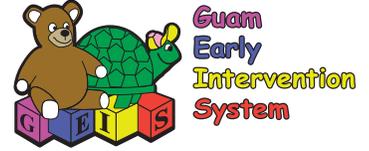




DEPARTMENT OF EDUCATION
Guam Early Intervention System



Guam Part C

Early Intervention Program for Infants and Toddlers With Disabilities

State Plan 2013

*"Our educational community prepares all students for life,
promotes excellence, and provides support!"*

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SUBPART A

DEFINITIONS

DEFINITIONS

The following definitions have been taken from the IDEA Part C regulations and Amendments of the Individuals with Disabilities Education Act (PL 105-17) and apply to all portions of this grant application:

1. Act (§303.4)

Means the Individuals with Disabilities Education Acts amended usually referred to as IDEA.

2. At-risk infant or toddler (§303.5)

Means an infant or toddler, birth to three years of age that would be at risk of experiencing a substantial developmental delay if early intervention services were not provided to the individual.

3. Children (§303.6)

Means individuals under the age of six and may include an infant or toddler with a disability or "at risk" for experiencing substantial developmental delay, from birth to age three.

4. Consent (§303.7)

Means the parent --

- a. Has been fully informed of all information relevant to the activity for which consent is sought, in the parent's native language;
- b. Understands and agrees in writing to the carrying out of the activity for which the parent's consent is sought, and the consent form describes the activity and lists the early intervention recorded (if any) that will be released and to who they will be released; and
- c. Understands that the granting of consent is voluntary on the part of the parent and may be revoked at any time or if a parent revokes consent, that revocation is not retroactive (i.e., it does not apply to an action that occurred before the consent was revoked).

5. Council (§303.8)

Means the Guam Interagency Coordinating Council that meets the requirements as identified in this Act and may be referred to as GICC in this grant application.

6. Days (§303.9)

Means calendar days, unless otherwise indicated.

7. Developmental Delay (§303.10)

Guam's definition of developmental delay as defined in “Subpart B, State Definitions of Developmental Delay and Other Eligibility Criteria (§303.111),” section of this application.

8. Duration

Means the projecting when a given service will no longer be provided (such as when the child is expected to achieve the results or outcomes in his or her IFSP).

9. Early Intervention Service (§303.12)

Means an entity (whether public, private, or nonprofit) or an individual that provides early intervention services under IDEA Part C, whether or not the entity or individual receives Federal funds under IDEA Part C, and may include, where appropriate, the lead agency and a public agency responsible for providing early intervention services to infants and toddlers with disabilities in the State under IDEA Part C.

An EIS system is responsible for --

- a. Participating in the multidisciplinary individualized family service plan (IFSP) Team’s ongoing assessment of an infant or toddler with a disability and a family-directed assessment of the resources, priorities, and concerns of the infant’s or toddler’s family, as related to the needs of the infant or toddler, in the development of integrated goals and outcomes for the IFSP;
- b. Providing early intervention services in accordance with the IFSP of the infant or toddler with a disability; and
- c. Consulting with and training parents and others regarding the provision of the early intervention services described in the IFSP of the infant or toddler with a disability.

10. Early Intervention Services (§303.113)

Means developmental services that --

- a. Are provided under public supervision
- b. Are selected in collaboration with the parents
- c. Are provided at no cost except where Federal or State law provides for a system of payments by families, including a schedule of sliding fees;
- d. Are designed to meet the developmental needs of an infant or toddler with a disability and the need of the family to assist appropriately in the infant’s or toddler’s development, as identified by the IFSP in any one or more of the following areas --

- Physical development;
 - Cognitive development;
 - Communication development;
 - Social or emotional development; or
 - Adaptive development;
- e. Meet the standards of the State in which the early intervention services are provided, including the requirements of IDEA Part C;
- f. Include --
- family training, counseling, and home visits;
 - special instruction;
 - speech-language pathology and audiology services;
 - occupational therapy;
 - physical therapy;
 - psychological services
 - service coordination services;
 - medical services only for diagnostic or evaluation purposes;
 - early identification, screening, and assessment services;
 - health services necessary to enable the infant or toddler to benefit from the other early intervention services;
 - social work services
 - vision services;
 - assistive technology devices and assistive technology services; and
 - transportation and related costs that are necessary to enable an infant or toddler and the infant or toddler's family to receive another service described in this paragraph;
- g. Are provided by qualified personnel, including-
- audiologist
 - family therapists
 - nurses
 - occupational therapists
 - orientation and mobility specialist
 - pediatricians and other physicians for diagnostic and evaluation purposes;
 - physical therapists;
 - psychologists;
 - registered dieticians
 - social workers
 - special educators; speech-language pathologists;
 - vision specialist

- h. Other services. The lists of services and qualified personnel referred to above are not exhaustive types of services or the types of qualified personal that may provide early intervention services. Nothing prohibits the identification in the IFSP of another type of service as an early intervention service provided that the service meets the criteria identified above or of another type of personnel that may provide early intervention services in accordance to IDEA Part C provided that such personnel meet the requirements in §303.31. Early intervention services may include such services as respite and other family support services. Qualified personnel may include such personnel as vision specialists, paraprofessionals, and parent-to-parent support personnel.
- i. To the maximum extent appropriate, are provided in natural environments, including the home and community settings in which children without disabilities participate.
- j. Are provided in conformity with an Individualized Family Service Plan adopted in accordance of this Act;

11. Early Intervention Services (Types of)

- a. Assistive technology devices and assistive technology services.

Assistive technology device means any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of an infant or toddler with disabilities. The term does not include a medical device that is surgically implanted, including a cochlear implant, or the optimization, maintenance, or replacement of that device.

Assistive technology service means a service that directly assists an infant or toddler with a disability in the selection, acquisition, or use of an assistive technology device. Assistive technology services include --

- The evaluation of the needs of an infant or toddler with a disability, including a functional evaluation of the child in the child's customary environment;
- Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by infants or toddlers with disabilities;
- Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
- Coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;
- Training or technical assistance for an infant or toddler with a disability or, if appropriate, that child's family; and

- Training or technical assistance for professionals (including individuals providing education or rehabilitation services), or other individuals who provide services to, or are otherwise substantially involved in the major life functions of, infants or toddlers with disabilities.
- b. Audiology includes --
- Identification of children with auditory impairment, using at-risk criteria and appropriate audiological screening techniques;
 - Determination of the range, nature, and degree of hearing loss and communication functions, by use of audiological evaluation procedures;
 - Referral for medical and other services necessary for the habilitation or rehabilitation of an infant or toddler with a disability who has an auditory impairment;
 - Provision of auditory training, aural rehabilitation, speech reading and listening devices orientation and training, and other services;
 - Provision of services for prevention of hearing loss; and
 - Determination of the child's need for individual amplification, including selecting, fitting, and dispensing appropriate listening and vibrotactile devices, and evaluating the effectiveness of those devices.
- c. Family training, counseling, and home visits include --
- Services provided, as appropriate, by social workers, psychologists, and other qualified personnel to assist the family of an infant or toddler with a disability in understanding the special needs of the child and enhancing the child's development.
- d. Health Services
- Has the meaning given in #16 of this section.
- e. Medical services
- Services provided by a licensed physician for diagnostic or evaluation purposes to determine a child's developmental status and need for early intervention services.
- f. Nursing services include --
- The assessment of health status for the purpose of providing nursing care, including the identification of patterns of human response to actual or potential health problems;

- Provision of nursing care to prevent health problems, restore or improve functioning, and promote optimal health and development; and
- Administration of medications, treatments, and regimens prescribed by a licensed physician.

g. Nutrition services include --

- Conducting individual assessments in;
 - Nutritional history and dietary intake;
 - Anthropometric, biochemical, and clinical variables;
 - Feeding skills and feeding problems; and
 - Food habits and food preferences;
- Developing and monitoring appropriate plans to address the nutritional needs of children eligible under IDEA Part C, based on assessment findings; and
- Making referrals to appropriate community resources to carry out nutrition goals.

h. Occupational therapy includes --

Services to address the functional needs of an infant or toddler with disabilities related to adaptive development, adaptive behavior, and play, and sensory, motor, and postural development. These services are designed to improve the child's functional ability to perform tasks in home, school, and community settings, and include --

- Identification, assessment, and intervention;
- Adaptation of the environment, and selection, design and fabrication of assistive and orthotic devices to facilitate development and promote the acquisition of functional skills; and;
- Prevention or minimization of the impact of initial or future impairment, delay in development, or loss of functional ability.

i. Physical therapy includes --

Services to address the promotion of sensorimotor function through enhancement of musculoskeletal status, neurobehavioral organization, perceptual and motor development, cardiopulmonary status, and effective environmental adaptation.

These services include --

- Screening, evaluation, and assessment of infants and toddlers to identify movement dysfunction;
 - Obtaining, interpreting, and integrating information appropriate to program planning, to prevent, alleviate, or compensate for movement dysfunction and related functional problems; and
 - Providing individual and group services or treatment to prevent, alleviate, or compensate for movement dysfunction and related functional problems.
- j. Psychological services include --
- Administering psychological and developmental tests, and other assessment procedures;
 - Interpreting assessment results;
 - Obtaining, integrating, and interpreting information about child behavior, and child and family conditions related to learning, mental health, and development; and
 - Planning and managing a program of psychological services, including psychological counseling for children and parents, family counseling, consultation on child development, parent training, and education programs.
- k. Service coordination services includes --
- Assistance and services provided by a service coordinator to a child eligible under IDEA Part C and the child's family that are in addition to the functions and activities listed in #38 Service Coordinator (Case Management).
- l. Sign Language and cued language services --
- Includes teaching sign language, cued language, and auditory/oral language, providing oral transliteration services (such as amplification), and providing sign and cued language interpretation.
- m. Social work services include --
- Making home visits to evaluate a child's living conditions and patterns of parent-child interaction;
 - Preparing a social or emotional developmental assessment of the infant or toddler within the family context;
 - Providing individual and family-group counseling with parents and other family members, and appropriate social skill-building activities with the infant or toddler and parents;
 - Working with those problems in the living situation (home, community, and any center where early intervention services are

- provided) of an infant or toddler with a disability and the family of that child that affect the child's maximum utilization of early intervention services; and
- Identifying, mobilizing, and coordinating community resources and services to enable the child and family to receive maximum benefit from early intervention services.
- n. Special instruction includes --
- The design of learning environments and activities that promote the infant's or toddler's acquisition of skills in a variety of developmental areas, including cognitive processes and social interaction; in natural settings including home, neighborhood and community settings;
 - Curriculum planning, including the planned interaction of personnel, materials, time and space, that leads to achieving the outcomes in the child's individualized family service plan for the infant or toddler with a disability;
 - Providing families with information, skills, and support related to enhancing the skill development of the child; and
 - Working with the infant or toddler with a disability to enhance the child's development.
- o. Speech-language pathology includes --
- Identification of children with communication or language disorders and delays in development of communication skills, including the diagnosis and appraisal of specific disorders and delays in those skills;
 - Referral for medical or other professional services necessary for the habilitation or rehabilitation of children with communicative or language disorders and delays in development of communication skills; and
 - Provision of services for the habilitation, rehabilitation, or prevention of communication or language disorders and delays in development of communication skills.
- p. Transportation and related costs include --
- The cost of travel and other cost necessary to enable an infant or toddler with disability and the child's family to receive early intervention services.
- q. Vision services include -

- Evaluation and assessment of visual functioning, including the diagnosis and appraisal of specific visual disorders, delays, and abilities that affect early childhood development;
- Referral for medical or other professional services necessary for the habilitation or rehabilitation of visual functioning disorders, or both; and
- Communication skills training, orientation and mobility training for all environments, visual training, and additional training necessary to activate visual motor abilities.

12. Elementary School (§303.14)

Means a non-profit institutional day or residential school, including a public elementary charter school that provides elementary education, as determined under State law.

13. Eligible

Means children who meet the Eligibility Criteria in accordance with “Subpart B, State Definition of Developmental Delay and Other Eligibility Criteria (§303.111).”

14. Free Appropriate Public Education (§303.15)

Free Appropriate Public Education Or FAPE means special education and related services that:

- Are provided at public expense, under public supervision and direction, and without charge;
- Meet the standards of the State educational agency (SEA), including the requirements of Part B of the Act.
- Include an appropriate preschool, elementary school, or secondary school education in the State involved; and
- Are provided in conformity with an individualized education program (IEP) that meets the requirements of the Part B of the Act.

15. Frequency

Means the number of days or sessions that a service will be provided, and whether the service is provided on an individual or group basis.

16. Health Services (§303.16)

Services necessary to enable an otherwise eligible child to benefit from the other early intervention services under IDEA Part C during the time that the child is eligible to receive early intervention services.

- a. This term includes the following:
- Such services as clean intermittent catheterization, tracheostomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services; and
 - Consultation by physicians with other service providers concerning the special health care needs of eligible children that will need to be addressed in the course of providing other early intervention services.
- b. This term does not include:
- Services that are
 - Surgical in nature (such as cleft palate surgery, surgery for club foot, or the shunting of hydrocephalus); or
 - Purely medical in nature (such as hospitalization for management of congenital heart ailments, or the prescribing of medicine or drugs for any purpose); or
 - Related to the implementation optimization (e.g., mapping), maintenance, or replacement of a medical device that is surgically implanted, including a cochlear implant.
 - Nothing in IDEA Part C limits the right of an infant or toddler with a disability with a surgically implanted device (e.g., cochlear implant) to receive the early intervention services that are identified in the child’s IFSP as being needed to meet the child’s developmental outcomes.
 - Nothing in IDEA Part C prevents the EIS provider from routinely checking that either the hearing aid or the external components of a surgically implanted device of an infant or toddler with a disability are functioning properly.
 - Devices necessary to control or treat a medical condition;
 - Medical-health services that are routinely recommended for all children

17. Homeless Children (§303.17)

Means children who meet the definition given the term homeless children and youth of the McKinney-Vento Homeless Assistance Act, as amended.

18. Guam

Means the Lead Agency, Department of Education, also known as the Guam Early Intervention System (GEIS).

19. Guam Early Intervention System

Means with the leadership of the Lead Agency, Department of Education, the total effort on Guam that is directed at meeting the needs of children eligible under IDEA Part C and their families.

20. Include; including (§303.18)

Means that the items named are not all of the possible items that are covered, whether like or unlike the ones named.

21. Individualized Family Service Plan (§303.20)

Or IFSP means a written plan for providing early intervention services to an infant or toddler with disabilities under IDEA Part C and the infant's or toddler's family that --

- a. Is based on the evaluation and assessment,
- b. Includes the content specified in,
- c. Is implemented as soon as possible once parental consent for the early intervention services in the IFSP is obtained, and
- d. Is based in accordance with the IFSP procedures in Subpart B Individual Family Plan.

22. Infant or Toddler with a Disability (§303.21)

Means an individual under three years of age who is eligible for early intervention services.

23. Intensity

Means the number of days or sessions that a service will be provided, and whether the service is provided on an individual or group basis.

24. Lead Agency (§303.22)

Means the Department of Education, also known as the Guam Early Intervention System.

25. Length

Means the length of time the service is provided during each session of that service (such as an hour or other specified time period).

26. Location

Means the actual place or places where a service will be provided.

27. Method

Means how a service is provided.

28. Multidisciplinary (§303.24)

Means the involvement of two or more separate disciplines or professions with the respect to evaluation of a child and assessment of the child and family indicated in this Act, may include one individual who is qualified in more than one discipline or profession; and the IFSP Team must include the involvement of the parent and two or more individuals from separate disciplines or professions and one of these individuals must be the service coordinator.

29. Native language (§303.25)

Means --

- a. The language normally used by that individual, or, in the case of a child, the language normally used by the parents of the child, except as provided in paragraph (b) of this section; and
- b. For evaluations and assessments conducted pursuant to §303.321(a)(5) and (a)(6), the language normally used by the child, if determined developmentally appropriate for the child by qualified personnel conducting the evaluation or assessment.
- c. Native language, when used with respect to an individual who is deaf or hard of hearing, blind or visually impaired, or for an individual with no written language, means the mode of communication that is normally used by the individual (such as sign language, Braille, or oral communication).

30. Natural Environments (§303.26)

Natural environments means settings that are natural or typical for a same-aged infant or toddler without a disability, may include the home or community settings, and must be consistent with the provision of this Act.

31. Parent (§303.27)

1. Parent means --

- a. A biological or adoptive parent of a child;
- b. A foster parent, unless State law, regulations, or contractual obligations with a State or local entity prohibit a foster parent from acting as a parent;
- c. A guardian generally authorized to act as the child's parent, or authorized to make early intervention, educational, health or

- developmental decisions for the child (but not the State if the child is a ward of the State);
- d. An individual acting in the place of a biological or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child's welfare; or
 - e. A surrogate parent who has been appointed in accordance with §303.422 or section 639(a)(5) of This act.
2. Except as provided in paragraph (3) of this section, the biological or adoptive parent, when attempting to act as the parent under IDEA Part C and when more than one party is qualified under paragraph (a) of this section to act as a parent, must be presumed to be the parent for purposes of this section unless the biological or adoptive parent does not have legal authority to make educational or early intervention services decisions for the child.
3. If a judicial decree or order identifies a specific person or persons under paragraphs (a)(1) through (a)(4) of this section to act as the “parent” of a child or to make educational or early intervention service decisions on behalf of a child, then the person or persons must be determined to be the “parent” for purposes of IDEA Part C, except that if an EIS provider or a public agency provides any services to a child or any family member of that child, that EIS provider or public agency may not act as the parent for that child.

32. Parent Training and Information Center (§303.28)

Parent training and information center assisted under section 671 or 672 of the Act.

33. Personally Identifiable Information (§303.29)

Personally identifiable information means personally identifiable information as defined in 34 CFR 99.3, as amended, except that the term “student” in the definition of personally identifiable information in 34 CFR 99.3 means “child” as used in IDEA Part C and any reference to “school” means “EIS provider” as used in IDEA Part C.

34. Public Agency (§303.30)

The lead agency and any other agency or political subdivision of the State.

35. Qualified Personnel (§303.31)

Personnel who have met State approved or recognized certification, licensing, registration, or other comparable requirements that apply to the area in which the individuals are conducting evaluation or assessment or providing early intervention services.

36. Scientifically Based Research (§303.32)

The meaning given the term in section 9101(37) of the Elementary and Secondary Education Act of 1965, as amended (ESEA). In applying the ESEA to the regulations under IDEA Part C, any reference to “education activities and programs” refers to “early intervention services.”

37. Secretary (§303.33)

Means the Secretary of Education.

38. Service Coordination (§303.34)

a. General

- Service coordination means the activities carried out by a service coordinator to assist and enable a child eligible under IDEA Part C and the child's family to receive the services and rights, including procedural safeguards, required under IDEA Part C.
- Each child eligible under IDEA Part C and the child's family must be provided with one service coordinator responsible for:
 - Coordinating all services across agency lines; and
 - Serving as the single point of contact for carrying out the activities as identified in IDEA Part C.
- Service coordination is an active, ongoing process that involves:
 - Assisting parents of eligible children in gaining access to and coordinating the provision of, early intervention services required under IDEA Part C; and
 - Coordinating the other services identified in the IFSP that are needed by or are being provided to, the eligible child and that child’s family.

b. Specific service coordination services --

- 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 for needed services and 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;
- Facilitating and participating in the development, review, and evaluation of IFSPs;

- Conducting referral and other activities to assist families in identifying available EIS providers;
- Coordinating, facilitating, and monitoring the delivery of services required under IDEA Part C to ensure that the services are provided in a timely manner;
- Conducting follow-up activities to determine that appropriate Part C services are being provided;
- Informing families of their rights and procedural safeguards, as set forth in subpart E of IDEA Part C and related resources;
- Coordinating the funding sources for services required under IDEA Part C; and
- Facilitating the development of a transition plan to preschool, school, or, if appropriate, to other services.

Use of the term service coordination or service coordination services. The lead agency's or an EIS provider's use of the term service coordination or service coordination services does not preclude characterization of the services as case management or any other service that is covered by another payor of last resort (including Title XIX of the Social Security Act--Medicaid), for purposes of claims in compliance with the requirements of §§303.501 through 303.521 (Payor of last resort provisions.)

