Section IV

Requirements Related

to Components

of the Statewide System

A. State Definition of Developmental Delay

1. Policy

A. The State Lead Agency assures that children, birth to three, shall be eligible for early intervention services under the early intervention section of IDEA, if the multidisciplinary team finds any one of the following criteria exists:

1. Developmental Delay: A child shall be eligible if he or she demonstrates a delay of 1.5 standard deviation or 25% of chronological age delay in one or more of the following developmental areas, as measured by appropriate evaluation tests or procedures, and administered by qualified personnel: In the case of hearing and vision, the criteria listed within hearing impairment and vision impairment applies.

   a. Cognitive

   b. Physical (vision, hearing, fine or gross motor)

      (1) Hearing Impairment – a hearing impairment that adversely affects a child's development is:

         (a) Unilateral sensorineural hearing loss and/or permanent conductive hearing loss of 45 dB or greater.

         (b) Bilateral sensorineural hearing loss and or permanent conductive hearing loss, which includes:

            i. Hearing loss of 20 dB or greater, better ear average of the frequencies 500, 1,000, and 2,000 Hz.

            ii. High frequency loss greater than 25 dB at two or more consecutive frequencies or average of three frequencies between 2,000 and 6,000 Hz, in the better ear.

            iii. Low frequency hearing loss greater than 30 dB at 250 and 500 Hz, in the better ear. Or

            iv. Thresholds greater than 25 dB on Auditory Brainstem Response threshold testing in the better ear. Or

         (c) A six-month history of fluctuating conductive hearing loss or chronic middle ear effusion/infection of three months, unresolved past initial evaluation.

      (2) Vision Impairment – infants and toddlers with visual impairment/blindness are:

         (a) Those children who have a visual impairment that adversely affects the child's development, even with correction. Eligibility shall be dependent on documentation of a visual impairment, including one or more of the following conditions:

i. Legal blindness or visual handicap, as they are customarily defined, either in terms of qualifying reduction in visual acuity and/or a qualified reduction in visual fields.

ii. A visual impairment that is progressive in nature and can be expected to lead to blindness within a reasonable period of time.

(b) If a visual acuity or field cannot be determined:

i. The qualified personnel must identify a diagnosis or medical history that indicates a high probability of visual loss that may adversely affect the child's development.

ii. A functional vision evaluation by a qualified professional is necessary to determine eligibility.

(c) Communication

(d) Social or Emotional

(e) Adaptive

2. Diagnosed Physical or Mental Condition: A child shall be eligible if he or she has a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay, including but not limited to:

a. Chromosomal abnormalities associated with mental retardation, such as Down Syndrome.

b. Congenital central nervous system birth defects or syndromes, such as Myelomeningocele, Fetal Alcohol Syndrome; or Cornelia de Lange Syndrome.

c. Deaf, blind, or deaf-blind.

d. Established central nervous system deficits resulting from hypoxia, trauma, or infection.

e. Cerebral Palsy.

f. Health impairments, such as autism, epilepsy, neurological impairment, or other chronic, acute, or degenerative health problems.

g. Orthopedically impaired, which means impairments of the normal function of muscles, joints, or bones due to congenital anomaly, disease, or permanent injury. Or

h. Microcephaly.

Note: Eligible children will also continue to receive the early intervention services based on their eligibility for other existing state programs. These programs include:

(1) DSHS Division of Developmental Disabilities, WAC 275-27-026(6)(c) and (d).

(2) DOH Children with Special Health Care Needs, WAC 2346-710-020.

(3) Public Schools, WAC 392-172-114, 116, 122, 124, 138, 140, 142, and 144.

All children, birth to three, including children at risk for developmental delays, are entitled to participate in the following components, with the consent of their parents(s): Early identification, multidisciplinary evaluation, and determination of eligibility for early intervention services. The state of Washington currently does not provide early intervention services to at risk infant and toddlers.

