Child Health Specialty Clinics Early ACCESS Service Coordination



Guidelines for CHSC Service Coordination

This document provides information to assist Early ACCESS (EA) Regions in partnering with Child Health Specialty Clinics (CHSC) Service Coordinators (SC) to support Early ACCESS children and families across the state.

Why does CHSC provide service coordination for Early ACCESS?

CHSC is one of the Early ACCESS Signatory Agencies appointed by the Governor to provide services and supports to Early ACCESS system in collaboration with the Iowa Department of Education (Lead Agency), Iowa Department of Human Services, and the Iowa Department of Public Health. CHSC receives state funding to provide service coordination based on a five year Memorandum of Agreement (MOA) and an annual Memorandum of Understanding.

What EA families does CHSC provide service coordination for?

As stated in the MOA, CHSC SCs primarily provide service coordination for children in EA who are:

- Born prematurely
- Have medical complexity (multiple diagnoses, medications, etc.)
- Were exposed to drugs before they were born
- Are in the foster care system

If caseloads are not full CHSC SCs can provide service coordination to children with developmental delays.

Children eligible for Early ACCESS based on a diagnosed condition may benefit from having a CHSC service coordinator given their connection with CHSC healthcare providers and Family Navigators.

One tool that may be helpful in identifying children appropriate for CHSC service coordination is the Children with Special Health Care Needs (CSHCN) Screener. The Child and Adolescent Health Measurement Initiative (CAHMI) developed this to identify children with special health needs defined as "those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally". The CSHCN Screener is validated and reliable, more information about this tool is available here:

https://www.cahmi.org/projects/children-with-special-health-care-needs-screener/

How does CHSC staff the Early ACCESS Service Coordinator positions?

CHSC employs Early ACCESS service coordinators who are parents of children and youth with special health care needs or have the experience of having a child who received services through an IFSP or IEP. Within CHSC, their title is Family Navigator. Family Navigators work with families to provide emotional support, systems navigation and connections to community resources. They are trained to support families throughout the lifetime of a child with special health care needs from birth through age 21. Families can be referred to a CHSC Family Navigator at any time during the IFSP process or during transition at age 3, even if they do not have a CHSC SC, if they would benefit from additional support.



Child Health Specialty Clinics Early ACCESS Service Coordination



CHSC has multidisciplinary regional and satellite offices throughout the state that house Family Navigators and other resources. CHSC Service Coordinators work from a community-based CHSC center to serve families within an established area. They work closely with Early ACCESS staff and may serve more than one AEA Region depending on the location of the CHSC office.

What training do CHSC Service Coordinators receive?

CHSC SCs complete Early ACCESS service coordination training modules and shadowing experiences. All CHSC SCs can become credentialed as a Family Peer Support Specialist (FPSS) through the Iowa Board of Certification. The certification recognizes wide-ranged training requirements for providing family support including online modules as well as some face-to-face (in person or virtually) with role play for handling unique situations and proof of competence. In addition, FPSSs must complete 25 hours of supervision within four domains of a FPSS: Practice with Professionalism and Ethics, Engage Families; Teach & Support Families; and Advocate & Find Resources for Families before they can apply for credentialing. The credential also requires attending and passing one of the Mental Health First Aid courses.

CHSC SCs are not required to have degrees in early childhood special education or support services. Their training and professional development is focused on family assessment and support.

Service Coordinator Role

Service Coordinators serve as a representative of the Early ACCESS system of early intervention services. They have five major roles:

- Partner with each family in continuously seeking the appropriate services, resources, and supports necessary to benefit the development of each child being served for the duration of the child's eligibility.
- Assist the family in accessing early intervention services and resources from a variety of informal supports and/or formal community agencies or providers.
- Facilitate communication among early intervention service providers across agencies, resulting in a more coordinated and responsive delivery system.
- Use family-centered practices in all contacts with families.
- Assure the development and implementation of the IFSP within the required timelines.

Service Coordinator Responsibilities

Each eligible infant and toddler and their family must have one service coordinator who is responsible for:

- Explaining the system of services and resources called Early ACCESS.
- Assisting parents of infants and toddlers with disabilities in obtaining access to needed early
 intervention services and other services identified in the IFSP, including making referrals to
 providers outside the Early ACCESS system for needed services and assisting parents in
 scheduling appointments for infants and toddlers with disabilities and their families.
- Coordinating the provision of early intervention services and other services (such as educational, social, and medical services that are not provided for diagnostic or evaluative purposes) that the child needs or is being provided.
- Coordinating evaluations and assessments.



The Iowa Department of Education, as the lead agency, partners with the Department of Public Health,
Department of Human Services, Child Health Specialty Clinics, and Iowa's Area Education Agencies to
provide Early ACCESS services.

CHSC, last reviewed: Krueger, Marks 8-20-2020

Child Health Specialty Clinics Early ACCESS Service Coordination



- Facilitating and participating in the development, review, and evaluation of IFSPs.
- Conducting referral and other activities to assist families in identifying available early intervention service providers.
- Coordinating, facilitating, and monitoring the delivery of required services to ensure that the services are provided in a timely manner.
- Conducting follow-up activities to determine that appropriate early intervention services are being provided.
- Informing families of their rights and procedural safeguards.
- Coordinating the funding sources for services.
- Conducting referral and other activities to assist families in identifying available early intervention service providers.
- Facilitating the development of a transition plan to preschool, school, or, if appropriate, to other services.

CHSC SCs complete documentation in the IFSP based on service coordination responsibilities and complete log notes. CHSC staff review IFSPs prior to implementation by AEAs to assure compliance.

CHSC SCs are dedicated service coordinators. They may assist with developmental screenings, but are not formally trained in developmental assessment and evaluation activities, and do not make decisions related to eligibility based on developmental delay or informed clinical opinion. Information they gather is shared with the IFSP team so the team can interpret results and develop outcomes and interventions.

CHSC Service Coordination Transition Responsibilities during Part B Determination

The role of a CHSC SC during transition is to support the child and family throughout the process. They will check-in with the family to make sure the family has a clear understanding of what is happening and will reach out to the IFSP team if the family needs further educational support.

CHSC SCs can assist with the completion of the Transition Tab in the IFSP but many of the sections are more meaningful if completed by the EA providers or with input from the Part B team.

- Child Strengths: The EA provider(s) know the child's strengths and needs best
- Program Options: The EA provider(s) are the ones that should be discussing the program options with the family.
- Strategies: The EA provider(s) are the ones who would be providing the strategies to prepare the child. (The SC may be helping to prepare the family for the change.)
- Transition Planning Meeting: The CHSC SC may complete the box about the transition planning meeting. The AEA should share information about the new program with the family.
- Part B: The SC could do the plan for services if the child is not going to Part B.
- IEP Meeting: The AEA Part B team is responsible for scheduling the IEP meeting
- Part B Services: The AEA Part B team or the EA provider(s) are responsible for recording what those services will be.

CHSC SCs do not provide support or services as part of an IEP but they can provide Family Navigation. They do not complete any of the required Part B documentation nor schedule the IEP meeting but can participate to support the family.