39. State (§303.35)

The word State in this grant application refers to Guam under P.L. 103-382 Section (6)(B) and Section 684(a).

40. State Educational Agency (§303.36)

Or SEA means --

- a. The State board of education or other agency or officer primarily responsible for the State supervision of public elementary schools and secondary schools, or, if there is no such officer or agency, an officer or agency designated by the Governor or by State law.
- b. The term includes the agency that receives funds under sections 611 and 619 of the Act to administer the State's responsibilities under Part B

41. Ward of the State (§303.37)

Means a child who, as determined by the State where the child resides, is --

- a. A foster child;
- b. A ward of the State; or
- c. In the custody of a public child welfare agency.

Exception: Ward of the State does not include a foster child who has a foster parent who meets the definition of a parent in this Act.

SUBPART B

MINIMUM COMPONENTS OF A STATEWIDE SYSTEM

STATE DEFINITION OF DEVELOPMENTAL DELAY AND OTHER ELIGIBILITY
CRITERIA (§303.111)

Guam under Part C of the Individuals with Disabilities Education Act (IDEA) provides early intervention services to eligible children, birth through 2 years of age, and their families.

A. Eligibility Criteria

Early intervention services are provided to children ages birth through 2 who are identified as experiencing one of the following four established areas:

1. Developmental Delay (§303.203(c))

Guam Early Intervention System (GEIS) has in place a rigorous definition for developmental delay that will be used to carry out early intervention programs under IDEA Part C in order to appropriately identify infant and toddlers with disabilities who are in need of services under IDEA Part C.

Children who are eligible for services include those who are functioning two (2) or more standard deviations below the mean or 30% or greater delay in one or more of the following developmental areas, or who are functioning one and a half (1.5) standard deviations or 22% - 29% below the mean in two or more of the developmental areas:

- a. cognitive development
- b. physical development, including vision and hearing
- c. communication development
- d. social or emotional development
- e. adaptive development

2. Established Risk

Children who are diagnosed as having a physical or mental condition which has a high probability of resulting in a disability and/or developmental delay are eligible for early intervention services. Such conditions include but are not limited to:

- a. Chromosomal Anomalies/Genetic Disorders
- b. Neurological Disorders
- c. Congenital Malformations
- d. Inborn Errors in Metabolism
- e. Sensory Disorders
- f. Severe Atypical Developmental Disorders
- g. Toxic Exposure
- h. Chronic Medical Illness/Medical-Surgical Conditions

i. Infectious Disease

3. Biological At-Risk Factors

Children who are at-risk for substantial developmental delays due to biological factors are eligible for early intervention services. Factors include, but not limited to: Birth weight less than 1500 grams; Oxygen Therapy greater than 7 days; Apgar score of less than 5 at 5 minutes; Hyperbilirunemia; Small for Gestational Age; Maternal PKU; Infant born to positive HIV mother; Hypoglycemia.

4. Environmentally At-Risk for Delay

Guam provides early intervention services to infants and toddlers “at-risk” for developmental delays due to environmental factors during their early development. The environmental factors used to determine eligibility for early intervention services are listed below under two categories. Eligibility shall be based on either one factor from category "a" or a combination of five factors from category "b", which could result in developmental delays if early intervention services are not provided to the child and/or the child’s family. Environmental factors include, but are not limited to:

a. Eligibility for services requiring only one factor:

- known parental mental illness to include postpartum depression
- documented parental cognitive impairment
- known parental chemical dependency
- documented family history of physical or sexual abuse and/or neglect.
- Parental age of 15 or less
- Known parental sensory hearing and/or vision impairment

b. Eligibility for services requiring three (3) or more factors:

- single parent
- maternal age 16 or less
- inadequate prenatal care
- tenth grade education or less for primary caregiver
- parental chronic illness limiting parenting skills
- inadequate or inappropriate parent/child relations
- dysfunctional home environment
- family lacking parenting skills
- family lacking social supports
- family lacking adequate shelter

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- child has no well-baby care by 6 months of age
- child who is a ward of the State
- temporarily placed child or adopted child with no known family history or a maternal history which includes the maternal risk factors.

AVAILABILITY OF EARLY INTERVENTION SERVICES (§303.112)

Guam assures that appropriate early intervention services are based on scientifically based research, to the extent practicable, and are available to all eligible infants and toddlers, birth through two years of age, and their families, including infants and toddlers with disabilities who are homeless children and their families. (§303.11)

Guam does not have reservations and/or services to Native American Children.

EVALUATION, ASSESSMENT, AND NONDISCRIMINATORY
PROCEDURES (§303.113)

Guam ensures the performance of: (1) A timely, comprehensive, multidisciplinary evaluation of the functioning of each infant or toddler with a disability in the State; and (2) A family-directed identification of the needs of the family of the infant or toddler to assist appropriately in the development of the infant or toddler.

Guam assures the required evaluation and family-directed identification meets the requirements of §303.321.

A. Evaluation of the Child and Assessment of the Child and Family (§303.321)

The GEIS ensures that, subject to obtaining parental consent in accordance with §303.420(a)(2), each child under the age of three who is referred for evaluation or early intervention services under Part C of IDEA and suspected of having a disability, receives:

1. A timely, comprehensive, multidisciplinary evaluation of the child in accordance with this section unless eligibility is established under Section B below; and
2. **If the child is determined eligible** as an infant or toddler with a disability as defined in §303.21:
 - a. A multidisciplinary assessment of the unique strengths and needs of that infant or toddler and the identification of services appropriate to meet those needs;
 - b. A family-directed assessment of the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of that infant or toddler. The assessments of the child and family are described in Section D: Procedure for Assessment of the Child and Family may occur simultaneously with the evaluation, provided that the requirements indicated in Section C: Procedures for Evaluation are met.

These assessments are required once a child is determined eligible, regardless of how eligibility is determined. §§303.321(a)(1)(ii) and (a)(3)(i)

B. Definitions as used in IDEA Part C

1. **Evaluation means the procedures used** by qualified personnel to determine a child's initial and continuing eligibility under IDEA Part C, consistent with the definition of infant or toddler with a disability in §303.21. An initial



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evaluation refers to the child's evaluation to determine his or her initial eligibility under IDEA Part C;

2. Assessment means the ongoing procedures used by qualified personnel to identify the child's unique strengths and needs and the early intervention services appropriate to meet those needs throughout the period of the child's eligibility under IDEA Part C and includes the assessment of the child, consistent with Section D-1 and D-2 below and the assessment of the child's family, consistent with Section D-3 below; and
3. Initial assessment refers to the assessment of the child and the family assessment conducted prior to the child's first IFSP meeting, both of which must be conducted within the 45-day timeline described in §303.310.
4. Informed clinical opinion (includes the use of interviews, checklists, observations and non-standardized instruments) shall be used by qualified staff when conducting evaluations and assessment. (§303.321(ii)(B)(3)(ii)). (Refer to page 21.)
5. A child's medical and other records may be used to establish eligibility, without conducting an evaluation of the child, under IDEA Part C if those records indicate that the child's level of functioning in one or more of the developmental areas identified in §303.21(a)(1) constitutes a developmental delay or that the child otherwise meets the criteria for an infant or toddler with a disability under §303.21.
 - a. A multidisciplinary team of practitioners shall determine eligibility within a diagnosed physical or mental condition category based on a statement or report signed by a physician, advanced practice nurse or licensed clinical psychologist, as appropriate to the suspected disability, indicating the condition that is likely to result in developmental delay.
 - b. The multidisciplinary team shall consider the report or statement required under (i) above with respect to the types and amounts of services that a child and/or his or her family should receive through the early intervention system but the team shall not use the report or statement as the sole basis by which it makes the developmental diagnosis or determines the services approved through the IFSP process.
 - c. If a multidisciplinary evaluation team has identified one or more physical and/or mental conditions that are associated with developmental concerns, and has concluded that early intervention services would be appropriate to meet the needs of the child and that the child is eligible to receive early intervention services, then the

evaluation team shall place documentation in the child's record that includes the informed clinical opinion upon which the team based its determination of eligibility.

- d. **If the child's IDEA Part C eligibility is established** under (4) above, the EIS provider shall:
 - Administer the GEIS required assessment tool that shall be used for each child for purposes of collecting child outcome data.
 - Conduct assessments of the child and family in accordance with Section D-1.
6. Qualified personnel shall use informed clinical opinion when conducting an evaluation and assessment of the child. In addition, GEIS ensures that informed clinical opinion may be used as an independent basis to establish a child's eligibility under IDEA Part C even when other instruments do not establish eligibility; however, in no event may informed clinical opinion be used to negate the results of evaluation instruments used to establish eligibility under Section C-1.
7. All evaluations and assessments of the child and family shall be conducted by qualified personnel, in a nondiscriminatory manner, and selected and administered so as not to be racially or culturally discriminatory. These multidisciplinary evaluations and assessments may include one individual who is qualified in more than one discipline or profession. §303.24
8. Unless clearly not feasible to do so, all evaluations and assessments of a child shall be conducted in the native language of the child, in accordance with the definition of native language in §303.25.
9. Unless clearly not feasible to do so, family assessments shall be conducted in the native language of the family members being assessed, in accordance with the definition of native language in §303.25.

C. Procedures for Evaluation (§303.321(b))

1. In conducting an evaluation, no single procedure may be used as the sole criterion for determining a child's eligibility under IDEA Part C. Procedures shall include:
 - a. Administering an evaluation instrument;
 - b. Taking the child's history (including interviewing the parent);



- c. Identifying the child's level of functioning in each of the developmental areas in §303.21(a)(1);
- d. Gathering information from other sources such as family members, other care-givers, medical providers, social workers, and educators, if necessary, to understand the full scope of the child's unique strengths and needs; and
- e. Reviewing medical, educational, or other records.

D. Procedures for Assessment of the Child and Family (§303.321(c))

- 1. An assessment of each infant or toddler with a disability shall be conducted by qualified personnel in order to identify the child's unique strengths and needs and the early intervention services appropriate to meet those needs.
- 2. The assessment of the child shall include the following:
 - a. A review of the results of the evaluation conducted under Section C: Procedures for Evaluation;
 - b. Personal observations of the child; and
 - c. The identification of the child's needs in each of the developmental areas in §303.21(a)(1).
- 3. A family-directed assessment shall be conducted by qualified personnel in order to identify the family's resources, priorities, and concerns and the supports and services necessary to enhance the family's capacity to meet the developmental needs of the family's infant or toddler with a disability.
- 4. Once eligibility for a child has been established for IDEA Part C, the ongoing service coordinator shall conduct a family information meeting for the following purposes:
 - a. Review family rights;
 - b. Compile additional information, as needed to prepare for the IFSP meeting;
- 5. The family-directed assessment shall:
 - a. Be voluntary on the part of each family member participating in the assessment;

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- b. Be based on information obtained through an assessment tool and also through an interview with those family members who elect to participate in the assessment; and
- c. Include the family's description of its resources, priorities, and concerns related to enhancing the child's development.

E. Determination if Child is Not Eligible (§303.322)

- 1. If, based on the evaluation conducted under §303.321, GEIS determines that a child is not eligible under IDEA Part C, GEIS shall provide the parent with prior written notice required in §303.421, and include in the notice information about the parent's right to dispute the eligibility determination through dispute resolution mechanisms under §303.430, such as requesting a due process hearing or mediation or filing a State complaint.

As a part of the process to determine continuing eligibility and the infant or toddler's ongoing developmental status to report child outcome data, the practitioner shall annually use evaluation and/or assessment instruments as designated by GEIS.

INDIVIDUALIZED FAMILY SERVICE PLAN (§303.114)

Guam assures that a written Individualized Family Service Plan (IFSP) is developed, reviewed, and implemented to provide early intervention services for each eligible infant or toddler and his/her family. IFSPs are to be developed by a multidisciplinary team (IFSP Team), which includes two or more individuals from separate disciplines or professions with one of these individuals being the service coordinator. §§303.24, 303.340.

An IFSP is a written plan for providing early intervention services to an infant or toddlers eligible for the Part C Program as well as the needs of the family related to enhancing their child's development --

- based on the evaluation and assessment;
- includes the content specific in §303.344;
- is implemented as soon as possible once parental consent for early intervention services in the IFSP is obtained; §§303.20(c), 303.342(e) and 303.344(f)(1) and
- is developed IFSP procedures in §303.342, §303.343, and §303.345.

A. Procedures for IFSP Development, Review and Evaluation (§303.342)

1. Initial IFSP (§303.342(a))

For an infant or toddler who has been evaluated and determined to be eligible, a meeting to develop the initial IFSP must be conducted within 45 day timeline as described in §303.310 or refer to Subpart B, Post-Referral Procedures (p.38).

2. Periodic Review

A review of the IFSP for a child and family shall be conducted every six months or more frequently if conditions warrant, or if the family requests such a review. The purpose of the periodic review is to determine the degree to which progress toward achieving results or outcomes is being made, and whether modification or revision of the results, outcomes, or early intervention services is necessary. §303.342(b)(1).

The IFSP review may be carried out by a meeting or by other means that is acceptable to the parents and other participants.

3. Annual Meeting to Evaluate the IFSP

A meeting is conducted on, at least, an annual basis to evaluate the IFSP for a child and family receiving early intervention services, and as appropriate, to revise its provisions. The results of current evaluations and other information

available from the assessment of the child and family conducted under §303.321 shall be used in determining what early intervention services are needed and will be provided.

4. Accessibility and Convenience of Meetings
 - a. IFSP meetings shall be conducted in settings and at times convenient for families, and in the native language of the family or other mode of communication used by the family, unless it is clearly not feasible to do so.
 - b. Meeting arrangements are made in collaboration with the family and a written notification shall be provided to the family and other participants early enough before the meeting date to ensure the participation of the IFSP team.
5. Parental Consent

The content of the IFSP shall be fully explained to the parents and informed written consent, as described in §303.7 or Part II Definitions shall be obtained prior to the provision of early intervention services described in the IFSP. Each early intervention service shall be provided as soon as possible after the parent provides consent for that service. §§303.342(e) and 303.344(f)(1).

B. IFSP Team and Periodic Review (§303.343)

1. Initial and annual IFSP meetings
 - a. Each initial and each annual IFSP meeting to evaluate the IFSP shall include the following participants:
 - the parent or parents of the child;
 - other family members as requested by the parents, if feasible to do so;
 - an advocate or person outside of the family, if the parent requests that the person participate;
 - the service coordinator that has been working with the family since the initial referral of the child for evaluation, or that has been designated by the Lead Agency to be responsible for the implementation of the IFSP;
 - a person or persons directly involved in conducting the evaluations and assessments as described in §303.321; and
 - as appropriate, persons who will be providing services to the child or family.
 - b. When such persons listed in section “a” above are unable to attend, arrangements must be made for their involvement through other



means, including telephone conference call, having an authorized, knowledgeable representative attend the meeting, or making pertinent records available for the meeting.

2. Periodic Review

Each periodic review shall provide for participation by persons identified in section “a” above. If conditions warrant, provision shall be made for the participation by other representatives identified in paragraph “b” above.

C. Content of the IFSP (§303.344)

1. Child information

The IFSP shall include a statement of the child's current functioning levels of physical development (including vision, hearing, and health status), cognitive development, communication development, social and emotional development, and adaptive development based on the information from the child’s evaluation and assessment and parent report. §303.344(a)

2. Family information

With the concurrence of the family, the IFSP shall include a statement of the family's concerns, priorities, and resources related to enhancing the development of their child, including identifying what assistance they may need to promote their child’s ability to function in his or her natural environment. The inclusion of family concerns, priorities, and resources, as well as strengths and needs related to enhancing the child's development is strictly voluntary on the part of families.

3. Outcomes

Outcomes are statements of the changes that families want to see for their children or themselves as a result of their participation in the early intervention program. The IFSP shall include a statement of the measurable results or outcomes expected to be achieved for the child and family, including pre-literacy and language skills, as developmentally appropriate for the child, and the criteria, procedures, and timelines used to determine --

- a. The degree to which progress toward achieving the results or outcomes identified in the IFSP is being made; and
- b. Whether modifications or revisions of the expected results, outcomes or early intervention services identified in the IFSP are necessary.

4. Early intervention services

The IFSP shall include a statement of the specific early intervention services based on peer review research (to the extent practical), that are necessary to meet the unique needs of the child and family to achieve the IFSP outcomes including, (1) The projected date for the initiation of each early intervention service; (2) the length, duration, frequency, intensity, and method of delivering for each early intervention services. Refer to Part II Definitions; and (3) a statement that each early intervention services are provided to the maximum extent appropriate in natural environments consistent with §§303.13(a)(8), 303.26, and 303.126 a justification as to why any early intervention service will not be provided in the natural environment.

The determination of the appropriate setting for providing early intervention service to an infant or toddler with a disability including any justification for not providing a particular early intervention service in the natural environment for the infant and toddler with a disability and services, shall be: (1) by the IFSP Team; (2) natural environment consistent with §§303.13(a)(8), 303.26, and 303.126; (3) based on the child’s outcomes as described in section “D” above that are identified by the IFSP, and shall include location of early intervention services and payment arrangements if any.

IFSPs for children who are at least three years old must include an educational component that promotes school readiness and incorporates pre-literacy, language, and numeracy skills. §303.344(d)(4).

The IFSP must, to the extent appropriate, identify other services that are neither required nor funded under IDEA Part C (e.g. medical and other services) that the child or family needs or is receiving through other sources. If the other services are not currently being provided, the IFSP must include, to the extent appropriate, a description of the steps the service coordinator or family may take to assist the child and family in securing those services. §303.344(e).

5. Other services

To the extent appropriate, the IFSP shall include medical and other services that a child or family needs or is receiving through other sources, but that are neither required, nor funded under IDEA Part C. If those services are not currently being provided including a description of the steps the Service Coordinator or family may take to assist the child and the family in securing those other services.

6. Dates and duration of services

The IFSP shall include the projected dates for initiation of early intervention services, as soon as possible, after the IFSP meeting and upon parental

consent and shall include the anticipated length, duration, and frequency of those services.

7. Service coordinator

The IFSP shall include the name of the service coordinator from the profession (including service coordination) most immediately relevant to the child's or family's needs, who will be responsible for the implementation of the child's IFSP including transition services and coordination with other agencies and persons. The term "profession" includes "service coordination." The IFSP team must include the service coordinator designated by the public agency to be responsible for implementing the IFSP. §303.343(a)(iv)

8. Transition from GEIS Services

The IFSP shall include the steps and services to be taken to support the smooth transition of a child in accordance with §303.209 or refer to Part II Early Childhood Transition from GEIS services to preschool services under Part B of the act and to the extent that those or other appropriate services. §303.344(h)(1).

The steps shall include:

- a. Discussion with and training of parents, as appropriate regarding future placements and other matters related to transition.
- b. Procedures to prepare the child for changes in service delivery including steps to help the child adjust to, and function in, a new setting.
- c. Confirmation that child find information about the child has been transmitted to the Local Education Agency or relevant agency and, with parental consent, the transmission of additional information needed to ensure continuity of services from GEIS program to the Part B program including a copy of the most recent evaluation and assessment of the child and the family and the most recent IFSP. §303.344(h)(2)(iii).
- d. Identification of transition services and other activities that the IFSP team determines are necessary to support the transition of the child. §303.344(h)(2)(iv)

D. Interim IFSP - Provision of Services before Evaluation and Assessment are Completed (§303.345)

Early intervention services for an **eligible** child and the child's family may commence before the completion of the evaluation and assessment if the following conditions are met:

1. Parental consent is obtained;
2. An interim IFSP is developed that includes:
 - a. The name of the service coordinator who will be responsible for the implementation of the interim IFSP and coordination with other agencies and persons;
 - b. The early intervention services that have been determined to be needed immediately by the child and the child's family; and
 - c. The evaluation and assessment are completed within 45 calendar days from the date GEIS receives referral of the child.