The early intervention section of IDEA funding shall be used in all cases as the payor of last resort and shall be used to assist the State Lead Agency in assuring that all eligible infants and toddlers and their families receive services.

B. Central Directory

1. Policy

A. The State Lead Agency assures a central directory, which lists public and private resources and experts in early intervention. The directory includes:

1. The nature and scope of the services and assistance available.
2. Contact information, including telephone and/or address of services listed.
3. Research and demonstration projects, which affect early intervention service in the state.
4. Professional and other groups that provide assistance to eligible children and their families, for early intervention services. And
5. Local Lead Family Resources Coordinators for each geographic area of Washington.

B. The State Lead Agency assures that:

1. The general public shall be able to determine the nature and scope of the services and assistance available from each of the sources listed in the directory; and
2. Parents of a child eligible for early intervention services in the state of Washington can contact, by telephone or letter, any of the sources listed in the directory.

2. Procedures

A. The State Lead Agency shall continue to contract for a toll free 1-800 number, for the central directory. The toll free number maintains current information and is updated on an ongoing basis. The toll free number is accessible to the general public, distributed statewide, has multi-state access, and includes interpretive services.

B. Copies of the directory information are available throughout the state, including rural areas.

C. Copies are accessible to persons with disabilities.

D. Information about the directory is distributed through the statewide public awareness program.

C. Timetables for Serving all Eligible Children

1. Policy

A. The State Lead Agency assures that appropriate early intervention services are available to all eligible infants and toddlers with disabilities and their families, including Indian infants and toddlers and their families living on reservations geographically located in Washington State.

B. The State Lead Agency and the State Education Agency (SEA) assure that the early intervention section of IDEA does not apply to any child receiving a Free Appropriate Public Education (FAPE), with funds under Section 619, IDEA, Part B.

D. Public Awareness Program

1. Policy

A. The State Lead Agency assures a public awareness program that focuses on early identification of children who are eligible to receive early intervention services. The State Lead Agency assures, through contracts with early intervention services contractors, that program information and materials for parents and others are disseminated to all primary referral sources. Contractors are required to document where materials are locally distributed. The public awareness program shall provide information to the public about:

1. The Infant Toddler Early Intervention Program;
2. Washington's Child Find (early identification) system, including:
   a. The purpose and scope of the system.
   b. How to make referrals to the system.
   c. How to gain access to a comprehensive, multidisciplinary evaluation and other needed early intervention services. And
3. The central directory 1-800 number.

2. Program (see Appendix for materials)

Public Awareness Materials	**Languages Available**
Developmental Prescreen Chart	English, Spanish, Russian, Cambodian, H'Mong, Hungarian, Chinese, Ethiopian-Amharic, Korean, Polish, Farsi, Thiopian-Tigrignah, Laotian, and Vietnamese
A Family's Guide to Early Intervention Services in Washington State	English, Spanish, Russian, Cambodian, Korean, Chinese, Laotian, and Vietnamese
Please Ask, Babies Can't Wait Brochure	English and Spanish
Please Ask, Babies Can't Wait Poster	English and Spanish
The Governor's Report	English

E. Comprehensive Child Find System

1. Policy

A. The State Lead Agency, with the assistance of the SICC, assures a coordinated child find (early identification) system. The system shall:

1. Be consistent with IDEA, Part B, and the State Office of Superintendent of Public Instruction, which is responsible for statewide child find.
2. Assure all eligible infants and toddlers in the state are identified, located, and evaluated.
3. Include a method to identify infants and toddlers receiving early intervention services. And
4. Be a coordinated and shared responsibility among state agencies, early intervention services contractors, providers, and local communities.

