The Office of Special Education Programs (OSEP) has developed this voluntary Child Find Self-Assessment (CFSA) as a tool for State IDEA Part C programs to assess their Child Find system for identifying, locating, and evaluating all infants and toddlers with disabilities and developmental delays. States can utilize the CFSA as a monitoring tool to ensure they have met the regulatory components of a Comprehensive Child Find system, and as an informational tool to assist with implementing best practices for Child Find.

**What is Child Find?**

Child Find is a process of identifying, locating, and evaluating, as early as possible, all infants and toddlers with disabilities, birth to age three, who may require early intervention services (EIS). Part C regulations require that each State must have a statewide comprehensive, coordinated, multidisciplinary interagency system to provide early intervention services for infants and toddlers with disabilities and their families.

***Definition of Child Find.*** To ensure that your State has a comprehensive system, it is required that your system include the following components:

1. Policies and procedures consistent with Child Find under Part B of the IDEA, which require States to ensure that all children with disabilities, including children with disabilities who are homeless or are wards of the State, and children with disabilities attending private schools, regardless of the severity of their disability, are "identified, located and evaluated;"
2. Coordination activities, designed in collaboration with your Interagency Coordinating Council, that link your Part C program with all other major efforts to locate and identify young children by other State agencies and programs including the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV); Early Periodic Diagnosis Screening and Treatment (EPSDT); Children's Health Insurance Program (CHIP); Early Hearing Detection and Intervention (EHDI); local education agencies (LEAs) and schools; Early Head Start (EHS); Developmental Disabilities; Supplemental Security Income (SSI); child protection and child welfare programs including foster care and Child Abuse Prevention and Treatment Act (CAPTA); programs that provide services under the Family Violence Prevention and Services Act; child care programs; tribal agencies; and agencies serving homeless children;
3. A Statewide rigorous definition of eligibility under Part C;
4. Pre-referral procedures relevant to identifying children; a public awareness program to advertise Part C services; a central directory; referral procedures; timelines and participation by the primary referral source; and post-referral procedures includingscreenings, evaluations, assessments, and timelines; and
5. Targeted outreach to primary referral sources including hospitals, prenatal and postnatal care facilities, physicians, parents, child care programs and early learning programs, LEAs and schools, public health facilities, social service agencies and other clinic and health care providers, public agencies and staff in the child welfare system, including child protective services and foster care, homeless family shelters and domestic violence shelters and agencies.

**How is the CFSA organized?**

The CFSA is organized into the following four separate sections: 1) regulatory requirements specific to Part C, 2) best practices, 3) technical assistance tools and resources, and 4) OSEP policy letters and guidance that are relevant to Child Find.

***Section I: Regulatory Requirements Specific to Child Find.*** Section I is a fillable Word document that outlines the specific requirements all States must have for a Comprehensive Child Find System, which includes: 1) pre-referral--program and child find system public awareness (34 CFR §303.301), 2) comprehensive child find system (34 CFR §303.302); 3) referral procedures (34 CFR §303.303) and post-referral timeline (45 days) (34 CFR §303.310), and 4) Screening procedures (optional) (34 CFR §303.320). This section was developed for States to ensure and document how their early intervention (EI) system is implementing all requirements specific to child find. The document can be used for monitoring to determine how child find is being implemented by their local EI programs that are responsible for identifying eligible children and providing EI services to infants and toddlers with disabilities and their families. When used at multiple time points, the tool can also help States track impacts on how they meet child find regulations resulting from improvement activities.

***Section II: Child Find Best Practices.*** Section II is an Excel-based tool that allows states to evaluate implementation of child find best practices. It includes content that is not required by the IDEA but that research and practice has demonstrated to be beneficial for Part C programs in efficiently and effectively identifying, locating, and evaluating children with disabilities or developmental delays (as defined by the State). When used at multiple time points, the tool can help states track progress resulting from targeted improvement activities.

***Section III: Technical Assistance (TA) and Resources.*** This section provides links to the statue and federal regulations related to child find, as well as resources developed by OSEP-funded (TA) centers committed to improving State early intervention and early childhood special education systems to increase the implementation of effective practices and improve outcomes for young children. This section highlights resources from TA centers and others specific to child find requirements and best practices. Please note definitions of key terms are included in the federal regulations.

***Section IV: OSEP Policy Letters and Guidance.*** OSEP is charged with developing, and communicating Federal policy on the IDEA. The policy letters presented in this section provide information, guidance, and clarification relevant to State EIS systems and providing a comprehensive child find system.

**Completing the Child Find Self-Assessment**

It is recommended states start with Section I when completing the CFSA. This enables the team to first consider the regulations related to child find before considering best practices that may strengthen their approach to meeting the regulations.