COMPREHENSIVE CHILD FIND SYSTEM (§303.115)

GEIS with the advice and assistance of the Council is responsible for developing and implementing a comprehensive child find system for infants and toddlers (birth through 2 years of age) and is consistent with Part B of the Act. (§303.302(a)(1)) In addition, Guam's Comprehensive Child Find System includes specific timelines and provides for participation by primary referral sources in coordination with other early childhood serving agencies in locating and identifying children in need of early intervention services. (§303.302(a)(2)(i) - §303.302(a)(2)(ii))

GEIS assures rigorous standards for appropriately identifying infants and toddlers with disabilities for intervention services under IDEA Part C that will reduce the need for future services. (§303.302(a)(3))

GEIS under IDEA Part C provides early intervention services to eligible infants and toddlers with disabilities, birth through 2 years of age, and their families, including those that are homeless, in foster care, and who are ward of the State, are eligible for services under IDEA Part C. Guam does not have reservations and or services to Native American Children.

A. Comprehensive Child Find System (§303.302)

GEIS assures that the child find system is a comprehensive, interagency, multidisciplinary, ongoing process that includes policies and procedures that align with §303.302(b) to include the following:

1. All infants and toddlers with disabilities who are eligible for services under IDEA Part C are identified, located, and evaluated, including infants and toddlers who are homeless, in foster care, wards of the state, and at risk infants and toddlers. (§303.302(b))
2. An effective method is developed and implemented to identify children who are in need of early intervention services.

GEIS with assistance from the Council shall ensure that the child find system is coordinated with all major efforts to locate and identify children conducted by other agencies responsible for administering the various education, health and social service programs relevant to IDEA Part C is coordinated with efforts including the:

- Program authorized under Part B of the Act (all efforts related to the Child Find process);
- Maternal and Child Health program including Project Bisita I Familia: Guam's Maternal, Infant, and Early Childhood Home Visiting program, under Title V of the Social Security Act, (as amended, (MCHB or Title V) (42 U.S.C. 701(a)), Project Kariñu: Guam's Early Childhood Mental

- Health System of Care; and Project Tinituhon: Guam’s Early Childhood Comprehensive System;
- Medicaid's Early Periodic Screening, Diagnosis and Treatment (EPSDT) program under Title XIX of the Social Security Act;
 - Developmental Disabilities Assistance and Bill of Rights Act;
 - Head Start Act;
 - Child protective services and child welfare programs, including programs administered by, and services provided through, the foster care agency and the State agency responsible for administering the Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C. 5106(a));
 - Child Care Development Fund (CCDF) and other child care programs;
 - The programs that provide services under the Family Violence Prevention and Services Act (42 U.S.C. 10401 *et seq.*);
 - Guam Early Hearing Detection and Intervention (42 U.S.C. 280g-1) administered by the Centers for Disease Control;
 - Children’s Health Insurance Program authorized under Title XXI of the Social Security Act (42 U.S.C 1397aa *et seq.*); and
 - Department of Mental Health & Substance Abuse - Child & Adolescent Service Division;
 - Department of Public Health & Social Services, Division of Public Welfare, Women, Infants, and Children (WIC)

GEIS with the advice and assistance of the Council will continue to ensure there will not be unnecessary duplication of effort by the various early childhood serving agencies involved in the child find system under IDEA Part C and make use of the resources that are available through each public agency to implement the child find system in an effective manner. (§303.302(c)(2))

B. Referral Procedures (§§ 303.206 and 303.303)

GEIS assures that the child find system includes procedures for use by primary referral sources for referring a child under age 3 to early intervention programs. In addition, referrals from primary referral sources (except for parents) are made as soon as possible or no more than **seven (7)** working days after a child has been identified. (§303.303(a)(1)(2)(i))

GEIS has in place a mechanism for referrals of specific at risk infants and toddlers that include referrals of a child under age 3 who are the ‘subject’ in substantiated cases of child abuse or neglect or are identified as directly affected by illegal substances abuse or withdrawal symptoms resulting from prenatal drug exposure. (§303.303(b)(1)(2))



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Referrals to GEIS may include, but not limited to the following primary referral sources:

- Hospitals, Including Prenatal and Postnatal Care Facilities;
- Physicians;
- Parents;
- Child Care Providers;
- Local Education Agencies (Private & Public);
- Public Health Facilities;
- Other Social Service Agencies;
- Other Health Care Providers
- Catholic Social Services
- Homeless Coalition
- Department of Youth Affairs
- Sanctuary
- Military Branches
- Salvation Army
- Oasis Empowerment Center
- Department of Mental Health & Substance Abuse
- Department of Corrections
- Private Individual, Marriage, Family Therapists
- Sagua Mañagu Birthing Facility
- Guam Housing and Urban Renewal Authority
- Guam Memorial Hospital
- Pediatrics & Social Work Department
- Faith Based Organizations
- Parent Organizations
- Mayor's Offices
- Guam Early Intervention System Staff
- Erica's House
- Public and Private Clinics
- Guam Early Hearing Detection & Intervention
- Department of Public Health & Social Services
- Women, Infants, and Children (WIC)
- Child Protective Services
- Project Kariñu: Guam's Early Childhood Mental Health Program
- Project Bisita I Familia: Guam's Infant and Early Childhood Home Visiting Program
- Medically Indigent Program (MIP)
- Medical Social Services
- Maternal Child Health
- Family
- Relatives
- Friends
- Guam Police Department
- Guam Fire Department
- Family Court
- Department of Integrated Services for Individuals with Disabilities

C. Post Referral Procedures (§303.310)

Guam assures that upon receipt of a referral, it shall, within 45 calendar days of receiving a referral complete the evaluation and assessment activities, and as appropriate, the initial Individualized Family Service Plan meeting is held. Except as provided below, the initial evaluation and the initial assessments of the child and family under §303.321 and the initial IFSP meeting under §303.342 must be completed within 45 days from the date the GEIS receives the referral of the child.

1. The 45-day timeline described above does not apply for any period when:
 - The child or parent is unavailable to complete the initial evaluation, the initial assessments of the child and family, or the initial IFSP meeting due to exceptional family circumstances that are documented in the child’s early intervention records; or
 - The parent has not provided consent for initial evaluation, or the initial assessment of the child, despite documented, repeated attempts by the GEIS to obtain parental consent.
2. GEIS assures that, in the event the circumstances described in Section “a” exist, the EIS provider must:
 - Document in the child’s early intervention records the exceptional family circumstances or repeated attempts by the EIS provider to obtain parental consent;
 - Complete the initial evaluation, the initial assessments, of the child and family, and the initial IFSP meeting as soon as possible after the documented exceptional family circumstances described in (b) above no longer exist or parental consent is obtained for the initial evaluation, and the initial assessment of the child; and
 - Develop and implement an interim IFSP, to the extent appropriate and consistent with §303.345.
3. Conduct the initial family assessment within the 45-day timeline in (a) above if the parent concurs and even if other family members are unavailable.

D. Screening Procedures (§303.320)

GEIS has in place screening procedures to identify at the earliest possible age infants and toddlers suspected of having a disability and in need of early intervention services and is conducted by trained personnel.

Screening is the process of determining whether or not the child should be referred for formal testing. For example, screening instruments will look at a child's overall developmental areas as well as the family's resources, priorities, and concerns that are completed by the parents. (An example of screening tool is the Ages and Stages Questionnaire)

Screening Protocol:

1. Service Coordinator will contact the parent or guardian to share information about GEIS and schedule an appointment to meet family to complete the referral process.
 - a. Service Coordinator shall provide the parent notice of its intent to screen the child to identify whether the child is suspected of having a disability and include in the notice a description of the parents' rights to request for an evaluation at any time during the screening process. Service Coordinator will obtain parent consent before conducting the screening procedures.
 - b. At this time the Service Coordinator should determine if an interpreter and/or surrogate parent is needed and follow Lead Agency procedures in obtaining an interpreter and/or a surrogate parent assigned to this case. Contact Parent Services to assign surrogate and or interpreter.
2. For children who pass the developmental screener and no further evaluations are required: If screening **does not** result in the need for further evaluation, the Service Coordinator will:
 - a. Provide family with copy of Prior Written Notice (Notice of Determination) to Parents regarding program's action and the Parent's right to request an evaluation.
 - b. If the Parent of the child requests and consents to an evaluation at any time during the screening process, evaluation of the child shall be conducted even if GEIS has determined that the child is not suspected of having a disability.
3. For children who are suspected of having a disability and in need of early intervention services. Service Coordinator will conduct the pre-meeting interview with family:
 - a. Obtain written parental consent for evaluation and provide parent with Prior Written Notice.

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- b. Conduct evaluation and assessment of the child as stated in §303.321.
4. For every child under age 3 who is referred to the GEIS program for screening GEIS is not required to:
- a. Provide an evaluation of the child under §303.321 unless the child is suspected of having a disability or the parent request for an evaluation; or

Make early intervention services under IDEA Part C to the child unless a determination is made that the child meets the definition of an infant or toddler with a disability under §303.21.

PUBLIC AWARENESS PROGRAM (§303.116)

GEIS and Part B of the Act, assures that GEIS public awareness policy, procedures, and activities are reflected in the Child Find policy of the Guam State Plan for Children with Disabilities. All of the activities which can appropriately be conducted within the Part B Child Find component will continue, with additional policies, procedures, and activities appropriate for IDEA Part C.

GEIS under IDEA Part C provides early intervention services to eligible infants and toddlers with disabilities, birth through 2 years of age, and their families, including those that are homeless, in foster care, and who are ward of the State, are eligible for services under IDEA Part C. Guam does not have reservations and or services to Native American Children.

GEIS under IDEA Part C has in place public awareness programs that focuses on the early identification of infants and toddlers with disabilities and provides information to parents of infants and toddlers through their primary referral sources in accordance with §303.116.

A. Public Awareness Program (§303.301(a)(1)(i) - §303.301(b)(1)(2)(3))

GEIS prepares public awareness information on the availability of early intervention services for children birth through 2 years of age. The public awareness program provides the following information and is aligned with:

1. Description of the availability of Guam's Early Intervention System of Services.
2. Description of the Child Find system, including:
 - a. The purpose and scope of the Guam Early Intervention System;
 - b. How to make referrals for a child under age 3 for an evaluation or early intervention services.
3. The *Nene* (meaning little baby in Chamorro) *Directory* provides guidance in finding contact information on services for young children in the areas of health and education services and family supports. The *Nene Directory* is accessible to the general public and is updated annually.

GEIS disseminates public awareness information to all Primary referral sources (especially hospitals and physicians) the information to be given to parents of infants and toddlers, including parents with premature infants or infants with other physical risk factors associated with learning and developmental complications. (§303.301(a)(1)(ii))

In addition, GEIS shall provide public awareness information informing parents of toddlers with disabilities of the availability of services under section 619 of the act not fewer than 90 days prior to the toddlers third birthday as part of the child's transition to Early Childhood Special Education Preschool services. (§303.301(c))

B. Public Awareness Program Procedures

1. In collaboration with other early childhood serving agencies, the Guam Early Intervention System plans for, organizes and distributes information in coordination with public awareness and Child Find policies and procedures. With the advice and assistance from the Council, a variety of methods for informing the public will be implemented. Activities to include but not limited to:
 - a. use of web sites, television, radio, and newspaper releases;
 - b. pamphlets and posters displayed in private medical clinics, public health clinics, and other appropriate locations; and
 - c. the use of telephone, facsimile, and TDD services.
2. Public awareness materials and activities are made culturally sensitive by translating existing brochures or developing brochures in the languages and dialects of non-English speaking persons on Guam and by producing brief radio announcements during ethnic programs.
3. Public awareness coverage shall be broad enough to reach the general public including individuals who have disabilities or who reside in rural and isolated areas, including high risk populations. Language interpreters are available upon request.
4. All primary referral sources, especially hospitals and physicians, are provided information for parents on the availability of early intervention services on a quarterly basis.
5. Public awareness targets other referral sources such as homeless family shelters, clinics, and health related offices, public schools, and officials and staff in the child welfare system.
6. Quarterly public awareness materials are disseminated to local agencies such as Department of Public Health & Social Services - WIC and Immunization Outreach Clinics and places of business and displayed in highly visible and accessible locations.
7. Partnering with Child Care & High School Health Counselors (nurses).

CENTRAL DIRECTORY (§303.117)

GEIS has developed a Central Directory also known as the “*Nene*” (Chamorro word meaning baby) *Directory*, in collaboration with other early childhood serving agencies that provide information about:

1. Public and private early intervention services, resources, and experts available on Guam;
2. Professional and other groups (including parent support, and training and information centers, such as those funded under IDEA Part C) that provide assistance to infants and toddlers with disabilities eligible under IDEA Part C and their families; and
3. Research and demonstration projects being conducted in Guam relating to infants and toddlers with disabilities.

The *Nene Directory* is a comprehensive central directory of services of government, non-profit, and private agencies and organizations that provide services and supports to all young children and their families. The *Nene Directory* provides sufficient detail for the general public to be able to determine the nature and scope of the services and assistance available from each of the sources listed in the directory. The *Nene Directory* is updated annually and is accessible to the general public through the Website (www.gdoe.net/geis) and other appropriate means. (§303.117)

**COMPREHENSIVE SYSTEM OF PERSONNEL
DEVELOPMENT (§303.118)**

The GEIS has in effect a comprehensive system of personnel development (referred to hereafter as CSPD), including the training of paraprofessionals and the training of primary referral sources with respect to the basic components of early intervention services (§303.118) available in Guam shall include --

1. training personnel to implement innovative strategies and activities for the recruitment and retention of early intervention service providers; (§303.118(a)(1))
2. promoting the preparation of early intervention service providers who are fully and appropriately qualified to provide early intervention services under IDEA Part C; (§303.118(a)(2))
3. training personnel to coordinate transition services for infants and toddlers with disabilities served under who are transitioning from a program providing Part C early intervention services to a preschool program under the Part B 619 program, Head Start, Early Head Start, and Elementary School Program, or other appropriate programs; (§303.118(a)(3))
4. training personnel to work in rural and inner-city areas; (§303.118(b)(1))
5. training personnel in the emotional and social development of young children; (§303.118(b)(2))
6. training personnel to support families in participating fully in the development and implementation of the child's IFSP; and (§303.118(b)(3))
7. training personnel who provide services under IDEA Part C using standards that are consistent with early learning personnel standards funding under the State Advisory Council on Early Childhood Education and Care established under the Head Start act. (§303.118(b)(4))

GEIS Plan for CSPD

GEIS Plan for CSPD, includes the training of paraprofessionals and primary referral sources in the basic components of early intervention system, is a system which the knowledge and skill development of service providers and family members of eligible children.

The ongoing and alternative training opportunities allow GEIS Plan for CSPD will address the basic components of early intervention services indicated above that may address methods and degrees, to establish an effective system which includes:

1. Implementation of innovative strategies and activities for the recruitment and retention of early intervention personnel.
 - a. The development of GEIS Plan for CSPD has been concurrent with the revisions to the Guam's Plan for Professional Development (GPPD) that was approved on October 2011 by the 31st Guam Legislature. The Guam Early Learning Council subcommittee on early childhood professional development provides certification for early childhood providers utilizing path A of Guam's Professional Development Plan. GEIS and GPPD have aligned the personnel preparation activities of the various and many providers working with children birth to five throughout Guam.

A career ladder/lattice provides entry level through graduate level trainings along with alternative qualifications and education and training options for multiple entry points into the ladder/lattice. The plan proposes certification, which aligns with GPPD and the Guam Commission for Educator Certification for Early Childhood professionals, including Early Intervention Service Providers.

Guam's Plan for Professional Development

The GPPD identifies four levels of Early Childhood Personnel. Each level lists the formal education requirements and the experiential requirements for each level. Additionally, the plan proposes alternate qualifications and multiple entry points to address the uniqueness of the early childhood field and the diversity of disciplines professionals come from. The plan acknowledges the various education and training opportunities provided to early childhood professionals and seeks to capitalize on those experiences to promote the recruitment and retention of qualified individuals. The following are brief descriptions of each level of early childhood professionals, each level building upon the knowledge and skills of the previous one.

Consistent with the levels of learning established in the *Guam's Plan for Professional Development Framework*, varying levels of Early Childhood Certificates may be granted by the *Guam Early Learning Council Early Childhood Professional Development Subcommittee (Path A)* or the Guam Commission for Educator Certification (Path B).

Basic or Basic Plus Certificate Issued by the Guam Early Learning Council Early Childhood Professional Development Subcommittee:

- Early Childhood Assistant Provider (Levels 1-4)
- Early Childhood Lead Provider (Levels 1-4)

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- Early Childhood Master Provider / Early Childhood Assistant Director / Early Childhood Director (Levels 1-4)

ECCE Certificate Issued by the Guam Commission for Educator Certification

- Basic Preschool Teacher
- Initial Educator / Professional Educator / Master Educator

- b. For GEIS, the Plan for Professional Development for Early Childhood providers examines the formal education levels and developed targeted education and training for early intervention. The purpose is to increase the number of highly qualified special education early intervention teachers:

- At the Associate degree level, Early Intervention emphasis or an emphasis in Early Childhood Special Education, aligning training with Guam Community College;
- At the Baccalaureate level, Guam has a Bachelor of Arts in Special Education with an emphasis in Early Intervention;
- At the graduate level, there is on-going training related specifically to Early Intervention. These courses are interdisciplinary to reflect the various professionals who provide services through Early Intervention including but not limited to health and medical professionals, social workers, and educators.

2. The promotion and preparation of early intervention providers to ensure they are fully and appropriately qualified to provide early intervention services.

- a. In collaboration with the Early Learning Council, and GEIS through the development of GPPD, ensures that an Early Intervention training component is incorporated throughout the Career Ladder/Lattice for Early Childhood Care and Education (ECCE), from entry level through graduate level preparation, including pre-service and in-service staff development. The participation of GEIS in the ECCE System ensures that all early childhood providers, including early interventionists, share the same/similar knowledge base to include core areas of knowledge and core competencies at entry levels through graduate levels.
- b. Early intervention service providers have access to education and training that assist parents and families in enhancing the development of their children. As a key partner in Project Tinituhon, Guam's Early Childhood Comprehensive System, Early Intervention System and the children and

families they serve have access to the education and training calendar which compiles various opportunities for families and parents of young children. A variety of education and training opportunities are provided covering various topics including but not limited to: physical development, language and communication development, cognitive development, social emotional competence, working with families, developmentally appropriate practices for young children, adaptations and modifications.

3. Training personnel to coordinate transition services for infants and toddlers who are transitioning from an early intervention services program to preschool program or other settings:
 - a. The existing transition handbook was revised to better meet the needs of the children and families served and to provide more specific and clearer guidelines for personnel to coordinate the transition services for infants and toddlers.
 - b. The revisions for the handbook includes pre- and post- evaluations of the child(ren) and families served to provide feedback for improvement and outcomes.

4. Additional training opportunities which relate specifically to:
 - a. Training personnel to work in rural areas and inner city areas; Working with the “most needy” families:
 - Serving families, including the “most needy” families, was identified as a high priority training area for the early childhood intervention system and is identified as a core knowledge area for early childhood care and education in GPPD Trainings for early childhood personnel to prepare them to support families include family-centered practices, counseling foundations, social/emotional competence, and cultural/linguistic diversity. Professionals may have the opportunity to co-teach or provide lead instruction.
 - Information and training resources are available to familiarize family members with the components of IDEA Part C, including their rights as family members, and with the process of planning and implementing services as it relates to their child and family.
 - b. Cross-disciplinary Education and Training resources and opportunities for families and parents

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Information and training resources are available to parents and families in early childhood care and education to provide practical strategies to support the growth and development of their young child.

- c. Training personnel to work in the social and emotional development of young children

Supporting the social emotional development and working with challenging behaviors was identified as a high priority training areas for the early childhood intervention system and is identified as a core knowledge area for early childhood care and education. Trainings for early childhood personnel to increase awareness, knowledge, and skills for supporting the social emotional development of young children includes building relationships and creating supportive environments, social emotional teaching strategies, individualized intensive interventions to identify challenging behaviors and to develop a behavior support plan. GEIS continues to provide annual training using the Center for Social Emotional Foundations for Early Learning - Infant and Toddler modules for early intervention providers.