B. The State Lead Agency, with the advice and assistance of the SICC, shall take steps to assure that unnecessary duplication of efforts does not exist between the agencies involved, and that the state will make use of the resources available, through each public agency in the state, to implement the child find system in an effective manner. This includes coordination of child find (early identification) efforts with the following:

1. Assistance to States Programs under IDEA, Part B (Public Schools).
2. Maternal and Child Health Programs, under Title V of the Social Security Act (Coordinated Children's Services) and SSI, under Title V.
3. Medicaid's Early Periodic Screening, Diagnosis, and Treatment (Healthy Kids) program, under Title XIX of the Social Security Act.
4. Developmental Disabilities Assistance and Bill of Rights Act (federal Department of Developmental Disabilities).
5. Head Start.
6. Supplemental Security Income Program, under Title XVI of the Social Security Act.
7. Tribes and tribal organizations that receive payments under IDEA, and other tribes and tribal organizations, as appropriate.
8. State Early Childhood Education and Assistance Program. And
9. State child care agencies.

C. The State Lead Agency assures that referral procedures are developed and used for referring a child to the appropriate public agency for:

1. Evaluation and assessment; or
2. Provision of Individualized Family Service Plan and/or early intervention services prior to completion of the evaluation and assessment.

D. The State Lead Agency assures procedures for determining the extent to which primary referral sources, especially hospitals and physicians, disseminate information on the availability of early intervention services, as required in 303.321, to parents of infants with disabilities.

2. Procedures

A. The early intervention services contractor shall coordinate the early identification (child find) of eligible infants and toddlers and their families (including targeted outreach to traditionally underrepresented populations) within their geographic service area.

B. If any child is identified as potentially having a developmental delay, by a primary referral source, the family will be referred to a Family Resources Coordinator (FRC).

C. Primary referral sources are responsible for assuring that a referral is made no more than two working days after a concern has been identified.

D. The primary referral sources shall:

1. Maintain written documentation, which supports the parent's permission to refer, the parent's request that a referral not be made, or the parent's request to extend the timeline for referral beyond two days.
2. Explain the services, which will be available if the referral is made and the consequences of not accessing the services through the referral process.
3. Inform the parent that the referral does not commit the family to participate in the early intervention services system. And
4. Initiate follow-up contacts with families who request a referral not be made.

E. Primary referral sources may include:

1. Hospitals, including prenatal and postnatal facilities
2. Physicians
3. Parents
4. Child care programs
5. Local education agencies
6. Public health facilities
7. Additional social service agencies
8. Other health care providers
9. Other education agencies

F. The Family Resources Coordinator, upon receiving the referral from the primary referral source, shall:

1. Assure the family knows about Family Resources Coordination and has agreed to have a Family Resources Coordinator contact them.
2. Contact the family to share information.
3. Share parent rights and procedural safeguards.
4. Discuss any concerns with a child's parent(s). And
5. Assist the family in receiving a developmental screening, if appropriate.

G. The Family Resources Coordinator shall assist the family in obtaining a multidisciplinary evaluation and assessment for the child. Evaluations and assessments are available in accordance with the following agencies' rules and scope of responsibility: Local health departments/districts; local school districts; county or regional DD providers; other public or private providers, or the local early intervention services contractors, as payors of last resort.

H. Evaluation and assessment shall be conducted within 45 days of receipt of referral (see evaluation and assessment, Individualized Family Service Plan procedures).

I. If the infant or toddler is found eligible, an Individualized Family Service Plan (IFSP) meeting shall also be held and services authorized within 45 days of referral, as documented on the written Individualized Family Service Plan. The Family Resources Coordinator will coordinate the implementation of services.

J. The Family Resources Coordinator shall provide notice to parents of an Individualized Family Service Plan meeting (see Procedural Safeguards notice to parents).

K. The Family Resources Coordinator shall coordinate the Individualized Family Service Plan meeting, with the family participants and others who will attend the meeting.

L. Primary referral sources are informed about early identification procedures through a memo from the State Lead Agency (see transmittal letter).

M. Washington will use, on an annual basis, a survey directed to primary referral sources, especially hospitals and physicians, to determine the extent to which those referral sources disseminate information on the availability of early intervention services, as required, to parents of infants and toddlers with disabilities.