***Completing*** ***Section I: Regulatory Requirements Specific to Child Find.*** Section I may be completed by one person familiar with the state’s policies and procedures regarding the child find regulations or by a team. After each question, provide information describing how the State is meeting the requirement or the steps the State is taking to meet the requirement in the “State Response” section. You can include text from, links to, comments about, and/or data on policies and procedures. The summary sections in Section I can also inform the action planning process included in Section II of the Child Find Self-Assessment.

***Completing Section II: Child Find Best Practices.*** Section II should be completed by individuals within the state Part C agency with knowledge of child find efforts, in collaboration with other individuals within and outside the agency, including collaborating organizations, agencies, and offices, and local programs. Space is provided in the Action Plan tab to document the names, roles, and organizations for those completing the self-assessment and action plan. It is important to note that for some of the best practices the Part C agency may not be the responsible entity. For example, best practice 6h describes referral and eligibility of children exposed to Zika virus. Determination of Zika exposure and referral to Part C would be the responsibility of physicians' offices or health care facilities, which are primary referral sources. In addition, universal screening may also be done by other entities, such as physicians' offices or Early Head Start. It will be helpful to have individuals representing those organizations involved with the self-assessment and planning to understand the true scope of child find activities within the state and identify opportunities to strengthen collaborations to improve child find practices.

Detailed, step-by-step instructions for completing the ratings, priorities, and action plan are provided on the Instructions tab of the Section II Excel workbook, along with additional considerations. A Help tab is also available with guidance for trouble-shooting common challenges.

Completion of the CFSA is voluntary. A State may choose to request technical assistance from OSEP regarding its CFSA. To request technical assistance, or ask a question about the CFSA, please send an email to your OSEP State Lead and copy the email to OSEP’s Child Find Lead -- Brenda Wilkins at Brenda.Wilkins@ed.gov. You may also call Brenda Wilkins about the CFSA at 202-245-6920. TA center support is also available. To access TA support, contact Evelyn Shaw ([evelyn.shaw@unc.edu](mailto:evelyn.shaw@unc.edu), 919-962-2001).

State:­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Assessment Completed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person(s) Completing the CFSA (please include role): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section I: Regulatory Requirements Specific to Child Find**

*Instructions:*

*After each question, provide information describing how the State is meeting the requirement or the steps the State is taking to meet the requirement in the “State Response” section. You can include text from, links to, comments about, and/or data on policies and procedures.*

*Complete the summary section for each component, which includes strengths and areas for improvement. The summary sections here can also inform the action planning process included in Section II of the Child Find Self-Assessment. The action plan should include activities to address areas for improvement identified in this section of the self-assessment. See the Action Plan tab in Section II (Excel tool).*

**Comprehensive Child Find System: 34 CFR §303.302**

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| CCFS1. What policies and procedures are in place to ensure that, consistent with IDEA Part B under 34 CFR §300.111, all children with disabilities including children with disabilities who are homeless or are wards of the State , and children with disabilities attending private schools, regardless of the severity of their disability, are "identified, located and evaluated?" |
| State Response |
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| CCFS2. What policies, procedures or mechanisms are currently in place to ensure that the State lead agency, EIS providers, and other State primary referral sources appropriately identify and refer infants and toddlers with disabilities to the Part C Program? |
| State Response |
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| CCFS3. What are your State’s rigorous standards for appropriately identifying infants and toddlers with disabilities for EIS services (and thereby reducing the need for future services)? |
| State Response |
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| CCFS4. If applicable, describe your State’s policies and procedures for , identifying, locating and evaluating Indian infants and toddlers with disabilities living on reservations.  What are your State’s mechanisms for coordination with the Indian population (i.e. Tribal councils, tribal organizations)? |
| State Response |
|  |
| CCFS5. How does your State’s Child Find system ensure that infants and toddlers with disabilities who are homeless, or wards of the State are appropriately identified, located, and evaluated? |
| State Response |
|  |
| CCFS6. How does your State coordinate with all other major State-level agencies to ensure a comprehensive Child Find system?  These agencies could include: MIECHV, EPSDT, health, CHIP, EHDI, local education agencies and schools, Early Head Start, child protection and child welfare programs including foster care and CAPTA, programs that provide services under the Family Violence Prevention and Services Act, child care programs,tribal agencies, and programs serving homeless children. |
| State Response |
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| CCFS7. What are your State’s policies and procedures for referring a child to the Part C program? |
| State Response |
|  |
| CCFS8. How does your State utilize the Interagency Coordinating Council (ICC) to ensure a coordination of the Child Find system with other State level agencies? Please describe. |
| State Response |
|  |
| CCFS9. What memoradums of understanding or interagency agreements does your State have with other State agencies to ensure a well-coordinated comprehensive Child Find system? Please describe. |
| State Response |
|  |
| CCFS10. What are the Child Find provisions within your interagency agreements or memorandums of understanding with other State agencies? |
| State Response |
|  |
| CCFS11. If your State does not have a system to ensure that Child Find requirements are met, what steps will be taken to meet these requirements? What is the timeline for taking these steps? |
| State Response |
|  |

**Comprehensive Child Find System: Summary**

For component Comprehensive Child Find System: 34 CFR §303.302, please summarize strengths and areas for improvement based on the information provided above.

