

III. Eligibility for Early Intervention Services

A. Determination of Eligibility

Massachusetts Department of Public Health Certified Early Intervention programs determine eligibility through an evaluation conducted by a multidisciplinary team based on informed clinical opinion and utilizing a DPH-approved developmental inventory tool. Instruments approved by the Department of Public Health for establishing eligibility, as of 7/1/05, are: the Early Intervention Developmental Profile (“Michigan”) and the Battelle Developmental Inventory - 2 (“BDI-2”).

B. Categories and Criteria of Eligibility

1. Children with Established Risk or Established Developmental Delays : This category includes (1) children whose early development is influenced by diagnosed medical conditions of known etiology bearing relatively well known expectations for developmental delay and (2) children who, during the infancy period, or more commonly in the second year of life, begin to manifest developmental delays, often of unknown etiology.

Criteria

(1) The child has:

- A diagnosed neurological, metabolic, or genetic disorder, chromosomal anomaly, medical or other disabling condition with documented expectation of developmental delay, **or**
- vision loss not corrected by medical intervention or prosthesis, **or**
- permanent hearing loss of any degree, **or**

(2) The child exhibits a delay of 25% or more, as measured by an approved instrument yielding age equivalent scores, in one or more areas of development, including: physical development (includes gross and fine motor), cognitive development, communication development (includes expressive or receptive), social or emotional development, or adaptive development, **or**

(3) The child's development is at least one standard deviation below the norm, as measured by an approved instrument yielding standard deviation scores, in one or more areas of development, including: physical development (includes gross and fine motor), cognitive development, communication development (includes expressive or receptive), social or emotional development, or adaptive development, **or**

(4) The child has questionable quality of developmental skills and functioning based on the informed clinical opinion of a multidisciplinary team. A child found to be eligible based on the category of "clinical judgment" can receive services for up to 6 months. For services to continue after this period, eligibility must be determined based on diagnosis, developmental delay or risk factors.

2. Children at Risk for Developmental Delays or Disorders: This category includes:

(1) children with a history of prenatal, perinatal, neonatal, or early life events suggestive of biological insults to the developing central nervous system which, either singularly or collectively, increase the probability of later atypical development and (2) children who are biologically sound but whose early life experience, including maternal and family care, health care, nutrition, opportunities for expression of adaptive behaviors, and patterns of physical and social stimulation are sufficiently limiting to the extent that they impart high probability for delayed development.

Criteria:

Four or more of the following risk factors are present:

CHILD CHARACTERISTICS

Note 1: Risk factors 1 – 4 apply only to children who are under 18 months chronological age at the time of the evaluation for eligibility.

Note 2: Birth or medical records are available to substantiate risk factors 1 – 8.

- 1) Birthweight is **less** than 1200 grams (2 pounds 10½ ounces)
- 2) Gestational age is **less** than 32 weeks *Developmental evaluation for eligibility will be based on chronological age, not on adjusted age.*
- 3) NICU admission is **more** than 5 days
- 4) Apgar score is **less** than 5 @ 5 minutes
- 5) Total hospital stay is **more** than 25 days in 6 months *This does **not** apply to the birth admission of a premature child. Subsequent admissions to a hospital or the transfer hospital stay after NICU admission will apply toward this total.*
- 6) Diagnosis of Intrauterine Growth Retardation (IUGR) or Small for Gestational Age (SGA)
- 7) Weight for age, or weight for height *A child meets this risk criterion if weight for age or weight for height is less than the 5th percentile or greater than the 95th percentile. Weight for age has **dropped** more than 2 major centiles in 3 months in a child who is under 12 months of age or has dropped more than 2 major centiles in 6 months in a child who is 12 to 36 months of age. A major centile is defined as the major percentiles (5, 10, 25, 50, 75, 90, 95) on the Physical Growth Chart adopted by the National Center for Health Statistics. The above two measurements should be based on the appropriate growth chart approved by the National Center for Health Statistics.*
- 8) Blood lead levels measured at 15 µg/dl (micrograms per deciliter) or more. *A child meets this risk criterion with a **venous** (not finger stick) blood lead level of 15 µg/dl (micrograms per deciliter) or more.*
- 9) Chronic feeding difficulties *A child meets this risk criterion if any of the following conditions exist over an extended period of time:*
 - *Severe colic*

- *Stressful or extremely conflicted feedings*
- *Refusal or inability to eat*
- *Failure to progress in feeding skills*

Evidence of this criteria should be documented in the child's record and appropriate outcomes and treatment strategies addressed as determined by the family. Note: If a child has been diagnosed as failure-to-thrive, the child is eligible under established risk.