- d. Supporting families for full participation in the IFSP process --

- Examining the IFSP process was identified as a high priority training area for the early childhood intervention system. Trainings for early childhood personnel to prepare them to support families through the IFSP process includes but not limited to the following:
 - Laws and regulations regarding services for individuals with disabilities,
 - ADA compliance,
 - Inclusive environments, and
 - The promotion of cultural sensitivity in the provision of early intervention services to infants and toddlers and their families from various cultures and ethnicities.

- e. Training for Early Childhood Care providers

To improve the quality of child care for young children with disabilities and their families on Guam, training, support, and technical assistance will be available to ensure that child care center staff and their directors have the updated information and skills needed to support the inclusion of children with disabilities in regular day care centers. Training areas

include, but are not limited to: the American Disabilities Act (ADA); disability awareness; social emotional competence of young children; developmentally appropriate practices for children birth to three, working with children with disabilities in the child and family's natural environment.

f. **Training for Public and Private Health Care Providers**

Training will be provided to ensure that physicians and other health care providers have the updated information and skills needed to be full participants in the community systems of early intervention. Such information and skills include, but are not limited to: early intervention definition and purpose, child-find and referral procedures; evaluation and assessment procedures; family-centered care; IDEA Part C legislative history; the Interagency Coordinating Council and the role of the physician; working with children with disabilities in the child and family's natural environment; surveillance and developmental screening and the role of the pediatrician / family practice doctor in the intervention process; medical home and access of young children to quality health care.

The diverse approach to ongoing, staff development training will continue to build and sustain the effective delivery of services and support, providing opportunities for professional growth for effective implementation of early intervention procedures and best practices in the field.

PERSONNEL STANDARDS (§303.119)

GEIS has in effect a policies and procedures relating to the establishment and maintenance of qualification to ensure that personnel necessary to carry out IDEA Part C are appropriately and adequately prepared and trained including maintenance and qualification that are consistent with Guam’s approved certification, licensing, registration that apply to the area of which such personnel are providing early intervention services, except that nothing in IDEA Part C shall be construed to prohibit the use of paraprofessionals and assistants who are appropriately trained and supervised in accordance with Guam’s law, regulation, or written policy, to assist in the provision of early intervention services under IDEA Part C to infants and toddlers with disabilities.

A. Qualification Standards (§303.119(b))

Guam Commission for Education Certification (GCEC)

In May 2008, Public Law 29-73 established the Guam Commission for Education Certification (GCEC). The purpose of the Commission is to establish a system of professional development, professional standards, certification, and evaluation that serves to continually improve the quality of instruction for Guam’s children so that professional staff are equipped to work and succeed in an every - changing and increasingly complex global economy. The GCEC was established to provide a rigorous system of certification, professional development, and evaluation designed to support improved student achievement and to improve the quality of the Guam educator workforce and to improve student performance. All Guam Department of Education educators must be certified and evaluated by the Commission.

The GCEC is responsible for ensuring that professions have the certification requirements and based on a review will issues the certificate of certification. It will be the responsibility of the GCEC to provide a listing of individuals to the Division of Special Education that includes their certification area and expiration date.

1. They present certification requirements set forth timelines and procedures for obtaining full certification.
2. It is the policy of the Guam Department of Education to hire only fully certified individuals within the area of their certification consistent with GCEC certification standards.
3. The GCEC standards allow for the appointment of less than certified individuals only when a professionally certified individual is not available.
4. Less than fully certified individuals are hired on a limited-term status, good for one (1) school year and granted a one year emergency certificate. These individuals are terminated at the end of each school year and may

be replaced at any time during the school year should a fully certified applicant become available.

5. The Guam Department of Education assures that there is a continuing priority to eliminate the need to hire less than fully certified individuals through the Dr. Antonio C. Yamashita Educator Corp. Program of Public Law 24-231 includes Special Education as a priority area.

Guam's Plan For Professional Development (Guam's Plan for Professional Development, Appendix A of Public Law 31-73,)

In October 2011 Guam's Plan for Professional Development (GPPD) was approved by the 31st Guam Legislature and provides a plan for early childhood assistants and teachers in all child care, Head Start, and related early years settings to advance in their profession reflecting the competencies, experiences, activities, and learning they engage in that improve performance and ability to provide quality care and education for ALL of Guam's children.

Guam's Plan for Professional Development comprises of two paths for certification:

Path A (the Alternate Path) is to be used by early childhood providers that are non-degree employed by public or private agencies including, but not limited to, the Department of Education Head Start Program, Early Intervention System, Early Childhood Special Education, GATE Preschool, Infant and Early Child Home Visiting Program, and other related service providers. Individuals utilizing Path A will be subject to credential review by the *Early Childhood Professional Development Subcommittee* under the *Guam Early Learning Council (GELC)*. The subcommittee is comprised of representatives from University of Guam, Guam Community College, *Department of Education, Guam Early Learning Council* and the Guam Child Care and Development Association. The subcommittee will *review and validate the credentials of a prospective Early Childhood Provider pursuing certification as an Early Childhood Professional under Path A of the GPPD with the Department of Public Health and Social Services, Bureau of Social Services Administration (DPHSS-BOSSA) and/or Department of Education, Division of Personnel.*

Path B is to be used by professionals in the early childhood field employed by public or private agencies including, but not limited to, the Department of Education Head Start Program, Early Intervention System, Early Childhood Special Education, GATE Preschool, Infant and Early Child Home Visiting Program, and other related service providers. Individuals utilizing Path B are subject to the regulations and requirements set forth by the Guam Commission for Educator Certification.

Early childhood providers utilizing Path A for certification have the option to follow Path B.

B. Paraprofessional Personnel and Assistants (§303.119(c))

Paraprofessionals are service coordinators who are responsible for providing coordination of services in home-based or community-based settings. The service coordinators shall assist and enable an infant and toddler with disability and the child's family to receive the services and rights, including procedural safeguards required under IDEA Part C.

The service coordinators is responsible for coordinating all services required under IDEA Part C across agencies and serves as a single point of contact for carrying out activities specified in the child's IFSP.

All personnel currently working directly with infants and toddlers and their families receiving early intervention services possess an academic degree and/or GDOE recognized qualifications for licensure or certification within their own discipline.

C. Shortages of Personnel (§303.119(d))

GEIS utilizes a variety of strategies displaying ongoing good faith efforts to recruit and hire appropriately and adequately trained personnel to provide early intervention services to infant and toddlers with disabilities including, geographic areas of the island where there is a shortage of such personnel, the most qualified individual available who are making satisfactory progress towards completing applicable course work necessary to meet the standards described above in Sections A & B.

If there is a shortage of related service personnel trained to work with young children with disabilities. All new personnel recruited and employed to work directly with infants and toddlers and their families in early intervention programs shall possess an academic degree and/or recognized qualifications for licensure or certification within their own discipline. In the event there is a personnel shortage, emergency certified personnel may be hired according Guam DOE set standards.

**LEAD AGENCY ROLE IN SUPERVISION, MONITORING, FUNDING,
INTERAGENCY COORDINATION, AND OTHER RESPONSIBILITIES (§303.120)**

The Governor of Guam has designated the Guam Department of Education as the Lead Agency for Part C services and as such has the single line of responsibility for the general administration and supervision of programs and activities administered by agencies, institutions, organizations, and Early Intervention Service (EIS) Providers receiving assistance under IDEA Part C. (§303.120(a)(1))

A. Monitoring of Programs

To ensure that Guam complies with IDEA Part C and in meeting the requirements of IDEA Part C, Guam has adopted methods for monitoring programs and activities to carry out IDEA Part C; (§303.120(a)(2)) whether or not the programs or activities are administered by agencies, institutions, organizations, and EIS providers that are receiving assistance including --

1. Monitoring agencies, institutions, organization, and EIS providers used by Guam to carry out IDEA Part C; (§303.120(a)(2)(i))
2. Enforcing of any obligations imposed on those agencies, institutions, organizations, and EIS providers under IDEA Part C and these regulations; (§303.120(a)(2)(ii))
3. Providing technical assistance, if necessary, to those agencies, institutions, organizations and EIS providers; (§303.120(a)(2)(iii))
4. Correcting any noncompliance identified through monitoring as soon as possible and in no case later than one year after the lead agency's identification of the noncompliance; and (§303.120(a)(2)(iv))
5. Conducting the activities indicated in the above Section A-1 through A-5 consistent with §§303.700 through 303.707, and any other activities required by Guam under those sections. (§303.120(a)(2)(v))

B. Identification and Coordination of All Available Resources (§303.120(b))

GEIS assures the identification and coordination of all available resources for early intervention services within Guam, including those from Federal, local, and private sources consistent with subpart F of IDEA Part C including --

1. Permissive use of funds by the lead agency; (§303.501)
2. Payor of last resort; (§303.510)

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3. Methods to ensure the provision of, and financial responsibility for GEIS services; (§303.511)
4. Policies related to use of public benefits, or insurance or private insurance to pay for GEIS services; (§303.520) and
5. System of payments, and fees (§303.521)

C. Assignment of Financial Responsibility (§303.120(c))

GEIS has in place methods for Guam’s interagency coordination. Under these methods, Guam shall ensure that the interagency agreements or other methods for interagency coordination are in effect between each public agency and the Guam DOE. If, during the lead agency’s resolution of the dispute, the Governor, Governor’s designee, or lead agency determines that the assignment of financial responsibilities was inappropriately made then--

1. The Governor, Governor’s designee, or lead agency shall reassign the financial responsibility to the appropriate agency; and (§303.511(c)(3)(i))
2. The lead agency shall make arrangements for reimbursement of any expenditure incurred by the agency originally assigned financial responsibility. (§303.511(c)(3)(ii))

D. Procedures for Continuing Early Intervention Service Pending Any Resolution (§303.120(d))

GEIS’s methods for Guam’s interagency coordination includes procedures to ensure that early intervention services are provided to infants and toddlers with disabilities and their families under IDEA Part C in a timely manner, pending the resolution of any disputes among public agencies or EIS providers.

E. Resolution of Intra- and Interagency Disputes (§303.120(e))

GEIS’s methods for Guam’s interagency coordination includes procedures for achieving timely resolution of intra- and interagency disputes about payments for a given service, or dispute about other matters related to Guam’s early intervention program. These procedures shall include a mechanism for resolution of dispute within agencies and for the Governor, Governor’s designee, or the lead agency to make a final determination for intra- and interagency disputes, which determination shall be binding upon the agencies involved. (§303.511(c)(1))

F. Formal Interagency Agreements (§303.120(f))

GEIS has in place written methods for the entry into formal interagency agreements of establishing financial responsibility, consistent with §303.511, that clearly

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identify the financial and service provision responsibilities of each agency (or entity within the agency) or define the financial responsibility of each agency for paying for early intervention services (consistent with Guam’s law) and procedures for resolving disputes and that include all additional components necessary to ensure meaningful cooperation and coordination as set forth in subpart F of IDEA Part C.

**POLICY FOR CONTRACTING OR OTHERWISE
ARRANGING FOR SERVICES (§303.121)**

Guam DOE has developed a policy pertaining to contracting or making other arrangements of early intervention services with public or private service providers to provide early intervention services on Guam, which is consistent with the provisions of IDEA Part C and includes the content of the application, and the conditions of the contract or other arrangements. This policy requires that all early intervention services must meet Guam's standards and be consistent with the provisions of IDEA Part C. (34 CFR §303.121(a)) This policy --

1. includes the mechanism that DOE will use in arranging for these services, including the process by which awards or other arrangements are made; and
2. is consistent with The Education Department General Administrative Regulations in 34 CFR part 80, and ensures that those requirements are met by any individual or organization seeking to provide these services for the lead agency. (34 CFR §303.121(b))

A. Procedures for Contracting

DOE will adhere to the following are steps for contractual or making other arrangements with public or private service providers to provide early intervention service:

The Small Purchase threshold is:

- Local funds (\$15,000 and above),
- Federal funds (\$100,000 and above).

Anything at or above the threshold must be bid out in a formal solicitation, either an Invitation to Bid ("IFB") or a Request for Proposal ("RFP"). Generally, procurements for professional services that are estimated to cost above the Small Purchase threshold will be solicited as an RFP as required in Guam Administrative Rules and Regulations: Title 2 (Administration), Division 4 (Procurement Regulations), Chapter 3 (Source Selection and Contract Formation), Section 3114 (Competitive Selection Procedures for Services).

The Office of the Guam Attorney General has determined that procurements for all professional services, regardless of dollar amount, will be memorialized in a contract document. Therefore, procurements for professional service, inclusive of early intervention services which are anticipated to cost Less Than the Small Purchase threshold will have the following steps:

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1. Completion of an End User Memorandum. The template form will be provided by the Procurement buyer. End User's completed memorandum to be provided to the assigned Buyer.
2. Entry of the requisition into the appropriate Munis system; GDOE system for locally funded procurements, TPFA system for federally funded procurements. Requisition entry will require obtaining one (1) price quotation for the desired service. The price obtained will be the price entered by the End User onto the requisition.
3. If the End User's first price quote is less than the Small Purchase threshold, and the total cost of the procurement is not anticipated to exceed the Small Purchase threshold, the assigned Buyer will be responsible for obtaining two (2) more quotes.
4. Once three (3) positive price quotes are obtained, the assigned Buyer will make the purchase decision and award the purchase order to the lowest, most responsive bidder.

Procurements for professional services, which are anticipated to cost *Equal To or More Than* the Small Purchase threshold, will require a formal RFP and will have the following steps:

1. Completion of an End User Memorandum. The template form will be provided by the Procurement buyer. End User's completed memorandum to be provided to the assigned Buyer.
2. Entry of the requisition into the appropriate Munis system; GDOE system for locally funded procurements, TPFA system for federally funded procurements.
3. The End User should have a reasonable estimate that the total cost of the procurement will cost greater than the Small Purchase threshold. The End User will use that estimate as its cost basis to be entered onto the Requisition. In this case, the End User *will not* be required to obtain one (1) price quotation for the desired service. In addition to providing the End User's Memorandum to the assigned Buyer, the End User must also provide the Scope of Work/Scope of Services. The crafting of the RFP document with regard to the Project Description, Scope of Services, evaluation criteria, and contract terms will be a continuous collaborative effort between the End User and the assigned Buyer.
4. The RFP will be issued. Proposals will be accepted, evaluated, and ranked by the assembled evaluation committee. The most qualified offeror will be requested to enter into contract negotiations with the End User. Once contract terms -- compensation, terms and conditions, etc. -- are agreed, a

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contract document will be crafted by DOE Legal to be signed by the awarded service provider.

- a. Persons providing early intervention services under contract must meet the same personnel standards (e.g. licensure, certification) and be consistent of those persons in Guam public agencies providing intervention services under IDEA Part C (§303.121(a)). In addition, the contractor shall Invoiced services and other documentation regarding the services were provided in an adequate manner and according to the terms of the applicable contract prior to payment.
 - b. The selection of the provider of contracted services shall ensure the requirements of IDEA Part C and Guam laws to include --
 - the quality of services being provided,
 - the appropriateness of the service to the population being served,
 - location and convenience of the services in relation to the target population, and
 - consideration of the families' needs, as well as a comparison of the costs of the services.
 - c. Should there be more than one way of contracting or arranging for services, consideration will be given to the least cumbersome, least time-consuming procedure for obtaining services in order to expedite the timely provision of these services.
5. The contract is routed internally for GDOE signatures; it is delivered to the Attorney General's office for review and signature, and similarly to the Governor's office.
 6. When the contract is fully executed by the Governor's signature, and all other documents required by the RFP -- e.g. insurances, licenses, etc. -- are complete, a Notice to Proceed ("NTP") will be issued to the awarded service provider.

B. Reimbursement Procedures

Guam has developed a procedure for securing the timely reimbursement of funds under IDEA Part C.

REIMBURSEMENT PROCEDURES (§303.122)

Guam DOE system must include written policies and procedures for securing timely reimbursement of funds used under IDEA Part C, and is responsible for establishing policies related to how services to eligible children and their families will be paid for under GEIS (34 CFR §303.122).

A. Financial Responsibilities

Guam DOE may use funds, under IDEA Part C, for activities or expenses that are reasonable and necessary for implementing the State's early intervention program for infants and toddlers with disabilities including funds (34 CFR §303.501 (a) thru (e)).

This will include policies related to how services to eligible children and their families will be paid for under GEIS. In addition, fees will not be charged for early intervention services provided to an infant or toddler with a disability under IDEA Part C. In the event that parents of an eligible child are determined unable to pay for services, the services to the child or the child's family will not be denied.

B. Reimbursement Procedures

Pursuant to GEIS's State Plan, Guam assures that conditions, terms, and procedures have been developed for securing the timely reimbursement of funds used under IDEA Part C.

1. If necessary to prevent a delay in the timely provision of appropriate early intervention services to an eligible child or the child's family, IDEA Part C funds may be used to pay the provider of services, pending reimbursement from the agency or entity that has ultimate responsibility for the payment. (34 CFR §303.510(b)) Payments may be made for:
 - a. Early intervention services, and/or
 - b. Eligible health services, i.e. services necessary to enable a child to benefit from the other early intervention services under IDEA Part C during the time that the child is receiving the other early intervention services. The term includes:
 - (i) Such services as clean intermittent catheterization, tracheotomy care, tube feeding, the changing of dressings or osteotomy collection bags, and other health services; and
 - (ii) Consultation by physicians with other service providers concerning the special health care needs of eligible children that will need to be addressed in the course of providing



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other early intervention services. This does not include (34 CFR §303.16(b)(2)) --

- services that are surgical in nature (such as cleft palate surgery, surgery for club foot, or the shunting of hydrocephalus);
- services that are purely medical in nature (such as hospitalization for management of congenital heart ailments, or the prescribing of medicine or drugs for any purpose); or
- services related to implementation, optimization (e.g., mapping), maintenance, or replacement of a medical device that is surgically implanted, including a cochlear implant.

c. Other functions and services authorized under IDEA Part C, including child find, and evaluation and assessment.

2. In the event that the services designated on the IFSP cannot be implemented within the time line stated in the IFSP because of an agency's inability to provide payment, the Service Coordinator will submit documentation of: the service needed, details of action taken to obtain that service, arrangement of payment, and the reason given by the agency for its financial inability to provide that service. DOE shall authorize payment for the services from GEIS or other available funds so the services can be provided in a timely manner; and will then bill the assigned agency for reimbursement.
3. DOE is expected to reimburse the payee within 90 days from date of billing.
4. If the DOE disputes the charge, procedures described in the Interagency Agreements and Resolution of Disputes will be exercised.

C. Methods to Ensure the Provision of, and Financial Responsibility for, Part C Services

Please refer to Subpart C, "Policies and Procedures Related to Financial Matters (p.99)."

D. Proceeds or Funds From Public Insurance or Benefits or From Private Insurance

1. Proceeds or funds from public insurance or benefits or from private insurance are not treated as program income for purposes of 34 CFR 80.25

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2. If the State receives reimbursements from Federal funds, those funds are considered neither State nor local funds under §303.225(b).
3. If the State spends funds for services under IDEA Part C, those funds are considered neither State nor local funds under §303.225.

PROCEDURAL SAFEGUARDS (§303.123)

Guam Department of Education (GDOE) - Guam Early Intervention System (GEIS) has established procedural safeguards that meet the requirements of Subpart E including --

- the provision of confidentiality, parent consent and notice, surrogate parents, and dispute resolution procedures.
- the effective implementation of the procedural safeguards by GDOE-GEIS including early intervention providers involved in the provision of early intervention services under IDEA Part C; and
- making available an initial copy of their child’s early intervention record at no cost to the parents.

Confidentiality of Personally Identifiable Information and Early Intervention Records

A. Confidentiality and Opportunity to Examine Records (§303.401)

GDOE-GEIS ensures the protection of personally identifiable information collected, used or maintained under IDEA Part C including the Rights of Parents to written notice of and written consent to the exchange of this information among agencies consistent with federal and Guam law.

