

Proposed Policy Amendments (22/23)



Policy#	Policy Document	Current Policy	Proposed Policy
2.1.7	Procedural Form	Request for Use of Public Awareness Materials Form	Revised the Form's language to provide clarity regarding approval timelines and additional specifics.
3.1.2.B	Policy Handbook	If the child has an established condition, a written confirmation from a licensed physician of the diagnosis is required to establish eligibility OR In the case of (a) severe attachment disorder or autism spectrum disorder, a healthcare practitioner acting within his/her scope of practice or (b) in case of hearing loss, a licensed audiologist. Written confirmation of the diagnosed condition must be in the child's Early Steps record.	If the child has an established condition, appropriate documentation of a diagnosis provided by a licensed physician or other records provided in coordination with an authorized primary referral source is required to establish eligibility. Appropriate documentation of an established condition must be in the child's Early Steps record.
3.3.4	Procedural Form	Informed Notice of Consent for Screening, Evaluation, Assessment and Follow Up Review Form (English/Spanish/Creole)	Added to Form ability to check each initial/follow up service option separately. (Example: Screening, Evaluation, Assessment)
3.4.5	Policy Handbook	A. Evaluation and assessments must be: B. Multidisciplinary in nature, C. Conducted in a nondiscriminatory manner, D. Selected and administered so as not to be racially or culturally discriminatory.	Initial assessments and evaluations (if necessary) must be: A. Multidisciplinary in nature, B. Conducted in a nondiscriminatory manner, C. Selected and administered so as not to be racially or culturally discriminatory.
3.4.7.	Policy Handbook	The evaluation and/or assessment must include opportunities to observe the child in typical routines/activities.	The initial evaluation and/or assessment must include opportunities to observe the child in typical routines/activities.
3.4.8	Policy Handbook	At least two different individuals in two or more separate disciplines appropriate to address the child's presenting condition(s) must be involved in conducting the evaluation/assessment.	At least two different individuals in two or more separate disciplines appropriate to address the child's presenting condition(s) must be involved in conducting the initial evaluation/assessment.
3.5.2	Policy Handbook	Any evaluation must determine the child's developmental status in each of the following domains: A. Communication, B. Self-help/adaptive, C. Cognitive, D. Physical (including fine and gross motor and vision and hearing), and E. Social/emotional.	Eligibility evaluations must determine the child's developmental status in each of the following domains: A. Communication, B. Self-help/adaptive, C. Cognitive, D. Physical (including fine and gross motor and vision and hearing), and E. Social/emotional.
3.5.3	Policy Handbook	Any evaluation must include the following: A. Administration of an appropriate standardized evaluation instrument; B. Documentation of the child's history (to include interviewing the parent); C. Identification of the child's level of functioning in each developmental area; D. Gathering information from other sources if necessary, such as family members, other caregivers, medical providers and social workers; and E. Review of medical, educational, or other records.	Any evaluation The initial evaluation and assessment must include the following: A. Administration of an appropriate standardized evaluation instrument A. Documentation of the child's history (to include interviewing the parent); B. Identification of the child's level of functioning in each developmental area; C. Gathering information from other sources if necessary, such as family members, other caregivers, medical providers and social workers; and D. Review of medical, educational, or other records.
3.6.2	Policy Handbook	The assessment of each child must include: A. A review of the results of the evaluation,	The assessment of each child must include: A. A review of any evaluation results