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| --- | --- |
| Strengths | Areas for Improvement |
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**Public Awareness Program--Information for Parents: 34 CFR §303.301**

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| PAP1. How does your State’s public awareness program provide information that describes the availability of early intervention services? |
| State Response |
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| PAP2. How does your State’s public awareness program inform parents and families of infants and toddlers with disabilities about the Part C referral process? |
| State Response |
|  |
| PAP3. How does your State ensure dissemination to all primary referral sources (especially hospitals and physicians) on the information to be given to parents, especially those with premature infants, or infants with other physical risk factors associated with learning or developmental complications? |
| State Response |
|  |
| PAP4. What procedures has your State adopted to assist primary referral sources to disseminate information to parents of infants and toddlers with disabilities on the State’s child find system? |
| State Response |
|  |
| PAP5. What are your State’s procedures for referring children under the age of three for an evaluation? |
| State Response |
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| PAP6. How is your State’s central directory disseminated within your State? |
| State Response |
|  |
| PAP7. As part of your State’s public awareness program, how do you ensure that your lead agency has kept parents informed about the availability of services under section 619 of the IDEA not fewer than 90 days prior to their toddler’s third birthday? |
| State Response |
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**Public Awareness Program – Information for Parents: Summary**

For component Public Awareness Program – Information for Parents: 34 CFR §303.301, please summarize strengths and areas for improvement based on the information provided above.

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| Strengths | Areas for Improvement |
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**Referral Procedures**. **34 CFR §303.303**

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| RP1. Who are your State’s primary referral sources? (e.g., parents, public health facilities, pediatrician offices, child care programs, hospitals, etc.) |
| State Response |
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| RP2. What are your State’s procedures for receiving referrals from primary sources? (e.g., phone call, form, etc.) |
| State Response |
|  |
| RP3. How does your State’s Child Find system provide that a child is referred for early intervention services as soon as possible, but in no case more than seven days, after a child has been identified? |
| State Response |
|  |

**Referral Procedures: Summary**

For component Referral Procedures: 34 CFR §303.303, please summarize strengths and areas for improvement based on the information provided above.

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| --- | --- |
| Strengths | Areas for Improvement |
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**Post-Referral Timeline (45 days): 34 CFR §303.310**

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| PRT1. Has your State adopted the screening procedures under 34 CFR §303.320?  If yes, what procedures does your State have in place to ensure that the initial assessment of the child and family, and the initial IFSP are completed within 45 days from the date the lead agency or EIS providers received a referral? |
| State Response |
|  |
| PRT2. How do your State’s procedures ensure that the initial assessment of the child and family and the initial IFSP are completed within 45 days from the date the lead agency or EIS provider received a referral? Please describe. |
| State Response |
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| PRT3. How does your State or EIS provider document exceptional family circumstances in a child’s record? |
| State Response |
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| PRT4. What is your State’s policy for addressing repeated attempts to obtain parental consent for screening (if applicable), evaluation and assessment, or the initial IFSP? |
| State Response |
|  |
| PRT6. How does your State ensure that the initial family assessment is conducted within 45 days once parent consent is obtained? |
| State Response |
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**Post-referral Timeline (45 days): Summary**

For component Post-referral Timeline (45 days): 34 CFR §303.310, please summarize strengths and areas for improvement based on the information provided above.

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| --- | --- |
| Strengths | Areas for Improvement |
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**Screening Procedures (optional): 34 CFR §303.320**

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| SP1. Has your State adopted the optional screening procedures outlined in section 34 CFR §303.320 of IDEA to determine whether a child is suspected as having a developmental delay or disability?  If yes, what are your State’s procedures as related to screening children for Part C? |
| State Response |
|  |
| SP2. How does your State, either directly or through its EIS providers, provide notice to parents and obtain consent to screen? |
| State Response |
|  |
| SP3. If a child is suspected of having a delay or disability, what are your State’s procedures for notifying the parent that an evaluation and assessment of the child must also be completed? |
| State Response |
|  |
| SP4. Where in your State’s policies does it reflect that parents have the right to request and consent to an evaluation at any time during the screening process? |
| State Response |
|  |
| SP5. What are your State’s policies for the administration of appropriate screening tools? |
| State Response |
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**Screening Procedures: Summary**

For component Screening Procedures: 34 CFR §303.320, please summarize strengths and areas for improvement based on the information provided above.

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| --- | --- |
| Strengths | Areas for Improvement |
|  |  |