N. If an infant or toddler is not eligible, the Family Resources Coordinator shall review with the family any other available services that may be related to the child's/family's needs and provide information on how to access them. Referral for tracking may be offered as available and appropriate.

Washington State Department of Social & Health Services

Infant Toddler Early Intervention Program (ITEIP)

Dear Washington Primary Care Providers,

Many babies and toddlers with disabilities or delayed development in our state are benefiting from early intervention services. Yet we know that about half of all children with such difficulties are not identified until they reach school age.

As a primary referral source dedicated to the support and services for young children and families, people turn to you for information and advice. *You are in a key position to identify, at the earliest possible age, children with potential developmental delays.*

If you or a family has a concern about a child's development, help is available in Washington State. The **Infant Toddler Early Intervention Program** (ITEIP) coordinates a statewide system of early intervention services and assistance in accessing those services. When you call a **Family Resources Coordinator** (FRC), they will assist you and families to:

- **Arrange more in-depth developmental screening or evaluation to verify or rule-out the need for early intervention services;**
- **Explain early intervention services available and help develop an Individualized Family Service Plan (IFSP), if needed;**
- **Access other community programs such as parent support, respite, and transportation; and**
- **Identify funding resources for early intervention services including SSI and federal early intervention program monies.**

Developmental screening and evaluation and FRC services are provided at no cost to families.

Families continue to provide testimony about the positive impact of intervention and early referral on the lives of their children and families. Here are a few examples of what families are saying about early intervention services:

"Looking back on it, it was hard; but at least our doctor didn't say 'let's just wait and see'. He didn't put us off. After the evaluation we knew what our son needed. We didn't waste a lot of time just worrying about what to do."

"My Family Resources Coordinator (FRC) really goes the extra mile. She is an amazing information resource. If she does not know what the solution is, she says 'we'll find a way'."

"The therapists have been great. They have been a major source of support both in terms of giving us information about our child's diagnosis and the emotional support of having a child with a disability."

"Our son will never reach the major developmental milestones – he'll never walk or talk – but he is definitely making progress. Therapy has helped us appreciate his small triumphs and allowed us to simply enjoy him as our son."

Parents' Rights for Referral

Federal and state legislation assert that parents have a right to be referred for early intervention services if there is an established or suspected delay in their child's development. The intent is that every family who might need services has information about the availability of programs and that referrals be made in a timely manner.

Washington State requirements for the ITEIP state that individuals, such as primary care providers, who are in a position to make early intervention referrals shall:

- Refer families to an FRC within two working days of identifying a developmental delay or a disability that could lead to a delay, unless a family requests an extension to the timeline or requests that a referral not be made;
- Explain the services available to families when they accept a referral to an FRC (including screening, evaluation, service coordination, an IFSP, and the potential for special funding);
- Inform parents that the referral does not commit them to participate in the early intervention program;
- Maintain written documentation of the parent's permission to refer, the parent's request that a referral not be made, or the parent's request to extend the 2-day referral timeline.

Therefore primary care providers are asked to:

- Attend to developmental milestones
- Ask parents about their children's development and
- Respond to parents' concerns.

From a pediatrician's experience:
"Doctors are often worried that talking about a child's development will scare the parent. The opposite is true. Parents are often pleased to be offered a venue to talk about their child's development and relieved to share any concerns they may have.

Parents worry in their hearts, in their guts. Yet many may not bring up their concerns during the well child visit, especially when the doctor seems so busy."

Please Ask Babies Can't Wait.

So...

Please Ask, Babies Can't Wait
Additional information about the Infant Toddler Early Intervention Program is available at 360-725-3500 (TTY 360-407-1087) or at **http://wwwl.dshs.wa.gov/iteip/**

Thank you for referring to early intervention services and for your ongoing commitment to Washington's children and their families.