1. Confidentiality Procedures

GDOE-GEIS ensures the protection of confidentiality of any personally identifiable data, information, and records collected or maintained by GDOE-GEIS and early intervention providers in accordance with the protections under the Family Educational Rights and Privacy Act (FERPA) and has procedures in place that ensure --

- a. All participating child serving agencies comply with the GDOE-GEIS confidentiality procedures, and
- b. Parents of infants or toddlers who are referred to, or receive services under GDOE-GEIS, are afforded the opportunity to inspect and review all IDEA Part C early intervention records about the child and the child’s family that are collected, maintained, or used under GDOE-GEIS, including records related to evaluations and assessments, screening, eligibility determinations, development and implementation of IFSPs, provision of early intervention services, individual complaints involving the child, or any part of the child’s early intervention record under IDEA Part C.

2. Applicability and timeframes of procedures

The confidentiality procedures described in paragraph a of this section apply to the personally and identifiable information of a child and the child's family that --

- a. Is contained in early intervention records collected, used, or maintained under IDEA Part C or an EIS provider; and
- b. Applies from the point in time when the child is referred for early intervention services to IDEA Part C and until the GDOE-GEIS is no longer required to maintain or no longer maintains that information under applicable Federal and Guam laws.

3. Disclosure of information

Prior written parental authorization is needed for disclosure of information about the child to the new provider to ensure continuity of services, including evaluation and assessment information and a copy of the current Individualized Family Service Plan.

New providers may include GDOE-Part B (Early Childhood Special Education) or other community programs offering services to young children. Parents are encouraged to sign a Release of Information form that will allow specific information (on their child) to be shared with community service providers. The information will be used in supporting activities needed for transition.

Unless the information is contained in early intervention records, and the disclosure is authorized without parental consent under the Family Educational Rights and Privacy Act (FERPA), GDOE-GEIS must obtain parental consent before personally identifiable information is disclosed to parties other than officials of participating agencies. Except under the circumstances specified below, parental consent is not required before personally identifiable information is released to officials of participating agencies for purposes of meeting a requirement of IDEA Part C.

An LEA Notification to Part B is needed for children turning three years of age that may be potentially Part B eligible. The LEA Notification is not needed if the IFSP team determines that the child is NOT potentially eligible for Part B services at age 3 years of age.

For transition timelines procedures to preschool and other programs, lead agency must disclose to GDOE-GEIS where the child resides, the following personally identifiable information under the Act --

1. Child's name.
2. Child's date of birth.

3. Parent contact information (including parents' names, addresses, and telephone numbers).
4. Option to inform a parent about intended disclosure

GDOE-GEIS requires early intervention providers, to inform parents of a toddler with a disability of the intended disclosure.

B. Confidentiality (§303.402)

The Secretary of the U.S. Department of Education takes appropriate action, in accordance with section 444 of GEPA, to ensure the protection of the confidentiality of any personally identifiable data, information, and records collected, maintained or used by the Secretary and by the lead agencies and early intervention system providers pursuant to IDEA Part C and consistent with §§303.401 through 303.417. The regulations in §§303.401 through 303.417, which are included in these procedural safeguards, ensure the protection of the confidentiality of any personally identifiable data, information, and records collected or maintained pursuant to IDEA Part C by the Secretary and GDOE-GEIS and early intervention system providers, in accordance with the Family Educational Rights and Privacy Act (FERPA).

C. Definitions (§303.403)

1. Destruction

Means physical destruction of the record or ensuring that personal identifiers are removed from a record so that the record is no longer personally identifiable.

2. Early intervention records

Mean all records regarding a child that are required to be collected, maintained, or used under IDEA Part C statute and regulations.

3. Participating Agencies

Means any individual, agency, entity, or institution that collects, maintains, or uses personally identifiable information to implement the requirements in IDEA Part C and the regulations in IDEA Part C with respect to a particular child. GDOE-GEIS includes the lead agency and early intervention system providers and any individual or entity that provides any IDEA Part C services (including service coordination, evaluations and assessments, and other IDEA Part C services), but does not include primary referral sources, or public agencies (such as the State Medicaid or CHIP program) or private entities (such as private insurance companies) that act solely as funding sources for IDEA Part C services.

D. Notice to Parents (§303.404)

GDOE-GEIS shall give notice when a child is referred under IDEA Part C that is adequate to fully inform parents about the requirements under 303.402 including --

1. Infants and toddlers with or at risk for developmental delay/disabilities whom personally identifiable information is maintained, the types of information sought, the method GDOE-GEIS intends to use in gathering the information (including the sources from whom information is gathered), and the uses to be made of the information;
2. GDOE-GEIS shall protect the confidentiality of personally identifiable information at collection, storage, disclosure, and destruction stages. **All GDOE-GEIS employees** shall assume responsibility for ensuring the confidentiality of any personally identifiable information.

All persons collecting or using personally identifiable information shall receive training or instruction regarding your early intervention program's policies and procedures regarding confidentiality under IDEA Part C and the Family Educational Rights and Privacy Act (FERPA).

DOE-GEIS shall maintain, for public inspection, a current listing of the names and positions of those employees within the GDOE-GEIS who may have access to personally identifiable information.

GDOE-GEIS shall inform parents when personally identifiable information collected, maintained, or used is no longer needed to provide educational services to your child.

The information must be destroyed at parent request. However, a permanent record of your child's name, address, and phone number may be maintained without time limitation; and

3. The right of parents and children regarding confidentiality of Personally Identifiable Information and Early Intervention Records is to ensure that parents of a child referred under IDEA Part C are afforded the right to confidentiality of personally identifiable information, including the right to written notice of, and written consent to, the exchange of that information among agencies, consistent with Federal and State laws.(§§303.401 - 303.417; and
4. Native language, when used with an individual who has limited English proficiency, means the following:
 - a. The language normally used by that person, or, in the case of a child, the language normally used by the child's parents;

- b. In all direct contact with a child's parents (including evaluation of the child and written prior notice to parents), the language normally used by the child in the home or learning environment.

Native Languages will include, (but not limited to) Chamorro, Filipino, Pohnpeian and Chuukese.

For a person with deafness or blindness, or for a person with no written language, the mode of communication is what the person normally uses (such as sign language, Braille, or oral communication).

E. Access Rights (§303.405)

GDOE-GEIS shall permit parents to inspect and review any early intervention records relating to their children which are collected, maintained, or used by the GDOE-GEIS under IDEA Part C. GDOE-GEIS shall comply with a parent's request to inspect and review records without unnecessary delay and before any meeting regarding an individualized family service plan or any hearing pursuant to 303.430(d) - 303.435 through 303.439 and in no case more than 10 days after the request has been made.

- 1. The right to inspect and review early intervention records under this section includes:
 - a. the right to a response from the GDOE-GEIS to reasonable requests for explanations and interpretations of the early intervention records;
 - b. the right to request that GDOE-GEIS provide copies of the early intervention records containing the information if failure to provide those copies would effectively prevent the parent from exercising the right to inspect and review the records; and
 - c. the right to have a representative of the parent inspect and review the records.
- 2. GDOE-GEIS may presume that the parent has authority to inspect and review records relating to his or her child unless GDOE-GEIS has been provided documentation that the parent does not have the authority under applicable Territory of Guam law governing such matters as custody, foster care, guardianship, separation, and divorce.

F. Record of Access (§303.406)

GDOE-GEIS shall keep a record of parties obtaining access to early intervention records collected, maintained, or used under IDEA Part C (except access by parents and authorized representatives of GDOE-GEIS), including the name of the party, the date access was given, and the purpose for which the party is authorized to use the early intervention records.

G. Records On More Than One Child (§303.407)

If any early intervention record includes information on more than one child, the parents of those children shall have the right to inspect and review only the information relating to their child or to be informed of that specific information. If a copy of the early intervention records is provided to the parents, identifiable information on other children shall be removed.

H. List of Types and Locations of Information (§303.408)

GDOE-GEIS must provide parents on request a list of the types and locations of early intervention records collected, maintained, or used by GDOE-GEIS.

I. Fees for Records (§303.409)

1. GDOE-GEIS may charge a fee for copies of records that are made for parents under IDEA Part C if the fee does not effectively prevent the parents from exercising their right to inspect and review those records except as provided in Section IX-3 below.
2. GDOE-GEIS may not charge a fee to search for or to retrieve information under IDEA Part C.
3. GDOE-GEIS shall provide at no cost to parents, a copy of each evaluation, assessment of the child, family assessment, and IFSP as soon as possible after each IFSP meeting.

J. Amendment of Records at Parent's Request (§303.410)

1. A parent who believes that information in early intervention records collected, maintained, or used under IDEA Part C is inaccurate or misleading or violates the privacy or other rights of the child, may request the GDOE-GEIS which maintains the information to amend the information.
2. GDOE-GEIS shall decide whether to amend the information in accordance with the request within a reasonable period of time of receipt of the request.
3. If the GDOE-GEIS decides to refuse to amend the information in accordance with the request it shall inform the parent of the refusal, and advise the parent of the right to a hearing under §303.411.

K. Opportunity of Hearing (§303.411)

GDOE-GEIS must, on request, provide parents with the opportunity for a hearing to challenge information in their child's early intervention records to ensure that it is not inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child or parents. A parent may request a due process hearing in accordance with procedures

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under section 639 of the Act. Guam's procedures for a due process hearing meet IDEA requirements under §303.413, and the procedures are consistent with FERPA hearing requirements. GDOE-GEIS provides their contact information (below) to families in order to receive additional information in accessing their rights:

Guam Early Intervention
System
Division of Special Education
Department of Education
P. O. Box DE
Hagåtña, Guam 96932

Tiyan Building A
13-5 Mariner Avenue
Barrigada, Guam 96919
Tel: (671) 300-5776/5816
Email: geis@gdoe.net
Website: www.gdoe.net/gei

L. Results of the Hearing (§303.412)

1. If, as a result of the hearing, GDOE-GEIS decides that the information is inaccurate, misleading or in violation of the privacy or other rights of the child or parent, it must amend the information accordingly and so inform the parent in writing.
2. If, as a results of the hearing, the GDOE-GEIS decides that the information is not inaccurate, misleading, or in violation of the privacy or other rights of the child or parent, it must inform the parent of the right to place in early intervention records it maintains on the child a statement commenting on the information or setting forth any reasons for disagreeing with the decision of GDOE-GEIS.
3. Any explanation placed in the early intervention records of the child under this section must --
 - a. Be maintained by GDOE-GEIS as part of the early intervention records of the child as long as the record or contested portion is maintained by GDOE-GEIS; and
 - b. If the early intervention records of the child or the contested portion are disclosed by GDOE-GEIS to any party, the explanation must also be disclosed to the party.

M. Hearing Procedures (§303.413)

A hearing requested by a parent under §303.411 must be conducted according to the procedures under 34 CFR 99.22.

N. Consent Prior to Disclosure or Use (§303.414)

1. Parental consent must be obtained before personally identifiable information is:
 - a. disclosed to anyone other than authorized representatives, officials, or employees of GDOE-GEIS collecting, maintaining, or using the information under IDEA Part C, subject to paragraph (2) below; or
 - b. used for any purpose other than meeting a requirement under IDEA Part C.

O. GDOE-GEIS may not release personally identifiable information to any party except GDOE-GEIS without parental consent unless authorized to do so under the Family Education Rights and Privacy Act (FERPA). §303.414 (b)(1) and (b)(2))

Personally identifiable information includes --

- a. name of child, child's parent, or other family member;
- b. address of the child or child's family;
- c. a personal identifier, such as the child's or parent's social security number or student number;
- d. a list of personal characteristics or other information that would make it possible to identify your child or child's family with reasonable certainty; or
- e. Other indirect identifiers, such as the student's date of birth, place of birth, and mother's maiden name.

GDOE-GEIS must provide Notification to the SEA and the LEA for the area in which the toddler resides that the toddler on his or her third birthday will reach the age of eligibility for services under part B of the Act. [§303.209 (b)(1)(i) and (b)(1)(ii)]

1. When a parent refuses to provide consent the GDOE-GEIS shall make reasonable efforts to ensure that the parent --
 - a. is fully aware of the nature of the evaluation and assessment or the services that would be available; and
 - b. understands that the child will not be able to receive the evaluation and assessment or services unless consent is given.



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The GDOE-GEIS may, but is not required to, use the due process hearing procedures under Part B to challenge the parent's refusal to consent to an evaluation and assessment of the child for early intervention services.

GDOE-GEIS may not use the due process hearing's procedures under Part B to challenge the parent's refusal to consent to the provision of an early intervention service or the use of insurance.

2. Parents of a child eligible under IDEA Part C --
 - a. May determine whether they, their child, or other family members will accept or decline any early intervention service under IDEA Part C and may decline such a service after first accepting it, without jeopardizing other early intervention services under IDEA Part C; and
 - b. May decline a service after first accepting it, without jeopardizing other early intervention services under IDEA Part C.

Note: GDOE-GEIS has chosen to adopt Part B Due Process Procedures under Section 615 of the Act.

P. Safeguards (§303.415)

1. GDOE-GEIS shall protect the confidentiality of personally identifiable information at the collection, maintenance, use, storage, disclosure, and destruction stages.
2. One official at GDOE-GEIS shall assume responsibility for ensuring the confidentiality of any personally identifiable information.
3. All persons collecting or using personally identifiable information must receive training or instruction regarding Guam's policies and procedures under IDEA Part C as well as those required by FERPA.
4. GDOE-GEIS shall maintain, for public inspection, a current listing of the names and positions of those employees within the GDOE-GEIS who may have access to personally identifiable information.

Q. Destruction of information (§303.416)

Destruction means physical destruction of the record or ensuring that personal identifiers are removed from a record so that the record is no longer personally identifiable.

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1. GDOE-GEIS shall inform parents when personally identifiable information collected, maintained, or used under IDEA Part C is no longer needed to provide services to the child.
2. Subject to the personally identifiable information no longer being needed to provide services to the child, the information must be destroyed at the request of the parents. However, a permanent record of a child's name, date of birth, parent contact information (including address and phone number), names of service coordinator and EIS provider(s), and exit data (including year and age upon exit, and any programs entered upon exit) may be maintained without time limitation.

R. Enforcement (§303.417)

GDOE-GEIS has described in its annual program plan for IDEA Part C services, the policies and procedures which GDOE-GEIS uses to ensure that its policies and procedures are followed and that the requirements of the IDEA statute and IDEA Part C regulations are met.

GDOE-GEIS has policies and procedures for enforcement options to ensure correction of noncompliance. Progressive Disciplinary Action (GDOE personnel rules and regulations) include: verbal counseling; memorandum of warning; memorandum of reprimand; and recommendation for adverse action. When the program fails to correct noncompliance within the one year timeline, progressive disciplinary action is initiated

GDOE GEIS provides training to parents and GDOE-GEIS personnel on the State's Dispute Resolution Procedures, which includes mediation. Additionally, mediation is offered as an option to parents whenever they express a dispute related to their child's special education services.

Parental Consent and Notice

A. Parental Consent and Ability to Decline Service (§303.420)

- a. GDOE-GEIS must ensure parental consent is obtained before --
 - a. Administering screening procedures that are used to determine whether a child is suspected of having a disability;
 - b. All evaluations and assessment of a child;
 - c. Early intervention services are provided to the child under IDEA Part C;

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- d. Public benefits or insurance or private insurance is used as required under §303.520; and
 - e. Disclosure of personally identifiable information consistent with §303.414.
- b. If consent is not given for a, b, or c above, GDOE-GEIS must make reasonable efforts to ensure that the parent --
- a. Is fully aware of the nature of the evaluation and assessment of the child or early intervention services that would be available; and
 - b. Understands that the child will not be able to receive the evaluation, assessment, or early intervention service unless consent is given.
 - GDOE-GEIS may use the due process hearing procedures under IDEA Part C to challenge the parent’s refusal to consent to an evaluation and assessment of the child for early intervention services.
 - GDOE-GEIS may not use the due process hearing’s procedures under IDEA Part C to challenge the parent’s refusal to consent to the provision of an early intervention service or the use of insurance, or the disclosure of personally identifiable information.
 - c. Parents of a child eligible under IDEA Part C --
 - Determine whether they, their infant or toddler with a disability, or other family members will accept or decline any early intervention service under IDEA Part C at any time, in accordance with State Law; and
 - May decline a service after first accepting it, without jeopardizing other early intervention services under IDEA Part C.

B. Prior Written Notice and Procedural Safeguards Notice (§303.421)

Prior written notice must be provided to parents a reasonable time before GDOE-GEIS or an early intervention service provider proposes or refuses to initiate or change the identification, evaluation, or placement of the infant or toddler, or the provision of early intervention services to the infant or toddler with a disability and that infant’s or toddler’s family.

1. Content of notice

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The notice must be in sufficient detail to inform the parents about --

- a. a description of the action that is being proposed or refused;
- b. an explanation of why GDOE-GEIS proposes or refuses to take action;
- c. sources for parents to contact to obtain assistance in understanding the provisions of IDEA Part C; and
- d. all procedural safeguards that are available, including a description of mediation, how to file a State or due process complaint, and any timelines under the procedures.

2. Native Language:

- a. The notice must be written in language understandable to the general public and provided in the native language defined in §303.25, of the parent or other mode of communication used by the parent, unless it is clearly not feasible to do so.
- b. If the native language or other mode of communication of the parent is not a written language, GDOE-GEIS shall take steps to ensure the following:
 - notice is translated orally or by other means to the parent in the parent's native language or other mode of communication;
 - parent understands the notice; and
 - there is written evidence that the requirements of this paragraph have been met.

Surrogate Parents

A. Surrogate Parents (§303.422)

GDOE-GEIS ensures that the rights of infants and toddlers are protected if --

- no parent can be identified;
- GDOE-GEIS, after reasonable efforts, cannot locate the parent; or
- the child is a ward of the State (Guam) under the laws of Guam.

1. Duty of GDOE-GEIS

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GDOE-GEIS ensures that policies and procedures have been developed for the assignment of an individual to act as a surrogate for the parent. These policies and procedures include methods for:

- a. Determining whether a child needs a surrogate parent;
- b. Assigning a surrogate parent to the child.
 - In implementing the provisions under this section for children who are wards of the State or placed in foster care, GDOE-GEIS must consult with the public agency that has been assigned care of the child.

2. Wards of the State

In the case of a child who is a ward of the State, the surrogate parent, instead of being appointed by the GDOE-GEIS in section 1 above, may be appointed by the judge overseeing the infant or toddler's case provided that the surrogate parent meets the requirements below of this section.

3. Criteria for Selection of Surrogate Parents

- a. GDOE-GEIS may select a surrogate parent in any way permitted under Guam Law.
- b. GDOE-GEIS must ensure that a person selected as a surrogate parent --
 - Is not an employee of GDOE-GEIS or any other public agency or EIS provider that provides early intervention services, education, care, or other services to the child or any family member of the child;
 - Has no personal or professional interest that conflicts with the interest of the child he or she represents; and
 - Has knowledge and skills that ensure adequate representation of the child.

4. Non-Employee Requirement, Compensation

A Person who is otherwise qualified to be a surrogate in section 3 above is not an employee of GDOE-GEIS solely because he or she is paid by the GDOE-GEIS to serve as a surrogate parent.

5. Surrogate Parent Responsibilities

The surrogate parent has the same rights as a parent for all purposes under IDEA Part C.

6. GDOE-GEIS Responsibility

GDOE-GEIS must make reasonable efforts to ensure the assignment of a surrogate parent not more than 30 days after a public agency determines that the child needs a surrogate parent.

Dispute Resolution Options

A. State Dispute Resolution Options (§303.430)

Each statewide system must include procedures for the timely administrative resolution of complaints through mediation, State complaint procedures, and due process hearing procedures, described below.

1. Mediation

GDOE-GEIS must make available to parties to disputes involving any matter under IDEA Part C the opportunity for mediation that meets the requirements in §303.431.

2. State Complaint Procedures

GDOE-GEIS must adopt written State complaint procedures to resolve any State complaints filed by any party regarding any violation of IDEA Part C that meet the requirements in §§ 303.432 through 303.434.

3. Due Process Hearing Procedures

a. GDOE-GEIS has chosen to adopted Part B Due Process Procedures under Section 615 of the Act to resolve complaints with respect to a particular child regarding any matter identified in §303.421(a), by adopting --

i. The Part B due process hearing procedures under section 615 of the Act and §§ 303.440 through 303.449 (with a 30-day timeline for resolving due process complaints, as provided in 303.440(c)).

