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Department of Education

Adopted Permanent Rules Relating to Infant and Toddler Intervention Services

## 3525.1350 INFANT AND TODDLER INTERVENTION SERVICES.

Subpart 1. Services required. Infant and toddler intervention services under United States Code, title 20, chapter 33, sections 1431, et seq., and Code of Federal Regulations, title 34, part 303, must be available to children from birth through two years of age who meet the criteria described in subpart 2.

Subp. 2. Criteria for birth through two years of age. The team shall determine that a child from birth through the age of two years is eligible for infant and toddler intervention services if:

A. the child meets the criteria of one of the disability categories in United States Code, title 20, chapter 33, sections 1400, et seq., as defined in Minnesota Rules; or

B. the child meets one of the criteria for developmental delay in subitem (1) or the criteria in subitem (2):

- (1) the child has a diagnosed physical or mental condition or disorder that has a high probability of resulting in developmental delay regardless of whether the child has a demonstrated need or delay; or
- (2) the child is experiencing a developmental delay that is demonstrated by a score of 1.5 standard deviations or more below the mean, as measured by the appropriate diagnostic measures and procedures, in one or more of the following areas:
  - (a) cognitive development;
  - (b) physical development, including vision and hearing;
  - (c) communication development;
  - (d) social or emotional development; and

Approved by Revisor

(e) adaptive developmer	(e)	adaptive	developmen	ιt
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Subp. 3. Criteria for three through six years of age. The team shall determine that a child from the age of three years through the age of six years is eligible for special education when:

A. the child meets the criteria of one of the categorical disabilities <u>in United States</u> <u>Code, title 20, chapter 33, sections 1400 et seq., as defined in Minnesota Rules</u>; or

B. the child meets one of the criteria for developmental delay in subitem (1) and the criteria in subitem (2). Local school districts have the option of implementing these criteria for developmental delay. If a district chooses to implement these criteria, it may not modify them.

## (1) The child:

- (a) has a diagnosed physical or mental condition or disorder that has a high probability of resulting in developmental delay; or
- (b) has a delay in each of two or more of the areas of cognitive development; physical development, including vision and hearing; communication development; social or emotional development; and adaptive development, that is verified by an evaluation using one or more technically adequate, norm-referenced instruments. The instruments must be individually administered by appropriately trained professionals and the scores must be at least 1.5 standard deviations below the mean in each area.
  - (2) The child's need for special education is supported by:
- (a) at least one documented, systematic observation in the child's daily routine setting by an appropriate professional or, if observation in the daily routine setting is not possible, the alternative setting must be justified;
  - (b) a developmental history; and
  - (c) at least one other evaluation procedure in each area of identified delay

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that is	conduc	ted on a	different day than the	medical or no	rm-referenc	ed evaluati	.on;
which	may	include	criterion-referenced	instruments,	language	samples,	or
curriculum-based measures.							

Subp. 4. Evaluation. The evaluation used to determine whether a child is eligible for infant and toddler intervention services must be conducted within the timelines established in Code of Federal Regulations, title 34, part 303. It must be based on informed clinical opinion; must be multidisciplinary in nature, involving two or more disciplines or professions; and must be conducted by personnel trained to utilize appropriate methods and procedures. The evaluation must include:

A. a review of the child's current records related to health status and medical history;

B. an evaluation of the child's levels of cognitive, physical, communication, social or emotional, and adaptive developmental functioning;

C. an assessment of the unique needs of the child in terms of each of the developmental areas in item B; and

D. at least one documented, systematic observation in the child's daily routine setting by an appropriate professional or, if observation in the daily setting is not possible, the alternative setting must be justified.

Subp. 5. Transition. The service coordinator provided for in Minnesota Statutes, section 125A.33, must facilitate transition from infant and toddler intervention services before the child's third birthday. The IFSP must include steps to determine and document eligibility for early childhood special education, and steps to support the transition of the child to early childhood special education under United States Code, title 20, chapter 33, sections 1411 et seq., and Code of Federal Regulations, title 34, part 300, or to other appropriate community-based services that may be available.

A. For a child who may be eligible for early childhood special education services 3525.1350 3

under United States Code, title 20, chapter 33, sections 1411 et seq., and Code of Federal Regulations, title 34, part 300, the service coordinator must, with the approval of the family of the child, convene a conference between the family, the local educational agency, and community-based service providers to discuss services that the child may receive under United States Code, title 20, chapter 33, sections 1411 et seq., and Code of Federal Regulations, title 34, part 300. The conference must be held not less than 90 days, and, at the discretion of all the parties, not more than nine months, before the child is eligible for the preschool services.

B. For a child who may not be eligible for early childhood special education services under United States Code, title 20, chapter 33, sections 1411 et seq., and Code of Federal Regulations, title 34, part 300, the service coordinator must, with the approval of the family, take reasonable steps, to convene a conference between the family, the lead agency, and community-based service providers to discuss appropriate services that the child may receive after exiting infant and toddler intervention services.

**RENUMBERING INSTRUCTION.** In Minnesota Rules, the revisor of statutes must renumber Minnesota Rules, part 3525.1350, subpart 3, as Minnesota Rules, part 3525.1351, and make necessary cross-reference changes.