Sandy L. Morris

Sandy Morris
Director, Infant Toddler Early Intervention Program
State of Washington, Department of Social & Health Services

Dr. Jeffery Thompson, M.D.
Medical Director, Health and Recovery Services Administration
State of Washington, Department of Social & Health Services

How to contact a Family Resources Coordinator (FRC)

Call the Family Health Hotline at 1-800 322-2588 or TTY 711 for the name of the Family Resources Coordinator in your local area. Families can call the FRC directly or, with the family's permission, you or your office staff can make the call. The FRC can also provide you with brochures and posters about the **Infant Toddler Early Intervention Program** and child development charts for sharing with families or posting in your office.

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Dr. Jeffrey Thompson, M.D.
Medical Director, Medical Assistance Administration
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F. Child Evaluation, Assessment, and Nondiscriminatory Procedures

1. Policy

A. The State Lead Agency assures a timely, comprehensive, multi-disciplinary evaluation for each child, birth to three, including assessment activities related to the child's unique strengths and needs, and the voluntary family-directed identification of needs.

B. The multi-disciplinary team (consisting of at least two qualified personnel) shall determine eligibility for early intervention services under IDEA, based on the results of the evaluation, including informed clinical opinion, agreed upon by the multi-disciplinary team. The informed clinical opinion shall be substantiated and documented in a written narrative and may include information provided by parent report and/or interview.

C. The evaluations and assessments are conducted by the local service provider(s) and agencies, as stated in Child Find procedures. The State Lead Agency assures that evaluation and assessment requirements are implemented by all agencies and service providers.

D. Each family of an eligible child shall be offered a family-directed identification of needs of each family, to appropriately assist in the development of the infant or toddler. The family-directed identification of needs is voluntary on the part of the family.

2. Procedures

A. The evaluation and assessment of each child shall be:

1. Conducted by qualified personnel trained to use appropriate methods and procedures.
2. Conducted using evaluation test and procedures. And
3. Based on informed clinical option.

B. The evaluation and assessment of each child shall be substantiated and documented in a written narrative and may include information provided by parent report and/or interview.

C. Each evaluation shall include:

1. Review of current health records and medical history.
2. Determination of child's level of functioning in each of the following developmental areas:
   a. Cognitive development
   b. Physical development, including vision and hearing; fine and gross motor
   c. Communication development

d. Social or emotional development

e. Adaptive development

3. Assessment of child's unique strengths and needs and identification of appropriate early intervention services in each area under B2 above.

D. The State Lead Agency assures that evaluations and assessments are:

1. Conducted within 45 days of referral; or if exceptional circumstances prevent the 45 day timeline from being met, the local service provider or agency responsible shall document the circumstances and shall develop and implement an interim Individualized Family Service Plan, as appropriate and consistent with interim Individualized Family Service Plan procedures (see Interim Individualized Family Service Plan Procedures).

2. Conducted by qualified personnel. And

3. Conducted using more than a single procedure as criteria for determining eligibility. This means using a minimum of two professionals from different disciplines and two tests or procedures.

E. The State Lead Agency assures that evaluation tests and procedures are:

1. Administered in native language or mode of communication.

2. Selected and administered so as not to be racially or culturally discriminatory.

F. For family-directed assessment procedures see Individualized Family Service Plan procedures.

G. Individualized Family Service Plans

1. Policy

A. The State Lead Agency shall assure that a single written Individualized Family Service Plan (IFSP) is developed and implemented in accordance with the early intervention section of IDEA, for each eligible infant and toddler and their family

B. The State Lead Agency assures that each Individualized Family Service Plan is developed and implemented:

1. Jointly by the family and qualified personnel involved in the provision of early intervention services.
2. Based on the multi-disciplinary evaluation and assessment of the child, and the voluntary family-directed identification of needs.
3. Includes services necessary to enhance the development of the child and the capacity of the family to meet the needs of the child. And
4. Incorporates all other plans and activities, including Individualized Education Plans, necessary to coordinate early intervention services.

C. The State Lead Agency assures, if there is a dispute between agencies, as to who has responsibility for developing and implementing an Individualized Family Service Plan, the State Lead Agency shall resolve the dispute through dispute resolution procedures. (See Interagency Agreements, Resolution of Individual Disputes, and the State Interagency Agreement.)