4. Status of a Child During Pendency of Due Process Complaint

a. During the pendency of any proceeding involving a due process complaint in section 3 above, unless GDOE-GEIS and parents of an infant or toddler with a disability otherwise agree, the child must



continue to receive the appropriate early intervention services in the setting identified in the IFSP that is consented to by the parents.

- b. If the due process complaint in section 3 above involves an application for initial services under IDEA Part C, the child must receive those services that are not in dispute.

Mediation

B. Mediation (§303.431)

GDOE-GEIS shall ensure procedures are established and implemented to allow parties to disputes involving any matter under IDEA Part C, including matters arising prior to the filing of a due process complaint, to resolve disputes through a mediation process at any time.

1. Requirements

The procedures shall ensure that the mediation process:

- a. Is voluntary on the part of the parties;
- b. Is not used to deny or delay a parent's right to a due process hearing, or to deny any other rights afforded under IDEA Part C; and
- c. Is conducted by a qualified and impartial mediator who is trained in effective mediation techniques.

GDOE-GEIS shall maintain a list of people who are qualified mediators and know the laws and regulations relating to the provision of early intervention services. GDOE-GEIS shall select mediators on a random, rotational, or other impartial basis.

GDOE-GEIS is responsible for the cost of the mediation process, including the costs of meetings. Each meeting in the mediation process shall be scheduled in a timely manner and held at a place that is convenient to the parties to the dispute.

If the parties resolve a dispute through the mediation process, both parties shall enter into a legally binding agreement that sets forth the resolution and --

1. States that all discussions that happened during the mediation process will remain confidential and may not be used as evidence in any subsequent due process hearing or civil proceeding; and
2. Is signed by both the parent and a representative of the GDOE-GEIS who has the authority to bind such agency.

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A written, signed mediation agreement is enforceable in any State court of competent jurisdiction or in a district court of the United States.

Discussions that occur during the mediation process shall be confidential. They cannot be used as evidence in any future due process hearing or civil proceeding of any Federal court or State court of a State receiving assistance under IDEA Part C.

2. Impartiality of mediator

An individual who serves as a mediator under IDEA Part C --

The mediator:

- a. May not be an employee of GDOE-GEIS or an early intervention system provider that is involved in the provision of early intervention services or other services to the child; and
- b. Shall not have a personal or professional interest which conflicts with the person's objectivity.
- c. A person who otherwise qualifies as a mediator is not an employee of a GDOE-GEIS or an early intervention provider solely because he or she is paid by the GDOE-GEIS or provider to serve as a mediator.

3. Meeting to Encourage Mediation

GDOE-GEIS has established procedures to offer to parents and early intervention providers that choose not to use the mediation process, an opportunity to meet, at a time and location convenient to the parents, with a disinterested party --

- a. Who is under contract with an appropriate alternative dispute resolution entity, or a parent training and information center or community parent resource center in the State; and
- b. Who would explain the benefits of, and encourage the use of, the mediation process to the parents.

State Complaint Procedures

A. Adoption of State Complaint Procedures (§303.432)

1. GDOE-GEIS has written procedures for --
 - a. Resolving any complaint, including a complaint filed by an organization or individual from another State by providing the filing of a complaint with GDOE-GEIS; and
 - b. Widely disseminating the State complaint procedures to parents and other interested individuals, including parent training and information centers, protection and advocacy agencies, independent living centers, and other appropriate entities.
2. Remedies for Denial of Appropriate Services

In resolving a State complaint in which the GDOE-GEIS has found a failure to provide appropriate services, GDOE-GEIS, pursuant to its general supervisory authority under IDEA Part C, shall address --

- a. The failure to provide appropriate services, including corrective action appropriate to address the needs of the infant or toddler with a disability who is the subject of the complaint and the infant's or toddler's family (such as compensatory services or monetary reimbursement); and
- b. Appropriate future provision of services for all infants and toddlers with disabilities and their families.

B. Minimum State Complaint (§303.433)

1. Time Limit; Minimum Procedures

Within 60 calendar days of a complaint being filed GDOE-GEIS shall --

- a. Carry out an independent on-site investigation, if GDOE-GEIS determines that an investigation is necessary;
- b. Give the complainant the opportunity to submit additional information, either orally or in writing, about the allegations in the complaint;
- c. Provide GDOE-GEIS or early intervention service providers with the opportunity to respond to the complaint, including, at a minimum --



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- at the discretion of GDOE-GEIS, a proposal to resolve the complaint; and
 - an opportunity for a parent who has filed a complaint and GDOE-GEIS or early intervention service providers to voluntarily engage in mediation;
- d. Review all relevant information and make an independent determination as to whether GDOE-GEIS or early intervention service provider is violating a requirement under IDEA Part C; and
- e. Issue a written decision to the complainant that addresses each allegation in the complaint and contains --
- findings of fact and conclusions; and
 - the reasons for GDOE-GEIS final decision.
2. Time Extension; Final decision; Implementation

GDOE-GEIS procedures shall --

- a. Permit an extension of the 60 calendar-day time limit only if --
- exceptional circumstances exist with respect to a particular State complaint; or
 - the parent and GDOE-GEIS or other public agency involved voluntarily agree to extend the time to resolve the matter through mediation or alternative means of dispute resolution, if available in Guam. (pg. 25 of the Part B Procedural Safeguards)
- b. Include procedures for effective implementation of GDOE-GEIS, final decision, if needed, including --
- i. technical assistance activities;
 - ii. negotiations; and
 - iii. corrective actions to achieve compliance.
3. State Complaints and Due Process Hearings

If a written State complaint is received that is also the subject of a due process hearing as described under the heading *Filing a Due Process Complaint*, or the State complaint contains multiple issues of which one or more are part of

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such a hearing, the GDOE-GEIS must set aside any part of the State complaint that is being addressed in the due process hearing until the hearing is over. Any issue in the State complaint that is not a part of the due process hearing must be resolved using the time limit and procedures described above.

If an issue raised in a State complaint has previously been decided in a due process hearing involving the same parties (for example, the parent and the GDOE-GEIS), then the due process hearing decision is binding on that issue and the GDOE-GEIS must inform the complainant that the decision is binding.

A complaint alleging the GDOE-GEIS's or other public agency's failure to implement a due process hearing decision must be resolved by the GDOE-GEIS.

If an issue raised in a complaint filed under this section has previously been decided in a due process hearing involving the same parties --

- a. the due process hearing decision is binding on that issue; and
- b. GDOE-GEIS shall inform the complainant to that effect.

A State complaint alleging GDOE-GEIS or early intervention service provider's failure to implement a due process hearing decision shall be resolved by GDOE-GEIS.

C. Filing a complaint (§303.434)

An organization or individual may file a signed written complaint under the State Complaint Procedures described above.

The complaint shall include --

1. A statement that GDOE-GEIS or early intervention service provider has violated a requirement under IDEA Part C;
2. The facts on which the statement is based;
3. The signature and contact information for the complainant; and
4. If alleging violations with respect to a specific child --
 - a. The name and address of the residence of the child;
 - b. The name of the early intervention service provider serving the child;

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- c. A description of the nature of the problem of the child, including facts relating to the problem; and
- d. A proposed resolution to the problem to the extent known and available to the party at the time the complaint is filed.

The complaint shall allege a violation that occurred not more than one year prior to the date that the complaint is received.

The party filing the complaint shall forward a copy of the complaint to GDOE-GEIS or early intervention service provider serving the child at the time the party files the complaint with GDOE-GEIS.

GDOE-GEIS adopts the Part B Due Process Hearing Procedures under Section 615 of the Act

A. Filing a Due Process Complaint (§303.440)

A parent, early intervention service provider, or GDOE-GEIS may file a due process complaint on any of the matters relating to the identification, evaluation, or placement of your child, or the provision of early intervention services to the infant or toddler with a disability and his or her family under IDEA Part C.

The due process complaint shall allege a violation that occurred not more than two years before the date the parent or early intervention service provider knew, or should have known about the alleged action that forms the basis of the due process complaint.

The above timeline does not apply to you if you could not file a due process complaint within the timeline because:

- Specific misrepresentation by GDOE-GEIS or early intervention service provider that it had resolved the problem forming the basis of a due process complaint; or
- GDOE-GEIS or early intervention service provider's failure to provide the parent information that was required under IDEA Part C to be provided to the parent.

Information for parents

GDOE-GEIS shall inform the parent of any free or low-cost legal and other relevant services available in the area if --

- a. The parent request the information; or
- b. The parent or early intervention service provider files a due process complaint under this section.

B. Due Process Complaint (§303.441)

GDOE-GEIS has procedures in place that require either party or the attorney representing a party, to provide to the other party a due process complaint which shall remain confidential.

The party filing the due process complaint shall forward a copy of the due process complaint to GDOE-GEIS.

1. Content of Complaint

The due process complaint shall include --

- a. The name of the child;
- b. The address of the child's residence;
- c. The name of the early intervention service provider;
- d. If case of a homeless child available contact information and the name of the early intervention service provider serving the child;
- e. A description of the nature of the problem of the child relating to the proposed or refused initiation or change, including facts relating to the problem; and
- f. A proposed resolution of the problem to the extent known and available to the party at the time.

2. Notice Required Before a Hearing on a Due Process Complaint

A party may not have a hearing on a due process complaint until the party, or the attorney representing the party, files a due process complaint that meets the *Content of Complaint* requirement listed above.

3. Sufficiency of complaint

The due process complaint required shall be deemed sufficient unless the party receiving the due process complaint notifies the hearing officer and the other party in writing, within 15 calendar days of receipt of the due process complaint, that the receiving party believes that the due process complaint does not meet the *Content of Complaint* requirement listed above.

Within five calendar days of the receipt of notification the hearing officer shall make a determination on the face of the due process complaint of whether the due process complaint meets the *Content of Complaint*

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requirement listed above and shall immediately notify the parties in writing of that determination.

A party may amend its due process complaint only if --

- a. The other party consents in writing to the amendment and is given the opportunity to resolve the due process complaint through a meeting held pursuant to the resolution process, or
- b. The hearing officer grants permission, except that the hearing officer may only grant permission to amend at any time no later than 5 days before the due process hearing begins.

If a party files an amendment due process complaint, the timeline for the resolution meeting and the resolution time period begins with filing of an amended due process complaint.

4. GDOE-GEIS Response to a Due Process Complaint

If GDOE-GEIS has not sent a prior written notice, as described above under **Parent Consent and Notice** (*Prior Written Notice* and Procedural Safeguard Notice (§303.421)) to the parent regarding the subject matter contained in the parent's due process complaint, GDOE-GEIS shall, within 10 days of receiving the due process complaint, send to the parent a response that includes --

- a. An explanation of why GDOE-GEIS proposed or refused to take the action raised in the due process complaint;
- b. A description of other options that the individual family service plan (IFSP) Team considered and the reasons why those options were rejected;
- c. A description of each evaluation procedure, assessment, record, or report GDOE-GEIS used as the basis for the proposed or refused action;
- d. A description of the other factors that are relevant to GDOE-GEIS proposed or refused action.

A response by GDOE-GEIS does not preclude GDOE-GEIS from asserting that the parent's due process complaint was insufficient, where appropriate.

5. Other Party Response to a Due Process Complaint

Except as stated under the sub-heading immediately above, *GDOE-GEIS response to a due process complaint*, the party receiving a due process complaint shall, within 10 days of receiving the due process complaint, send to the other party a response that specifically addresses the issues in the complaint.

C. Resolution Process (§303.442)

1. Resolution Meeting

Within 15 days of receiving notice of the parent’s due process complaint, and prior to the initiation of a due process hearing GDOE-GEIS shall convene a meeting with the parent and relevant member or members of the IFSP Team who have specific knowledge of the facts identified in the due process complaint that --

- a. Includes a GDOE-GEIS representative who has the decision-making authority on behalf of GDOE-GEIS; and
- b. May not include an attorney of GDOE-GEIS unless the parent is accompanied by an attorney.

The Parent and the GDOE-GEIS will determine the relevant members of the IFSP team to attend the meeting.

If GDOE-GEIS is not able to obtain the participation of the parent in the resolution meeting after reasonable efforts have been made, including documenting its efforts, GDOE-GEIS may, at the conclusion of the 30 day resolution period, request that the hearing officer dismiss the parent’s due process complaint.

The purpose of the resolution meeting is for the parent of the child to discuss the due process complaint, and the facts that form the basis of the due process complaint, so that GDOE-GEIS has the opportunity to resolve the dispute that is the basis of the due process complaint.

The resolution meeting need not be held if --

- a. The parent and GDOE-GEIS agree in writing to waive the meeting; or
- b. The parent and GDOE-GEIS agree to use the mediation process, as described under the heading *Mediation*.

2. Resolution Period

If GDOE-GEIS has not resolved the due process complaint to the satisfaction of the parties within 30 days of the receipt of the due process complaint, the due process hearing may occur.

The 30 day timeline for issuing a final decision begins at the expiration of the 30 day resolution period, with certain exceptions for adjustments made to the 30 day resolution period, as described below.

Except where the parties have jointly agreed to waive the resolution process or to use mediation, notwithstanding the resolution period, the failure of the parent filing a due process complaint to participate in the resolution meeting will delay the timelines for the resolution process and due process hearing until you, the parent, agree to participate in a meeting.

If GDOE-GEIS is not able to obtain the participation of the parent in the resolution meeting after reasonable efforts have been made, including documenting its efforts, GDOE-GEIS may, at the conclusion of the 30 day resolution period, request that the hearing officer dismiss the parent's due process complaint.

If GDOE-GEIS fails to hold the resolution meeting within 15 days of receiving notice of the parent's due process complaint or fails to participate in the resolution meeting, the parent may seek the intervention of a hearing officer to begin the due process hearing timeline.

3. Adjustments to the 30-day Resolution Period

The 30 day timeline adopted for the due process hearing by GDOE-GEIS starts the day after one of the following events --

- a. both parties agree in writing to waive the resolution meeting.
- b. after either the mediation or the resolution meeting starts but before the end of the 30 day resolution period, the parties agree in writing that no agreement is possible.
- c. if both parties agree in writing to continue the mediation at the end of the 30 day resolution period, but later, the parent or GDOE-GEIS withdraws from the mediation process.

4. Written Settlement Agreement

If a resolution to the dispute is reached at the resolution meeting, the parties must execute a legally binding agreement that is --

- a. Signed by both the parent and the representative of GDOE-GEIS who has the authority to bind the agency; and
- b. Enforceable in any Guam court of competent jurisdiction or in a district court of the United States or by GDOE-GEIS.

5. Agreement review period

If the parties execute an agreement as a result of a resolution meeting, a party may void the agreement within three (3) business days of the agreement's execution.

D. Impartial Due Process Hearing (§303.443)

Whenever a due process complaint is received consistent with filing a due process complaint, the parents or the early intervention system provider involved in the dispute must have an opportunity for an impartial due process hearing, consistent with *Filing A Due Process Complaint* and *Resolution Process* procedures.

1. Impartial Hearing Officer

At a minimum, a hearing officer must not be --

- a. An employee of GDOE-GEIS or the service provider that is involved in the early intervention services or care of the infant or toddlers; or
- b. A person having a personal or professional interest that conflicts with the person's objectivity in the hearing;
 - Must possess knowledge of, and the ability to understand, the provisions under IDEA Part C, Federal and State regulations pertaining to IDEA Part C, and legal interpretations of IDEA by Federal and State courts;
 - Must possess the knowledge and ability to conduct hearings in accordance with appropriate, standard legal practice; and
 - Must possess the knowledge and ability to render and write decisions in accordance with appropriate, standard legal practice.

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- c. A person who otherwise qualifies to conduct a hearing is not an employee of GDOE-GEIS solely because he or she is paid by GDOE-GEIS to serve as a hearing officer.
- d. GDOE-GEIS must keep a list of those persons who serve as hearing officers. The list must include a statement of the qualifications of each those persons.

2. Subject Matter of Due Process Hearings

The party requesting the due process hearing may not raise issues at the due process hearing that were not raised in the due process complaint, unless the other party agrees otherwise.

3. Timeline for Requesting a Hearing

A parent, GDOE-GEIS, or early intervention system provider shall request an impartial hearing on their due process complaint within two years of the date the parent, GDOE-GEIS, or early intervention system provider knew or should have known about the alleged action that forms the basis of the due process complaint.

4. Exceptions to the Timeline

The timeline described above for Requesting a Hearing does not apply to a parent if the parent was prevented from filing a due process complaint due to -

- a. Specific misrepresentations by GDOE-GEIS or the early intervention system provider that it had resolved the problem forming the basis of the due process complaint; or
- b. GDOE-GEIS's or the early intervention system provider's failure to provide the parent information that was required under IDEA Part C to be provided to the parent.

The GDOE-GEIS is responsible for conducting the due process hearing.

E. Hearing Rights (§303.444)

Any party to a hearing conducted using the Part B Due Process hearing procedures under Section 615 of IDEA, or an appeal has the right to --

- Be accompanied and advised by counsel and by individuals with special knowledge or training with respect to the problems of infants or toddlers with disabilities;

- Present evidence and confront, cross-examine, and compel the attendance of witnesses;
- Prohibit the introduction of any evidence at the hearing that has not been disclosed to that party at least five business days before the hearing;
- Obtain a written or, at the option of the parents, electronic, verbatim record of the hearing; and
- Obtain written or, at the option of the parents, electronic findings of fact and decisions.

1. Additional Disclosure of Information

At least five (5) business days prior to an impartial due process hearing, each party shall disclose to all other parties all evaluations completed by that date, and recommendations based on the offering party's evaluations, that the party intends to use at the hearing.

A hearing officer may bar any party that fails to comply with the five (5) business day requirement from introducing the relevant evaluation or recommendation at the hearing without the consent of the other party.

2. Parental Rights at Hearings

Parents involved in hearings shall --

- a. Be given the right to open the hearing to the public; and
- b. Receive a copy of the record of the hearing and the findings of fact and decisions at no cost.

F. Hearing Decisions (§303.445)

1. Decision of Hearing Officer

A hearing officer's decision on whether an infant or toddler was appropriately identified, evaluated, or placed, or whether the infant or toddler with a disability and his or her family were appropriately provided early intervention services under IDEA Part C, must be based on substantive grounds.

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In matters alleging a procedural violation, a hearing officer may find that a child was not appropriately identified, evaluated, placed, or provided early intervention services under IDEA Part C only if the procedural inadequacies --

- a. Impeded the child's right to identification, evaluation, and placement or provision of early intervention services for the child and the child's family under IDEA Part C;
- b. Significantly impeded the parent's opportunity to participate in the decision-making process regarding identification, evaluation, placement or provision of early intervention services for the child and that child's family under IDEA Part C; or
- c. Caused a deprivation of educational or developmental benefit.

Given the information above, nothing precludes the hearing officer from ordering the GDOE-GEIS or the service provider to comply with procedural requirements under §§303.400 through 303.449.

2. Construction clause

Nothing in the provisions described above affects the right of a parent to file an appeal of the due process hearing decision with GDOE-GEIS.

3. Separate Request for a Due Process Hearing

Nothing in the procedural safeguards precludes a parent from filing a separate due process complaint on an issue separate from a due process complaint already filed.

4. Findings and Decision to General Public

GDOE-GEIS, after deleting any personally identifiable information, must make the finding and decisions available to the public.

G. Finality of Decision; Appeal; Impartial Review (§303.446)

1. Finality of Hearing Decision

A decision made in a due process complaint hearing is final, except that any party involved in the hearing may appeal the decision by bringing a civil action as described in the *Civil Action* section.

2. Findings of Fact and Decision to the General Public

GDOE-GEIS, after deleting any personally identifiable information, must make the findings of fact and decisions available either written or electronically to the general public.

H. Timelines and Convenience of Hearings §303.447)

GDOE-GEIS shall ensure that not later than 30-days (consistent with GDOE-GEIS written policies and procedures adopted in this section) after the expiration of the 30-day period for resolution meetings or, as described under the sub-heading *Adjustments to 30-day Resolution Period* --

1. A final decision is reached in the hearing; and
2. A copy of the decision is mailed to each of the parties.

A hearing or reviewing officer may grant specific extensions of time beyond the 30-day period described above at the request of either party.

