



Infants and Toddlers Eligible to Receive Early ACCESS Early Intervention Services

Infants and toddlers under the age of three years old are eligible to receive Early ACCESS early intervention services when they meet **any one of the three** following criteria:

1. The child has a diagnosed and documented *physical or mental condition* that has a high probability of resulting in developmental delays and includes conditions such as chromosomal abnormalities; genetic or congenital disorders; sensory impairments; inborn errors of metabolism; disorders reflecting disturbance of the development of the nervous system; congenital infections; severe attachment disorders; and disorders secondary to exposure to toxic substances, including fetal alcohol syndrome.

OR

2. The child has a 25% or more delay as measured by appropriate diagnostic instruments and procedures, in one or more of the following developmental areas:
 - cognitive development,
 - physical development including vision and hearing,
 - communication development,
 - social or emotional development, and
 - adaptive development.

OR

3. Informed clinical opinion may be used as an independent basis to establish a child's eligibility under this chapter 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.

How Do We Determine This?

Criteria #1. The child has a diagnosed *physical or mental condition* that has a high probability of resulting in developmental delays.

At the time of referral or within the established 45-day timeline, infants and toddlers with a known *physical or mental* condition (see listing below) are eligible to receive Early ACCESS services. These children may or may not be experiencing a delay in development at the time of referral and evaluation. **Examples of physical and mental conditions** that infants and toddlers may have that have a high probability of later delay include but are NOT limited to conditions such as:

- chromosomal abnormalities;
- genetic or congenital disorders;
- sensory impairments;
- inborn errors of metabolism;
- disorders reflecting disturbance of the development of the nervous system;
- congenital infections;

- severe attachment disorders;
- disorders secondary to exposure to toxic substances, including fetal alcohol syndrome;
- preterm birth less than 32 weeks gestation; or
- *very* low birth weight less than 1500 grams (3 pounds 5 ounces).

Criteria # 2. The child has a 25% or more delay as measured by appropriate diagnostic instruments and procedures in one or more areas of the following developmental areas: cognitive development, physical development including vision and hearing, communication development, social or emotional development, and adaptive development.

For those children who do not have a known physical or mental condition described in Criteria #1 at the time of referral, Iowa uses a 25% delay in ***at least one*** of the developmental areas listed above to establish Early ACCESS eligibility. The delay is established by carrying out multidisciplinary evaluation and assessment activities.

Criteria # 3. Informed Clinical Opinion

The professional judgment (Informed Clinical Opinion) of evaluators becomes a significant factor in the eligibility decision-making process. If results of the evaluation indicate concerns in the child's development, but is not at the 25% delayed level, it may be appropriate to provide early intervention services to the child and family. An eligibility decision would be made when there is expressed parental concern and the evaluators' clinical opinion establishes the child and family could benefit from early intervention services until the time when the parent has no more concerns and delays in development are no longer evident.

For more information on determining eligibility in Early ACCESS see Section 7: Initial Evaluation and Assessment in the *Early ACCESS Procedures Manual*.