2. Procedures

A. The State Lead Agency assures that:

1. Evaluations and assessments are conducted according to evaluation and assessment policy and procedures.
2. An Individualized Family Service Plan is developed and implemented for each eligible infant and toddler and their family.
3. Family Resource Coordination is available to each eligible infant and toddler and their family and provided to each eligible child and family choosing to participate in the Infant Toddler Early Intervention Program.

B. Each family of an eligible infant and toddler shall be offered assistance to develop a statement (based on the family-directed assessment and identification of needs) of resources, priorities, and concerns of the family, related to enhancing the development of the child.

C. The family-directed assessment, identification of needs, and the family statement shall be voluntary on the part of the family.

D. If the family-directed assessment is conducted, the assessment shall:

1. Be conducted by personnel trained to utilize appropriate methods and procedures.
2. Reflect the family's description of its resource, priorities, and concerns related to enhancing the child's development.
3. Be based on information provided by the family in personal interviews.
4. Included assistance offered by the family Resources Coordinator, or through other personnel who have been trained in appropriate interview techniques, to develop the family statement. And
5. Result in a written family statement in the Individualized Family Service Plan unless there is documentation that the family does not wish to have the family statement in their plan.

E. A meeting to develop the initial Individualized Family Service Plan shall be conducted with 45 days of referral.

F. The Individualized Family Service Plan shall be reviewed at least every six months, or more often if conditions warrant, or if the family requests a review to determine:

1. The degree to which progress is being made toward achieving the outcomes; or
2. Whether revisions or modifications of outcomes or services are necessary to meet the changing needs of the infant or toddler.

G. The Individualized Family Service Plan six month review may occur at a meeting or by other means acceptable to parents and other participants;

H. Each six month review shall include the parents, other family members, an advocate, or persons outside the family as requested by the parents, and the Family Resources Coordinator. If conditions warrant, provisions must be made for the participation of other representatives.

I. A meeting shall be conducted on at least an annual basis to evaluate the Individualized Family Service Plan for a child and the child's family. The annual meeting shall:

1. Review early intervention and other services. The results of any current evaluations and other information from the ongoing assessment of the child and family must be used in determining what early intervention services are needed and will be provided.
2. Result in a new Individualized Family Service Plan, which may be a revision of the previous Individualized Family Service Plan.

J. All Individualized Family Service Plan meetings (i.e. initial, annual reviews, and transition) shall be:

1. Conducted in settings and at times convenient to the family members.
2. Conducted in the parent's native language, or other mode of communication, including having an interpreter available at the meeting if the Individualized Family Service Plan team is not fluent in the parent's native language. And
3. Arranged with the family, with prior written notice provided to the family and other participants, early enough before the meeting date to assure that they will be able to attend.

K. The contents of the Individualized Family Service Plan shall be fully explained to the parents. Informed written consent from the parents shall be obtained prior to the provision of early intervention services described in the plan. If the parents do not provide consent, with respect to a particular early intervention service, or withdraw consent after first providing it, that service may not be provided. The early intervention services for which consent is obtained shall be provided.

L. Written prior notice for an Individualized Family Service Plan meeting shall be given by the Family Resources Coordinator to the parent(s) of an eligible child a reasonable time before the service provider(s) propose(s) or refuse(s) to initiate or change the identification, evaluation, or service placement of the child; or the provision of early intervention services to the child and the family.

1. The notice to parents and other participants shall include:
   a. The purpose of the meeting, time, place, and who is invited.
   b. An explanation of all the procedural safeguards available to the parent. And
   c. The action proposed or refused by the local service provider, and why the service provider proposes or refuses to take the action.
2. The notice shall be:
   a. Written in language understandable to the general public; and
   b. Provided in the native language of the parent or other mode of communication used by the parent.
3. If the native language or other mode of communication of the parent is not a written language, the Family Resources Coordinator shall take steps to assure that:
   a. The notice is translated orally or by other means to the parent in his or her native language or other mode of communication.
   b. The parent understands the content of the notice. And
   c. There is written evidence that the requirements in item 1 (a) and (b) have been met.
4. If a parent is deaf or blind, or has no written language, the mode of communication, shall be that normally used by the parent (such as sign language, Braille, or oral communication).

