motor, and social-emotional development are assessed as part of this process, as are the child's hearing, vision, and general health status.

### Individualized Family Service Plan is developed.

If the child is determined eligible for early intervention, the local Infants and Toddlers Program develops an Individualized Family Service Plan (IFSP) with the family, within 45 days of your referral. The IFSP is the working document that identifies services and supports (including frequency and duration) to meet specific early intervention outcomes for the child, based on the unique needs of the child and family. In most cases, early intervention services listed on the IFSP begin within 30 days of the date of the parent's signature on the plan. The IFSP is reviewed on an ongoing basis and modifications are made as appropriate. The IFSP is re-written annually, or more often if necessary.

### Child receives early intervention services.

Children who are eligible for early intervention due to a  $\geq 25\%$  delay and/or atypical development will continue to receive early intervention services until the delay or atypical development resolves. If the concerns are resolved, the local Infants and Toddlers Program will help the child and family transition to other community resources as appropriate. If concerns persist to age 3, the local Infants and Toddlers Program will transition the child and family to community services, or services through an Extended IFSP until the beginning of the school year following the child's 4th birthday, or school services under an Individualized Education Program (IEP). On the other hand, children who are eligible for early intervention due to a high probability condition are eligible to participate in early intervention until age 3. Depending whether or not concerns exist at age 3, the local program may transition the child and family to community services, or services through an Extended IFSP, or school services under an Individualized Education Program (IEP).

### Eligibility Criteria

Children ages birth to 3 years may be eligible if they meet one of the following criteria:

1.  $\geq 25\%$  delay compared to chronological age or adjusted age\* in one or more of the following domains:
  - adaptive
  - language (expressive or receptive)
  - motor (fine or gross)
  - social-emotional
  - cognitive
2. Diagnosed condition that has a high probability of resulting in delayed or atypical development\*\*
3. Atypical development in one or more of the above domains

\*A child's adjusted age is used to determine eligibility if the child was born prior to 37 weeks gestational age. A child's adjusted age is used until the child's adjusted age is 12 months.

\*\*Atypical development refers to quality of performance. A child may demonstrate skills that are age appropriate but that are of atypical quality.

### Examples of Atypical Development:

- **Adaptive:** Refusal to take foods of a certain texture
- **Language:** Perseverative repetition of words
- **Motor:** Hypertonicity and arching that results in early rolling (gross motor) or tremulousness and overshooting when reaching for objects (fine motor)
- **Social-emotional:** Decreased initiation of communication for social purposes
- **Cognitive:** Repetitive and stereotyped patterns of play with objects

**As the central figure in a child's medical home, you can be the link between families and the early intervention process.**



## More About Early Intervention In Maryland

The **Maryland Infants and Toddlers Program (MITP)** provides family-centered early intervention services and supports to help families enhance their children's developmental potential. In **2012**, the MITP provided early intervention services to more than **16,100** children and their families through 24 local Infants and Toddlers Programs. The MITP provides early intervention services at no direct cost to families.

Research and best practices demonstrate that infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts. The MITP bases its early intervention practices on best available research and evidence-based practice, while adhering to relevant laws and regulations under Part C of the Individuals with Disabilities Education Act (IDEA).

Acknowledging the primary role of the family in the early intervention process, Maryland's early intervention system has evolved from a traditional child-centered "clinical model" to a family-centered developmental model where service providers work with the family in planning and providing services to help foster the development of their child. The family participates as a member of the Individualized Family Service Plan (IFSP) team that decides which services are best for that individual child and family. Outcomes are generated by the IFSP team based on the unique needs, interests, and resources of that child and family.

Since each family has its own aspiration for its child and family, individualized early intervention outcomes are likely to differ from one child to another despite the fact that children may have the same disability. Similarly, the frequency, duration, and types of services may differ for children who share the same disability. Factors such as severity of the disability, the child's age and temperament, and the family needs and resources, contribute to decisions regarding the type and amount of early intervention services provided. For more information on Maryland's early intervention system and other early childhood initiatives, call 410-767-0863, or visit [www.mdecgateway.org](http://www.mdecgateway.org).

### Family-Centered Services

"Research demonstrates that interventions are most effective when they are family-centered; goals are individualized to meet the specific needs, interests, and resources of the children and families served; and strategies and activities target everyday childhood experiences."