Policy#	Policy Document	Current Policy	Proposed Policy
		B. Personal observations of the child, and C. Identification of the needs of the child and family.	B. Personal observations of the child, C. Identification of the needs of the child and family, D. Medical documentation E. Observations from family members and other caregivers, F. Educational observation and reports, G. Any other documentation that assists in assessing the child's current functional skills
4.1.5	Procedural Form	On the IFSP, current outcome page lists the 3- and 6-month goals.	Leaving this field blank allows the provider to enter the most appropriate time frame for the child and family.
5.7.1.C	Policy Handbook	C. If the annual IFSP meeting is due within 45 days prior to a child's third birthday, a face-to-face meeting does not need to occur; however, the service coordinator, in collaboration with the IFSP team, must reauthorize any services that will continue until the child's third birthday.	C. If the annual IFSP meeting is due within 45 days prior to a child's third birthday, a review may be carried out by a meeting or other means that is acceptable to the parent and other participants on the IFSP team in order to reauthorize any services that will continue until the child's third birthday.
6.3	Procedural Form	Consultation Form	Delete form- information captured in case notes.
6.3.1	Policy Handbook	The date and time of the consultation must be shared with the family prior to the meeting. When the family wants to participate in the consultation, the professionals must accommodate this request.	When the family wants to participate in the consultation, the professionals must accommodate this request. A family can request a consultation at any time.
6.3.2	Policy Handbook	The state-approved Consultation form must be completed and submitted to the LES when consultation among IFSP team members occurs.	Consultations may not involve discussions regarding changes or modifications to the provision of the early intervention services described in the IFSP, including goals, outcomes, or authorized services. All consultations must be documented on a case note and maintained in the child's record.
6.4.1	Procedural Form	Assistive Technology Assistance Form	Added the following information to the header: 1. Assessor's name, discipline, and contact information to the header 2. Child's diagnosis and ICD 10 code 3. Medicaid and insurance information
6.10.0	Policy Handbook & Definitions	Add definitions to differentiate between New and Continued service.	A. New Service Definition: When an IFSP meeting is held and a service is identified and authorized for the first time, then these services are considered a "New Service". B. Continued Service Definition: When an IFSP meeting is held, any preexisting services from previous IFSPs that will remain active are considered a "Continued Service".
8.2.24	Procedural Form	Consent to Pre and Post Adoption Information	Delete form.
10.2.1.A	Policy Handbook	A. Each Local Early Steps (LES) must coordinate and/or provide training at the local level and liaison and work in conjunction with ESSO per contract requirements.	A. Each Local Early Steps (LES) must coordinate and/or provide training at the local level and develop a training and professional development plan for all internal staff, including but not limited to Service Coordinators, Coaches, Family Resource Specialist, and Direct Service Providers.

Policy#	Policy Document	Current Policy	Proposed Policy
10.4.3.C	Policy Handbook	The requirements for Service Coordinators with infield degrees were changed last year; however, the professional experience requirements for SCs with an out-of-field degree were not updated. The three-year professional experience requirements seem excessive as this is an entry level position.	An out-of-field degree with a minimum of three years one-year documented experience with young children and families in a teaching, case management or counseling role, or with individuals with special needs and/or developmental delays of any age in a case management role, or...
10.5.1.D	Policy Handbook	New Policy.	All licensed providers must supply Continuing Education Units (CEU) or in-service training related to infant and toddler development or family engagement with caregivers of children under 36 months of age when providing documentation of a renewed licensure.
10.5.3.A	Policy Handbook	A. Licensed healthcare professionals without the required one year of early intervention experience must complete the ES mentorship requirements and the ES Mentorship Documentation Form prior to serving Early Steps children without a mentor. B. Mentors must be the same discipline as the person being mentored. C. Mentoring will be monitored at the local level with oversight through contract management reviews. D. The mentorship must be completed within one year of its initiation.	A. Licensed healthcare professionals without the required one year of early intervention experience must complete the following tasks within one year of employment or contract with the LES: 1. ES mentorship requirements and the ES Mentorship Documentation Form prior to serving Early Steps children without a mentor. 2. FL-EPIC workshops and required coaching sessions or documentation that initial FL-EPIC fidelity has been achieved. B. Mentors must be the same discipline as the person being mentored. C. Mentoring will be monitored at the local level with oversight through contract management reviews. D. The mentorship must be completed within one year of its initiation.
10.5.6	Policy Handbook	Speech therapy, physical therapy and occupational therapy assistants may not serve as a Primary Service Provider (PSP)	Delete Policy.
10.6.2.B.3	Policy Handbook	3. An ITDS applicant with an in-field or equivalent degree must provide documentation of at least one year of post-degree professional experience in early intervention using the Early Steps Certification of Experience form. a. Verification of one of the following: b. The applicant has successfully completed the university ITDS coursework at an approved university as documented by a university letter or transcripts	3. An ITDS applicant with an in-field or equivalent degree must provide documentation of at least one year of postdegree professional experience in early intervention using the Early Steps Certification of Experience form and verification of one of the following: a. The applicant has successfully completed the university ITDS coursework at an approved university as documented by a university letter or transcripts,
10.8	Policy Handbook	Create New Policy- Professional Development.	House Policy 10.8.1 and 10.8.2
10.8.1	Policy Handbook	New Policy.	Local Early Steps must employ a minimum of 1.0 FTE Lead Implementation Coach (LIC) to ensure Florida Embedded Practices and Interventions with Caregivers (FL-EPIC) is implemented.
10.8.2	Policy Handbook	New Policy.	The LIC must meet the minimal qualifications for a licensed or non- licensed healthcare professional.