Each hearing involving oral arguments shall be conducted at a time and place that is reasonably convenient to the parents and child involved.

I. Civil Action (§303.448)

Any party aggrieved by the findings and decision in the due process hearing has the right to bring a civil action with respect to the due process complaint. The action may be brought in any State court of competent jurisdiction or in a district court of the United States without regard to the amount in controversy.

1. Time Limitation

The party bringing the action has 90 days from the date of the decision of the hearing officer, or file a civil action.

2. Additional Requirements

In any Civil Action under IDEA Part C, the court --

- a. Receives the records of the administrative proceedings;
- b. Hears additional evidence at the request of a party; and
- c. Basing its decision on the preponderance of the evidence, grants the relief that the court determines to be appropriate.

3. Jurisdiction of District Courts

The district courts of the United States have jurisdiction of actions brought under Section 615 of IDEA without regard to the amount in controversy.

4. Rule of Construction

The GDOE is responsible for convening due process hearings. Guam has a “one-tier” due process system. An appeal from a due process hearing decision is filed directly with a court.

Nothing in IDEA Part C restricts or limits the rights, procedures, and remedies available under the Constitution, the Americans with Disabilities Act of 1990, Title V of the Rehabilitation Act of 1973, or other Federal laws protecting the rights of children with disabilities, except that before the filing of a civil action under these laws seeking relief that is also available under section 615 of IDEA, the due process procedures described above must be exhausted to the same extent as would be required had the action been brought under section 615 of IDEA.

J. State Enforcement Mechanisms (§303.449)

Notwithstanding §§303.431(b)(6) and 303.442(d)(2), which provide for judicial enforcement of a written agreement reached as a result of a mediation or resolution meeting, there is nothing in IDEA Part C that would prevent Guam from using other mechanisms to seek enforcement of that agreement, provided that use of those mechanisms is not mandatory and does not delay or deny a party the right to seek enforcement of the written agreement in a State court of competent jurisdiction or in a district court of the United States.

Progressive Disciplinary Action (under Guam DOE personnel rules and regulations): include verbal counseling; memorandum of warning; memorandum of reprimand; and recommendation for adverse action. When the GDOE-GEIS fails to correct noncompliance within the one year timeline, progressive disciplinary action is initiated.

DATA COLLECTION (§303.124)

Guam has a system for compiling and reporting timely and accurate data that meets the requirements in Part C of IDEA. This system includes -- A description of the process that Guam uses to compile data on infants or toddlers with disabilities receiving early intervention services under Part C of IDEA for reporting the data required by the Secretary under sections 616 and 618 of IDEA and §§303.700 through 303.707 and 303.720 through 303.724.

616 State Performance Plan (SPP) and Data Collections §303.701

- Guam shall collect valid and reliable information as needed to report annually to the Secretary on indicators established by the Secretary for the State Performance Plans under. (§303.701(c)(1)); (§303.702(b)(2))
- To collect data on specific indicators through Guam’s monitoring and report data of those indicator for the EIS program annually over the six-year period of the State performance plan. (§303.701(c)(2))
- Nothing in IDEA Part C or these regulations may be construed to authorize the development of nationwide database of personally identifiable information on individuals involved in studies or other collections of data under the Act. (§303.701(c)(3))

A. 618 Data Requirements §303.720

Guam DOE shall annually report to the Secretary and to the public on the information by section 618 of the Act at times specific by the Secretary. In addition, Guam DOE shall submit the report to the Secretary in a manner prescribed by the Secretary.

B. 618 Annual Report of Children Served §303.721

Guam DOE shall count and report the number of infants and toddlers receiving early intervention services on any date between October 1 and December 1 of each year. The report must include --

1. The number and percentage of infants and toddlers with disabilities, by race, gender, and ethnicity, who are receiving early intervention services. (§303.721(a)(1))
2. The number and percentage of infants and toddlers with disabilities, by race, gender, and ethnicity, who, from birth through age 2, stopped receiving early intervention services because of program completion or for other reasons. (§303.721(a)(2))



3. The number and percentage of infants and toddlers, by race, and ethnicity, who are at-risk of having substantial developmental delays (as defined in section 632), and who are receiving early intervention services under IDEA Part C. (§303.721(b))
4. The number of due process complaints filed under section 615 of IDEA, the number of hearings conducted and the number of mediations held, and the number of settlement agreements reached through such mediations. (§303.721(c))

C. 618 Data Reporting (§303.722)

1. The data described in section 618(a) of IDEA and in §303.721 shall be publicly reported by Guam in a manner that does not result in disclosure of data identifiable to individual children.
2. The Secretary may permit States and outlying areas to obtain data in section 618(a) of IDEA through sampling. However, due to the small number of children served on Guam, Guam DOE will continue to report actual data.

D. 618 Annual Report of Children Served--Certification (§303.723)

Guam DOE includes in its report a certification signed by an authorized official of the Guam DOE that the information provided under *Data Reporting* (§303.721) is an accurate and unduplicated count of infants and toddlers with disabilities receiving early intervention services.

E. 618 Annual Report of Children Served--Other Responsibilities of the Lead Agency (§303.724)

In addition to meeting the requirements of §§303.721 through 303.723, Guam DOE conducts its own child count or uses EIS providers to complete its child count. If the Guam DOE uses EIS providers to complete its child count, then the Guam DOE shall --

1. Establish procedures to be used by EIS providers in counting the number of children with disabilities receiving early intervention services; (§303.724(a))
2. Establish dates by which those EIS providers must report to Guam DOE to ensure that the Guam complies in a manner prescribed by the Secretary; (§303.721(a)) and (§303.724(b))
3. Obtain certification from each EIS provider that an unduplicated and accurate count has been made; (§303.724(c))

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4. Aggregate the data from the count obtained from each EIS provider and prepare the report required under the *Annual Report of Children Served*, in *Data Reporting*, and *Annual Report of Children Served* (§§303.721 through 303.723); (§303.724(d)) and
5. Ensure that documentation is maintained to enable the State and the Secretary to audit the accuracy of the count. (§303.724(e))

STATE INTERAGENCY COORDINATING COUNCIL (§303.125)

Prior to September 1986, the Guam Interagency Coordinating Council (GICC) was formed under the Guam State Plan. With the implementation of P.L. 105-17, nineteen (19) members are appointed by the Governor to meet the requirement under this Act. The Governor ensures that the membership of the Council reasonably represents the population of the Territory of Guam.

The Governor shall designate a member of the Council to serve as the chairperson of the Council or require the Council to do so. Any member of the Council who is a representative of the Lead Agency may not serve as the chairperson of the Council.

A. Composition of the Council (§303.601)

1. The members Council is composed of the following:
 - a. Parents: At least 20% of the members shall be parents, including minority parents, of infants and toddlers with disabilities or children with a disability aged 12 years or younger with all have knowledge of/and or experience with programs for infants and toddlers with disabilities. Not less than 1 member shall be a parent of an infant or toddler with a disability or a child with a disability aged six (6) years or younger. §303.601(a)(1)(i-ii)
 - b. Service Providers: At least 20% of members shall be public or private providers of early intervention services. §303.601(a)(1)(2)
 - c. State Legislature: At least one member must be from the State legislature. §303.601(a)(3)
 - d. Personnel Preparation: At least one member shall be involved in personnel preparation. §303.601(a)(4)
 - e. Early Intervention Services: At least one member shall be from each of the State agencies involved in the provision of, or payment for, early intervention services to infants and toddlers with disabilities and their families and have sufficient authority to engage in policy planning and implementation on behalf of these agencies. §303.601(a)(5)(i-ii)
 - f. Preschool services: At least one member shall be from the State Education Agency (SEA) responsible for preschool services to children with disabilities and have sufficient authority to engage in policy planning and implementation on behalf of the SEA. §303.601(a)(6)(i-ii)

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- g. State Medicaid Agency: At least one member shall be from the agency responsible for the State Medicaid and CHIP program. §303.601(a)(7)
 - h. Head Start: At least one member shall be from the Head Start agency. §303.601(a)(8)
 - i. Child Care Agency: At least one member shall be from a State agency responsible for child care; standards and regulations. §303.601(a)(9)
 - j. Health Insurance: At least one member shall be from the agency responsible for the State regulation of private health insurance. §303.601(a)(10)
 - k. Office of the Coordinator of Education of Homeless children and youth: At least one member shall be a representative designated by the Office of Coordination of Education of Homeless Children and Youth. §303.601(a)(11)
 - l. State Foster Care: At least one member shall be a representative from the State child welfare agency responsible for foster care. §303.601(a)(12)
 - m. Mental Health Agency: At least one member shall be a representative from the State agency responsible for children’s mental health. §303.601(a)(13)
- 2. The Governor may appoint one member to represent more than one program or agency listed above. §303.601(b)
 - 3. Other members: The Council may include other members selected by the Governor. §303.601(c)
 - 4. No member of the Council may cast a vote on any matter that would provide direct financial benefit to that member or otherwise give the appearance of a conflict of interest. §303.601(d)

B. Meetings (§303.602)

- 1. The Council shall meet, at a minimum, on a quarterly basis, and in such places as the council determines necessary. §303.602(a)
- 2. The meetings shall--
 - a. be publicly announced sufficiently in advance of the dates they are to be held to ensure that all interested parties have an opportunity to attend; 303.602(b)(1)



- b. to the extent appropriate be open and accessible to general public; 303.602(b)(2)
- c. as needed, provide for interpreters for persons who are deaf and other necessary services for Council members and participants. The Council may use funds under IDEA Part C to pay for these services. (303.602(b)(3))

C. Use of Funds by the Council (§303.603)

- 1. Subject to the approval of the Governor, the Council may use funds under IDEA Part C:
 - a. to conduct hearings and forums; 303.603(a)(1)
 - b. to reimburse members of the Council for reasonable and necessary expenses for attending Council meetings and performing Council duties (including child care for parent representatives); 303.603(a)(2)
 - c. to pay compensation to a member of the Council if the member is not employed or must forfeit wages from other employment when performing official Council business; 303.603(a)(3)
 - d. to hire staff; 303.603(a)(4)
 - e. to obtain the services of professional, technical, and clerical personnel, as may be necessary to carry out the performance of its functions under IDEA Part C. 303.603(a)(5)

Council members shall serve without compensation from funds available under IDEA Part C, except as allowed above subject to the approval of the Governor. 303.603(b)

D. Functions of the Council (§303.604)

- 1. The Council shall advise and assist the Lead Agency in the performance of its responsibilities (section 635(a)(1) of the Act --
 - a. identification of sources of fiscal and other support for services for early intervention services programs under IDEA Part C; 303.604(a)(1)
 - b. assignment of financial responsibility to the appropriate agency; 303.604(a)(2)

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- c. promotion of methods (including use of intra-agency and interagency agreements) for intra-agency and interagency collaboration regarding child find system (§303.115 and 303.302); State monitoring and enforcement (§303.120 and 303.700 through 303.708), financial responsibility; provision of early intervention services under §303.203 and 303.511; and transition under §303.209). 303.604(a)(3)
2. The Council shall advise and assist the Lead Agency in the preparation of applications under IDEA Part C, and amendments of the application. 303.604(a)(4)
3. The Council shall advise and assist the Guam DOE and the lead agency regarding the transition of eligible toddlers with disabilities to preschool or other appropriate services. 303.604(b)
4. The Council will prepare and submit an annual report to the Governor and to the Secretary on the status of early intervention service programs for infants and toddlers with disabilities and their families eligible under the Early Intervention System. Report will be submitted by the date the Secretary establishes. Each annual report must contain the information required by the Secretary for the year for which the report is made. 303.604(c)

E. Authorized Activities by the Council (§303.605)

The Council shall carry out the following activities:

1. Advise and assists the Guam DOE (which serves as both the Lead Agency for IDEA Part C and the State Educational Agency) regarding the provision of appropriate services for children ages birth through age five. 303.605(a)
2. Advise appropriate agencies in the Guam with respect to the integration of services for infants and toddlers with disabilities and at-risk infants and toddlers and their families, regardless of whether at-risk infants and toddlers are eligible for early intervention services in Guam. 303.605(b)

- F. Guam has in place Public Law 31-62 that established the Guam Early Learning Council, also known as the State Advisory Council, for Guam’s Early Childhood Comprehensive System. The purpose of the Early Learning Council is to carry out the responsibilities mandated and outlined in the national legislation, “Improving Head Start for School, Readiness Act of 2007.” GEIS will continue to coordinate and collaborate with the State Advisory Council on Early Childhood Education and Care for children, as described in the Head Start Act if applicable, and other State interagency early learning initiatives, as appropriate. (§§303.210 and 303.605(c))**

EARLY INTERVENION SERVICES IN NATURAL ENVIRONMENTS (§303.126)

GEIS has in place policies and procedures to ensure that, consistent with 34 CFR §303.13(a)(8), that early intervention services are provided to the maximum extent appropriate, in natural environments, as defined in §303.26. In addition, the content of the IFSP shall include a statement that each early intervention service is provided in the natural environment for the child or service to the extent appropriate. (§303.344(d)(1)(ii)(A)) In the event the early intervention service cannot be provided in the natural environment, any justification for not providing a particular early intervention service in the natural environment for that infant or toddler with a disability must be (§303.344(d)(1)(ii)(B)(1)-(3) --

- Made by the IFSP Team (which includes the parent and other team members);
- Consistent with the provisions in §§303.13(a)(8), 303.26, and 303.126; and
- Based on the child’s outcomes that are identified by the IFSP Team. (§303.344(c))

A. Early Intervention Services in Natural Environments §303.126

Early intervention services for infants and toddlers with disabilities are provided --

1. To the maximum extend appropriate in natural environments; and
2. In setting other than the natural environment that are most appropriate as determined by the parent and the IFSP Team, on when early intervention service cannot be provided achieved satisfactorily in natural environments.

B. Definition of Natural Environment §303.26

Natural environment means settings that are natural or typical for a same aged infant or toddler without a disability, may include the home or community settings, and shall be consistent with the provision of early intervention services in the natural environment. (§303.126)

SUBPART C

STATE APPLICATION & ASSURANCES

POLICIES AND PROCEDURES RELATED TO FINANCIAL MATTERS

Guam is responsible for establishing policies related to how services to eligible children and their families will be paid for under Guam's Part C Early Intervention System. In addition, fees will not be charged for early intervention services provided to an infant or toddler with a disability under IDEA Part C. In the event that parents of an eligible child are determined unable to pay for services, the services to the child or the child's family will not be denied.

In January 2012, the Governor of signed Public Law PL31-158 to amend Chapter 9, Division 2 of Title 17, Guam Code Annotated, Relative to Education and Training Facilities and Opportunities for Individuals with Disabilities. (This Law requires the Department of Education to make available free appropriate public education to all children three (3) through twenty-one (21), and early intervention services for eligible infants and toddlers ages birth through 2 at no cost to the family).

A. System of Payments Related to Financial Matters

Early Intervention services are required to be provided at no cost, except, where federal law provides for a system of payment by families (34 CFR §303.13(a)(3)).

1. GEIS shall carry out the following required functions at public expense and for which no fees will be charged to parents (34 CFR §303.521(b)).
 - a. Implementing the public awareness program, child find requirements and referral procedures.
 - b. Evaluation and assessment in accordance with screening procedures (34 CFR §303.320) and the functions related to evaluation and assessment for early intervention services. (34 CFR §303.13(b))
 - c. Service Coordination Services as indicated in 34CFR §303.13(b).
 - d. Administrative and coordinated activities related to --
 - The development, review, and evaluation of IFSPs; and interim IFSPs, in agreement with procedures related to resolution process, impartial due process hearing, hearing rights, and hearing decisions (34 CFR §303.442 through §303.445), and
 - Implementation of the procedural safeguards described in IDEA subpart E (34 CFR §303.400) and other components of the statewide system of early intervention services.

B. Program Cost

Early Intervention services identified in the child’s IFSP is provided at no cost to eligible families, except when services are subject to system of payment. GEIS may use, with parental consent, private insurance or public benefits to pay for any IDEA Part C services provided by private providers or subcontractors due to the lack of available personnel with specific area of expertise employed within GEIS program. These early intervention services include:

- speech-language pathology;
- audiology services;
- occupational therapy;
- physical therapy;
- psychological services;
- medical services only for diagnostic or evaluation purposes to determine a child’s developmental status and need to early intervention services;
- nursing services;
- health services necessary to enable the infant or toddler to benefit from the other early intervention services;
- vision services;
- assistive technology devices and services;
- nutrition services

Private providers and subcontractors will bill the family’s insurance for any such service that is required, as indicated in the child’s IFSP, and submit an invoice for remaining balances to GEIS. GEIS will then reimburse the remaining balance charged for any costs not covered by the family’s private or public insurance.

GEIS will ensure that if private benefits are accessed, families will not be charged directly for copayments or deductibles required by insurance. (34 CFR§300.154(d)(2)(ii)). GEIS will reimburse or arrange payment for, any co-payments, deductibles, and/or registration fees to ensure there is no financial cost to the family. GEIS may use IDEA Part C or other funds to pay for those costs. (34 CFR §303.521(a)(6)).

GEIS will provide parents with the following procedural safeguards options:

- Providing parents with a copy of the State’s system of payments policies when obtaining consent for provision of early intervention services under 34 CFR §303.420(a)(3); or
- Including this information with the notice provided to parents under 343 CFR §303.421, §303.521(e).



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In order to promote the coordination, timely and appropriate delivery of services, the financial responsibility of DOE for paying for early intervention services, consistent with GEIS requirements, and are reflected in the interagency agreements.

Families with public or private insurance will not be charged disproportionately more than families who do not have public or private insurance. (34 CFR §303.521(a)(4)(iv)).

Families will not be charged any more than the actual cost of any early intervention service (factoring in any amount received from other sources for payment for that service). (34 CFR §303.521(a)(4)(iii)).

1. Use of Public Insurance:

Prior to using the child's or parent's public insurance to pay for IDEA Part C services, GEIS shall provide written notification to the child's parents. Written notification shall include the following. (34 CFR §303.520(a)(3)):

- A statement that parental consent shall be obtained to disclose or use a child's identifiable information before GEIS discloses for billing purposes to the States public agency responsible for the administration of Guam's public insurance program. (34 CFR §303.520(a)(3)(i))
 - A statement of the no-cost protection provisions and that if parents does not provide consent, GEIS must still make available those IDEA Part C services on the IFSP for which the parent has provided consent. (34 CFR §303.520(a)(3)(ii))
 - A statement that the parents have the right to withdraw their consent to disclose or use of personally identifiable information to the public benefits or insurance program at any time. (34 CFR §303.520(a)(3)(iii))
 - A statement of the general categories of cost that the parent may incur as a result of participating in a public benefits or insurance programs (such as co-payments or deductibles or the required use of private insurance as the primary insurance. (34 CFR §303.520(a)(3)(iv))
- a. Parents will be asked to provide consent when required in order for the GEIS to disclose personally identifiable information and access public insurance. Refusal of a parent to provide consent will not result in the denial of any service under IDEA Part C.

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- b. After obtaining parental consent, participating agencies, private providers and subcontractors will bill the family's insurance and submit an invoice for remaining balances to DOE. GEIS will then reimburse the remaining balance charged for any costs not covered by the family's public or private insurance.
- c. The family, in conjunction with GEIS, and in cooperation with their public insurance provider, will verify insurance benefits. GEIS shall contact the insurance carrier for verification of benefits and submit verification in the form of a denied claim or statement of non-coverage under the insurance plan to GEIS as part of the billing process. If the services are not covered, one or more of the following items must be obtained by the GEIS as documentation:
- Applicable pages from the plan;
 - Written response or denial from the insurance company;
 - Or, as a last resort, documented conversation(s) with the insurance company, with the name(s) of contact, phone number(s) and date(s) of contact, by Program Coordinator, service provider, and/or service coordinator.
- d. GEIS shall not require parents to sign up for, or enrolled in a public benefits or insurance program as a condition for their child to receive early intervention services.
- e. GEIS will ensure that, if public benefits are accessed, families will not be charged directly for co-payments, deductibles. (34 CFR§300.154(d)(2)(ii)). GEIS will pay, or arrange payment for, any co-payments, deductibles, and/or registration fees to ensure there is no financial cost to the family. GEIS may use IDEA Part C or other funds to pay for those costs. (34 CFR §303.521(a)(6)).
- f. GEIS must obtain parental consent to use a child's or parent's public benefits or insurance if the child or parent is already enrolled in such a program and use of such benefits or insurance to pay for GEIS services would:
- Decrease available life time coverage or any other insured benefit for the child or parent.
 - Result in the child's parents paying for services that would otherwise have been paid for by the public benefits or insurance program.