-Shonkoff, JP and Phillips, DA (Eds.) (2000). From Neurons to Neighborhoods. The Science of Early Child Development. Washington, D.C.: National Academy Press.

### The Maryland Infants and Toddlers Program provides family-centered services by:

- Treating families with dignity and respect,
- Providing choices to meet individual family priorities and concerns,
- Sharing all available information so that families can make informed decisions, and
- Providing support that empowers families and enhances parental competence.

# Maryland Infants and Toddlers Program Referral and Feedback Form

Please complete this form for each child you refer for early intervention. Diagnosis of a specific condition or disorder is not necessary for referral.

## SECTION 1— To be completed by Physician/Health Care Provider/Referring Agency

### Parent/Child Contact Information:

Child Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Child Age in Months: \_\_\_\_\_ Gender: M / F  
 Home Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: **Maryland** Zip Code: \_\_\_\_\_  
 Parent/Guardian: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
 Primary Language: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

### Reason(s) for Referral to Early Intervention: *Please check all that apply.*

- Identified condition or diagnosis (e.g., spina bifida, Down syndrome, Birthweight <1200g): \_\_\_\_\_
- Suspected developmental delay or concern (*Please circle areas of concern*):  
 Motor/Physical Cognitive Social/Emotional Speech/Language Behavior Other: \_\_\_\_\_
- Failed Standardized Developmental Screening Tool (*Please indicate screen used and attach screen results*):  
 Ages and Stages  PEDS  Other: \_\_\_\_\_
- At Risk/High Probability Factor (*Describe*): \_\_\_\_\_
- Other (*Describe*): \_\_\_\_\_

### Referral Source Contact Information:

Person Making Referral: \_\_\_\_\_ Date of Referral: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_ E-mail \_\_\_\_\_

## SECTION 2— To be completed by the Parent/Guardian

### Parent/Guardian Consent to Release Information:

I, \_\_\_\_\_ (*print name of parent or guardian*), give my permission for my pediatric health care provider (listed above) and the Maryland Infants and Toddlers Program to share and communicate any and all pertinent information regarding my child (*print child's name*) \_\_\_\_\_.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

## SECTION 3— To be completed by Local Early Intervention System (local Infants and Toddlers Program) and returned to the Referral Source (e.g., physician)

Date Referral Received: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Attempts to Contact Unsuccessful:   
 Name of Assigned Service Coordinator: \_\_\_\_\_  
 Office Phone: \_\_\_\_\_ Office Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Eligible for Early Intervention Services?  Yes  No

### Initial Results of IFSP (*Attach IFSP Part II, Section A*):

#### Areas of Development to be Addressed:

- Cognitive  Expressive Language  Receptive Language  Social-Emotional
- Adaptive/Self-Help  Gross Motor  Fine Motor

#### Initial Services to be Provided:

- Special Instruction  Speech/Language Therapy  Occupational Therapy  Physical Therapy
- \_\_\_\_\_  \_\_\_\_\_

## MARYLAND INFANTS AND TODDLERS PROGRAM

# Physician's Guide

## For Referring Children with Developmental Delays and Disabilities to Maryland's System of Early Intervention Services

The **Maryland Infants and Toddlers Physician's Guide** is a publication of the Maryland Infants and Toddlers Program, a statewide program of services and supports coordinated by State and local agency and organizations. The Maryland State Department of Education, Division of Special Education/Early Intervention Services is the lead agency.

## For more information:

### CALL OR WRITE:

Brian Morrison, Ph.D.  
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Maryland Infants and Toddlers Program  
Maryland State Department of Education  
Division of Special Education/Early Intervention Services  
200 West Baltimore Street, 9th Floor  
Baltimore, Maryland 21201  
Phone: 410-767-0863  
Toll Free: 1-800-535-0182  
Fax: 410-333-8165

### OR VISIT ONLINE:

DIVISION OF SPECIAL EDUCATION/EARLY INTERVENTION SERVICES

<http://www.marylandpublicschools.org/programs/Pages/Special-Education/index.aspx>

MARYLAND LEARNING LINKS

<https://marylandlearninglinks.org/birth-to-kindergarten/>

MARYLAND LEARNING LINKS is a site developed and produced by the Maryland State Department of Education, Division of Special Education/Early Intervention Services, in collaboration with the Johns Hopkins University/School of Education/Center for Technology in Education.

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