10) Insecure attachment/interactional difficulties *A child meets this risk criterion if the child appears to have **inadequate or disturbed social relationships, depression, or indiscriminate aggressive behavior** and **the family perceives this as an issue**. Note: In most cases, insecure attachment in infants and toddlers is evidenced by behavior such as persistent failure to initiate or respond to social interactions, fearfulness that does not respond to comforting by caregivers, and indiscriminate sociability. The child's family must perceive this as an issue for it to be included as a risk criterion.*

11) Suspected Central Nervous System abnormality -- Suspected CNS abnormalities may include but are not limited to the following:

- *Infection: meningitis, encephalitis, maternal infection during pregnancy (TORCH infections – toxoplasmosis, other (syphilis and HIV), rubella, CMV, herpes).*
- *Trauma: intracranial hemorrhage, subdural hematoma, epidural hematoma.*
- *Metabolic: Profound and persistent hypoglycemia, seizures associated with electrolyte imbalance, profound and persistent neonatal hyperbilirubinemia (greater than 20 mg/dl [milligrams per deciliter], acidosis.*
- *Asphyxia: prolonged or recurring apnea, ALTE [apparent life threatening event], suffocation, hypoxia, meconium aspiration, near-drowning*
- *In utero drug exposure: nicotine, ethanol, THC, cocaine, amphetamine, phenytoin, barbiturates and other.*

This category may also include the following clinical findings:

- *Abnormal muscle tone*
- *Persistence of multiple signs of less than optimal sensory and motor patterns, including under-reaction or over-reaction to auditory, visual, or tactile input.*

12) Multiple trauma or losses *A child meets this risk criterion if he/she has experienced a series of traumas or extreme losses that may impact on the care and/or development of the child. For example, multiple hospitalizations or multiple placements outside the home. This risk factor should be documented in the child's record and appropriate outcomes and treatment strategies addressed as determined by the family.*

FAMILY CHARACTERISTICS

NOTE #1 – Regarding children in the care of someone other than the child's birth/natural parent: If the DSS (Department of Social Services) goal is for the reunification of the parent and child, the following risk factors apply based on the birth/natural parent. The EI program should work closely with both the birth/natural and foster families of the child, whenever possible. If there is no goal for reunification with the child's birth/natural parents, the family risk factors are to be based on the family characteristics of the primary caregivers.

NOTE #2 – Determination of risk factors under family characteristics should be determined by family perception.

NOTE #3 – Maternal characteristics apply as risk factors to fathers if the father is the primary caregiver.

1. Maternal age at child's birth is **less** than 17 years or there is a maternal history of 3 or more births before age 20.

2. Maternal education is less than or equal to 10 years *A mother meets this risk criterion if she has completed 10 years or less of formal education at the time of the eligibility evaluation.*
3. Parental chronic illness or disability affecting caregiving ability *A family meets this risk criterion if one parent has a diagnosed chronic illness or a sensory, mental, or developmental disability which is likely to interfere with or adversely affect the child's development or have an impact on care-giving abilities. Examples of this risk factor may be affective disorders, schizophrenia, sensory limitations, including visual or hearing limitations, and cognitive limitations.*

NOTE #4 – The following risk factors should be documented in the child's record and appropriate outcomes and strategies addressed as determined by the family.

4. Family lacking social supports *A family meets this risk criterion if the family is geographically or socially isolated and in need of emotional support and services.*
5. Inadequate food, clothing or shelter, including homelessness *A family meets this risk criterion if the lack of food, clothing, or a stable housing arrangement cause life stress for the family.*
6. Open or confirmed protective service investigation, including child currently in foster care *A family meets this risk criterion if the family:*
 - *has an open protective service file with the Department of Social Services, or*
 - *is in the period of investigation for child abuse or neglect, or*
 - *has had its file closed by DSS in the last 3 months*
7. Substance abuse in the home *A family meets this criterion if substance abuse is having or may have an adverse affect on the child's development.*
8. Domestic violence in the home. *A family meets this risk criterion if domestic violence is having or may have an adverse affect on the child's emotional development. This category may include physical, sexual, or emotional abuse.*