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- Result in any increase in premiums or cancellation of public benefits or insurance for the child or parents
 - Risk the loss of eligibility for the child or the child's parents for home and community-based waivers based on total health related cost.
- g. GEIS, in ensuring payment for early intervention services, in no way relieves an insurer or similar third party from an otherwise valid obligation to provide or to pay for early intervention services for an eligible infant or toddler.
2. Use of Private Benefits or Private Insurance:
- a. Each time the GEIS proposes to access the parents' private insurance proceeds, GEIS must (1) Obtain parental consent; and (2) Inform the parents that their refusal to permit the GEIS to access their private insurance does not relieve the GEIS of its responsibility to ensure that all required services are provided at no cost to the parents.
 - b. The consent requirements for use of private insurance include the use of private insurance when such use is a prerequisite for the use of public benefits or insurance. (34 CFR §303.520(b)(1)(i)).
 - c. Parental consent must be obtained for the following:
 - When GEIS seeks to use the parent's insurance to pay for the initial provision of the initial services in the IFSP; and
 - Each time consent for services required due to an increase in the provision of services in the child's IFSP (frequency, length, duration or intensity).
 - d. After obtaining parental consent as, participating agencies, private providers and subcontractors will bill the family's insurance and submit an invoice for remaining balances to GEIS. GEIS will then reimburse the remaining balance charged for any costs not covered by the family's private insurance.
 - e. The family, in conjunction with GEIS, and in cooperation with their insurance company and the service provider, will verify insurance benefits. The provider shall contact the insurance carrier for verification of benefits and submit verification in the form of a denied claim or statement of non-coverage under the insurance plan to the GEIS as part of the billing process.

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If the service is not covered, one or more of the following items must be obtained by GEIS as documentation:

- Applicable pages from the plan.
 - Written response or denial from the insurance company; or
 - As a last resort, notes from conversation(s) with the insurance company, with the name(s) of contact, phone number (s) and date (s) of contact, by Program Coordinator, service provider, and/or service coordinator.
- f. GEIS will not require parents to use insurance proceeds to pay for mandated IDEA Part C services if it is determined that such use would put the family at material risk of losing their coverage, any decrease in available lifetime coverage, increase in premiums, the discontinuation of the policy, or risk of loss of eligibility for home/community-based waivers.
- g. The GEIS will ensure that if private insurance is accessed, families will not be charged directly for co-payments, deductibles, and/or registration fees. (34 CFR §300.154(d)(2)(ii)). GEIS will pay, or arrange payment for, any co-payments, deductibles, and/or registration fees to ensure there is no financial cost to the family. GEIS may use IDEA Part C or other funds to pay for those costs. (34 CFR §303.521(a)(6)).
- h. GEIS, in ensuring payment for early intervention services, in no way relieves an insurer or similar third party from an otherwise valid obligation to provide or to pay for early intervention services for an eligible infant or toddler.

C. Identification and Coordination of Resources

Guam is responsible for the identification and coordination of all available resources for early intervention services including those from Federal, State, and private sources to ensure the timely and appropriate delivery of early intervention services; and updating the information on the funding sources in this section, if a legislative or policy change is made under any of those sources.

1. The Federal funding sources of this section include --
 - a. Title V of the Social Security Act (relating to Maternal and Child Health)
 - b. Title XIX of the Social Security Act (relating to the general Medicaid Program, and EPSDT);

- c. The Head Start Act;
 - d. Parts B and C of the IDEA;
 - e. Subpart 2 of Part D of Chapter 1 of Title I of the Elementary and Secondary
 - f. Education Act of 1965, as amended;
 - g. The Developmentally Disabled Assistance and Bill of Rights Act (Pub. L. 94-
 - h. 103);
 - i. The Americans with Disabilities Act, and
 - j. Other Federal programs.
2. Guam resources include:
- a. Government of Guam local funds which are appropriated to the Department of
 - b. Education (DOE) and other government agencies;
 - c. Health insurance companies which pay for services such as occupational and physical therapy;
 - d. Guam Advocacy Office (assistance with case management and child find activities)

D. Delivery of Services in a Timely Manner

Guam has developed procedures to ensure that services are provided to eligible children and their families in a timely manner, pending the resolution of disputes among public agencies or service providers. (refer to section on Procedural Safeguards)

E. Reimbursement Procedures

Guam assures that conditions, terms, and procedures have been developed for securing the timely reimbursement of funds used under IDEA Part C.

1. If necessary to prevent a delay in the timely provision of services to an eligible child or the child's family, funds under IDEA Part C may be used to pay the provider of services, pending reimbursement from the agency or entity that has ultimate responsibility for the payment. Payments may be made for:

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- a. Early intervention services, and/or
 - b. Eligible health services, i.e. services necessary to enable a child to benefit from the other early intervention services under IDEA Part C during the time that the child is receiving the other early intervention services. The term includes:
 - Such services as clean intermittent catheterization, tracheotomy care, tube feeding, the changing of dressings or osteotomy collection bags, and other health services; and
 - Consultation by physicians with other service providers concerning the special health care needs of eligible children that will need to be addressed in the course of providing other early intervention services.
 - Other functions and services authorized under IDEA Part C, including child find, and evaluation and assessment.
2. In the event that the services designated on the IFSP cannot be implemented within the time line stated in the IFSP because of an agency's inability to provide payment, the Service Coordinator will submit documentation of: the service needed, details of action taken to obtain that service, arrangement of payment, and the reason given by the agency for its financial inability to provide that service. DOE shall authorize payment for the services from GEIS or other available funds so the services can be provided in a timely manner; and will then bill the assigned agency for reimbursement.
 3. DOE is expected to reimburse the payee within 90 days from date of billing.
 4. If the DOE disputes the charge, procedures described in the Interagency Agreements and Resolution of Disputes will be exercised.

TRANSITION TO PRESCHOOL AND OTHER PROGRAMS (§303.209)

The Department of Education (DOE) is the State Education Agency, and Lead Education Agency responsible for the administration of IDEA Part C also referred to as the Guam Early Intervention System of Services (GEIS).

Guam assures that policies and procedures have been developed to ensure smooth and effective transitions from receiving early intervention services to preschool, existing programs, or other appropriate services for infants and toddlers with disabilities under age 3 and their families.

A. Description and Purpose (§303.209)

Transition refers to the process that young children and their families go through as they move among various early childhood programs. For young children with special needs, the transition may occur from home to hospital, early intervention services to an early childhood preschool/child care setting, or from an early childhood preschool/child care setting to kindergarten. The GEIS Service Coordinators are responsible for the transition planning process that is part of the child's Individualized Family Service Plan (IFSP). In addition, the service coordinators will ensure that parents receive sufficient information regarding the procedural safeguards under the IDEA, including the different service options.

Research has found that several transition practices such as establishing positive teacher-child relationships and coordinating transition supports between sending and receiving programs were associated with better adjustments and increased learning in the new setting for young children with and without developmental delays.

B. LEA Notification (34 CFR §303.209(b))

DOE is a unitary system and functions as both the State Education Agency (SEA) and the Lead Education Agency (LEA). Therefore, a single notification will occur for all toddlers transitioning from Part C (GEIS) to Part B (Early Childhood Special Education Preschool Program) or other appropriate Early Childhood settings.

GEIS shall notify the Early Childhood Special Education (ECSE) Preschool program not fewer than 90 days before the third birthday of a toddler who is receiving GEIS services and who is potentially eligible for preschool services under Part B of the Act. §303.209(b)(1)(i).

1. If appropriate, GEIS shall adhere to the following transition notification timeline:
 - a. If GEIS determines the toddler is eligible for early intervention services more than 45 days but less than 90 days before the



toddler's third birthday and if the toddler may be eligible for services under Part B of the Act, GEIS notifies the ECSE Preschool Program that a toddler, on his or her third birthday, will reach the age of eligibility for services (§ 303.209 (b)(1)(ii)), or

- b. If the toddler is referred to GEIS fewer than 45 days before the toddler's third birthday and that toddler may be eligible for Part B services of the Act, GEIS will refer the toddler to the ECSE Preschool Program with parental consent. GEIS under these circumstances is not required to conduct an evaluation, assessment, or an initial IFSP meeting. (§ 303.209(b)(1)(iii)).

2. LEA Notification Process:

GEIS will notify the ECSE Preschool Program that the toddler, on his/her third birthday, will reach the age of eligibility for services under Part B of the Act.

- a. If GEIS determines that the toddler is potentially eligible for early intervention services, and may be eligible for services under Part B of the Act more than 90 days before that toddler's third birthday, the Service Coordinator will submit a written Parent and Committee Meeting Notification and LEA Notification to the ECSE Preschool Program. The LEA Notification will contain child find information, including: the parent's name, the child's name and date of birth, address, telephone numbers for the parents, and the name and contact information of the GEIS Service Coordinator.
- b. If GEIS determines that the toddler is eligible for early intervention services more than 45 days but less than 90 days before that toddler's third birthday, the Service Coordinator must provide the LEA Notification as soon as possible after determining the toddler's eligibility and notify the ECSE Preschool Program that a toddler who is receiving GEIS services is potentially eligible for services under Part B of the Act.
- c. If the toddler is referred to GEIS less than 45 days before the toddler's third birthday and may be eligible for Part B services under the Act, GEIS, with parental consent required under §303.414, will refer the toddler to the Part B Child Find. GEIS under these circumstances is not required to conduct an evaluation, assessment, or an initial IFSP meeting (§303.209(b)(1)(iii)).

*An **LEA Notification to Part B** is needed for children turning three years of age that may be potentially Part B eligible. The LEA Notification is not*

needed if the IFSP team determines that the child is NOT potentially eligible for Part B services at age 3 years of age.

C. Transition Conference (§303.209(e))

With parental consent, GEIS shall conduct a transition conference for a toddler with a disability who is receiving GEIS services and will be exiting the program. A transition conference may include representatives from health services and education regarding early childhood services, special education, Head Start, child care, and other appropriate settings / programs.

The parents shall be provided information of any services the toddler may receive under the ECSE Preschool Program and other information on community programs including family/parent support groups and parent workshops. GEIS Service Coordinators shall provide families with information on the availability of programs and services for which the child may be eligible by completing forms and applications, compiling records, obtaining transportation, and/or obtaining necessary adaptive and assistive devices/equipment.

1. Transition Conference Process

If the toddler with a disability is eligible potentially for Part B services, GEIS, with approval of the parent(s) of the toddler, convenes a conference with GEIS, the family, and the ECSE Preschool Program not fewer than 90 days before the toddler's third birthday, and, at the discretion of all parties, not more than 9 months before the toddler's third birthday.

The ECSE Preschool Program will participate in those transition conferences arranged by GEIS for toddlers with disabilities who may be eligible for preschool services under Part B. (§300.124(c))

If a toddler with a disability is not potentially eligible for Part B services under the Act, GEIS, with the approval of the parent(s), will make reasonable efforts to hold a conference with GEIS, family, and providers of other appropriate services that the toddler may receive.

At the discretion of the parents, a Transition Conference may be held as part of the IFSP meeting to develop a transition plan and is allowed with consideration regarding accessibility and convenience of the meeting. (§303.209(e), §303.342(d) and §303.343)

D. Transition Plan (§§303.209(d)(1), 303.209(d)(2)(i) - (ii))

All toddlers under GEIS shall have a written transition plan developed as part of their IFSP and not a separate document (§303.209(d)). The IFSP must include the steps and services to be taken to support the smooth transition of the child from GEIS services to ECSE Preschool Program, or other appropriate services.

At the IFSP meeting, the parents and IFSP team will develop a written transition plan that outlines the appropriate steps and services to be taken to support the smooth transition of the toddler with a disability from GEIS services to other placement options within the community or services under Part B of the Act, to the extent that those services are appropriate. GEIS will review the program options for the toddler for the period from the toddler's third birthday through the remainder of the school year. (§303.209(d))

As part of the IFSP, a written transition plan shall be established not fewer than 90 days, and, at the discretion of all parties, not more than to nine months before the toddler's third birthday.

As part of the transition plan in the IFSP, specific activities are identified with timelines and information is shared among the family, sending agency and receiving agency. These activities, identified in the plan, support the strengths and resources of the family and program and should be viewed as a living, working document that changes to reflect the interests and needs of the child, family, and professionals involved.

1. Transition Plan Steps & Services
 - a. Discussion with and training of the parent(s) regarding future placements and other matters related to the child's transition.
 - b. Discussion with the parent(s) about possible programs to include other community resources, as appropriate. Written authorization from the parent(s) to make any referrals, other than to make the child known to the ECSE Preschool Program, is required.
 - c. Evaluation, as appropriate and needed, to determine future needs and eligibility for other programs.
 - d. Preparation of the child for changes in service delivery, including steps to help the child adjust to and function in a new setting, if appropriate. These activities may include but are not limited to parent training on the IEP Process and the Procedural Safeguards under Part C and Part B.
 - e. Documentation in the IFSP of steps to support the transition of the child from the GEIS, including the addition of appropriate outcomes,

- activities, timelines, etc.
- f. With written parental authorization, the transmission of information about the child to the new provider to ensure continuity of services, including most recent evaluation and assessment information and a copy of the current IFSP. New providers may include DOE or other community programs offering services to young children.
 - g. Discussion of the Procedural Safeguards.

Children Potentially Eligible for Part B Preschool:

Eligibility Categories for Part B Preschool Program: A child, aged three through 5 years of age who fall within one of the following special education disability categories: Autism, Deaf-blindness, Deafness, Developmentally Delayed, Emotional Disability, Hearing Impairment, Mental Retardation, Multiple Disability, Orthopedic Impairment, Other Health Impairment, Specific Learning Disability, Speech or Language Impairment, Traumatic Brain Injury, or Visual Impairment. **AND, because of that disability, the child needs special education and related services.**

In order to ensure a smooth and effective transition for children with disabilities who received GEIS services and are eligible for ECSE Preschool services, DOE will ensure that an IEP has been developed and is being implemented by the child's third birthday. (§§300.101(b), 300.124(b))

At the request of the parent, an invitation to the initial IEP meeting will be sent to the GEIS Service Coordinator, or other GEIS Service Providers, if the child previously received IDEA Part C services. (§303.321(f))

For all children who transition from GEIS services to the ECSE Preschool Program, the IEP team must consider an IFSP that contains the IFSP content (including the natural environments statement) described in IDEA section 636(d) and its implementing regulation when developing the initial IEP. §300.323(b)

E. Intra-Agency Dispute Resolution (§303.511 (c))

Please refer to Subpart B, §303.120 (page 53) of the State Plan regarding Lead Agency Role in Supervision, Monitoring, Funding, Interagency Coordination, and Other Responsibilities.

PUBLIC PARTICIPATION POLICIES AND PROCEDURES (§303.208)

Guam assures that prior to the adoption of any new policy and procedure (including any revision to an existing policy or procedure) necessary to meet the requirements of IDEA Part C, at least 60 days prior to submission, GEIS, shall publish in a manner that will ensure circulation throughout the island of Guam opportunity for public comment on the state application for at least 30 days during that period.

GEIS professional staff and members of the Interagency Coordinating Council were actively involved in the development of the Guam's State Plan before its official public notice was posted. GEIS will ensure --

1. Public hearings on the new policies or procedures (including any revisions to an existing policy or procedure) will be held on two occasions at times and places that will be centralized and accessible during the 60-day period.
2. At least 30 days' prior to public hearings are conducted, notice of the hearing will be given to interested parties and will be posted on the Guam DOE website to ensure public participation. In addition, public hearing notices will be advertised in the local newspaper.
3. Service agencies and the general public, including individuals with disabilities and parents of infants and toddlers with or at risk of developmental delays/disabilities, early intervention providers, and members of the Council will be given an opportunity to comment for at least 30 days on the new policies or procedures (including any revisions to existing policy or procedures) needed to comply with IDEA Part C and these regulations.
4. Comments made at Public Hearings will be reviewed by the Lead Agency and Council.
5. Modifications deemed necessary will be made.
6. A summary of public comments, modifications made, and copies of news releases, advertisements and announcements will be kept.

EQUITABLE DISTRIBUTION OF RESOURCES

The island of Guam is approximately 212 square miles excluding reef formations and approximately 30 miles in length. Most of its geographical locations are within 20 miles and within 20-60 minutes from the lead agency. Services to all eligible child and their families in Guam are assured through the existence of a statewide, comprehensive, coordinated, multidisciplinary, interagency system of early intervention services.

GDOE-GEIS is required to establish policies and procedures that will ensure the appropriate provision of early intervention services including providing services to military personnel and their families; infants and toddlers with disabilities who are homeless children and their families; and infants and toddlers with disabilities who are wards of the state.

Guam DOE-GEIS is both a State Education Agency and a Local Agency for the IDEA Part C Program. All persons living on Guam, as described above, have equitable access to, and equitable participation in, the GEIS program as required by section 427 (b) of GEPA; and other information and assurance as the Secretary may reasonably require.

GENERAL EDUCATION PROVISIONS ACT (GEPA)
AND POLICY AND PROCEDURES ENSURING MEANINGFUL INVOLVEMENT
IN PLANNING AND IMPLEMENTATION OF PART C SYSTEM

GDOE-GEIS will ensure equitable access to, and participation in, federally assisted programs for children with special needs, their families, early intervention providers, administrators and other program beneficiaries.

Due to Guam's culturally diverse population and remote geographic location, the barriers that we encounter are related to cultural and linguistically appropriateness and our materials and products translated into a variety of languages.

In order to ensure that program participants are not impeded by educational level, income, culture, gender, race, national origin, color, disability, or age, GDOE-GEIS undertakes the following steps:

- Sign language interpreters and other special assistance are provided as needed for all meetings.
- Products developed by the GDOE-GEIS will be made available and are translated for the most frequently used languages in Guam, and other languages per request.
- Materials will be prepared for meetings are in a variety of formats to meet the needs of persons with disabilities attending.
- All public written information for families must use family-friendly terminology and be written no higher than the 8th grade reading level in the family's native language.
- Efforts to reach families of homeless children will be aligned with current state practices .

GDOE-GEIS will ensure at a parent be fully informed of all information relevant to the activity for which consent is sought, in a parent's native language, unless it clearly is not feasible to do so:

- Native language, when used with respect to an individual who is limited English proficient, means the following: (1) the language normally used by that individual, or, in the case of a child, the language normally used by the parents of the child, unless it clearly is not feasible to do so. (2) In all direct contact with a child (including evaluation of the child), the language normally used by the child in the home or learning environment. For an individual with deafness or blindness, or for an individual with no written language, the mode of communication is that normally used by the individual (such as sign language, Braille, or oral communication).
- IFSP meetings must be conducted in settings and at times that are convenient to families; and in the native language of the family or other mode of communication used by the family, unless it is clearly not feasible to do so.

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- Written prior notice must be written in language understandable to the general public and be provided in the native language of the parents, unless it is clearly not feasible to do so. If the native language or other mode of communication of the parent is not a written language, the service coordinator shall take steps to ensure that the notice is interpreted orally or by other means to the parent in the parent's native language or other mode of communication; the parent understands the notice; and there is written evidence that these notice requirements have been met. If a parent is deaf or blind, or has no written language, the mode of communication must be that normally used by the parent (such as sign language, Braille or oral communication).

GDOE-GEIS have the fiscal and legal obligation for ensuring services is carried out. The GDOE-GEIS assures the implementation of this participation policy and ensures this through the annual applications for Part C funds, annual reports, and the monitoring of compliance at the regional level.