M. The participants in the initial and annual Individualized Family Service Plan meetings shall include:

1. Parents(s) of the child.
2. Family Resources Coordinator who has been designated by the local early intervention services provider to be responsible for implementation of the Individualized Family Service Plan.

3. The Family Resources Coordinator that has been working with the family since the initial referral of the child for evaluation, if different.
4. Other family members, an advocate, or person outside the family as requested by the parents. And/Or
5. Persons who are directly involved in conducting the evaluation and assessments. If unable to attend, arrangements shall be made for involvement and sharing information with the family and other participants through other means including:
   a. Making pertinent records available at the meeting. Or
   b. Having a knowledgeable, authorized representative attend the meeting to present and interpret their records. Or
   c. Participating in a telephone conference call.
6. Other service provider(s), as appropriate to the child and family.

N. The Individualized Family Service Plan shall include but is not limited to the following information:

1. A statement of the infant's or toddler's present levels of development, based on professionally acceptable, objective criteria, including:
   a. Physical development that includes: fine motor, gross motor, vision, hearing, and health status.
   b. Cognitive development.
   c. Communication development.
   a. Social or emotional development. And
   b. Adaptive development.
2. With the concurrence of the family, a statement of the family's resources, priorities, and concerns relating to enhancing the development of their infant or toddler.
3. A statement of the major outcomes expected to be achieved for the infant or toddler and the family, and the criteria, procedures, and timelines used to determine:
   a. The degree to which progress toward achievement is being made; and
   b. Whether modifications or revisions of outcomes or services are necessary.
4. A statement of specific early intervention services necessary to meet the unique needs of the infant or toddler and the family, to achieve the outcomes identified in 3 above including:
   a. Frequency, intensity, location, and method of delivering the service (see Definition Section).
   b. A statement of the natural environments in which early intervention services shall be provided, including a written statement justifying the extent, if any, to which the service will not be provided in natural environments. And
   c. The payment arrangement (who is funding the service?).

5. To the extent appropriate, the Individualized Family Service Plan shall include:
   a. Medical and other services that the child or family needs, but are not required as early intervention services.
   b. The funding sources to be used in paying for those services. Or
   c. If necessary, the steps to secure those services through public or private sources.

   Note: Medical and other services does not apply to routine medical services (e.g. immunizations and "well-baby" care), unless a child needs those services and the services are not otherwise available or being provided.
6. Projected dates for initiation, as soon as possible after the Individualized Family Service Plan meeting, and anticipated duration of those services.

7. The name of the Family Resource Coordinator who will be responsible for facilitating implementation of the Individualized Family Service Plan and coordination with other agencies and persons. This may include the assignment of the same Family Resources Coordinator who was appointed when the child was referred for the initial evaluation or the appointment of a new Family Resources Coordinator to be responsible for implementing a child's and family's Individualized Family Service Plan.
8. Steps to be taken to support the transition of the child and family, upon the child reaching age three (see Transition Policy).

O. Each agency or person who has a direct role in the provision of early intervention services is responsible for making a good faith effort to assist each eligible child and family in achieving the outcomes in the child's Individualized Family Service Plan. However, these procedures do not require that any agency or person be held accountable if an eligible child does not achieve the growth projected in the child's Individualized Family Service Plan.

H. Interim Individualized Family Service Plan

1. Policy

The State Lead Agency shall assure that a written Interim Individualized Family Service Plan is developed for an eligible child and the child's family, when early intervention services need to begin before the completion of the evaluation and assessment within the 45 days after referral.

2. Procedures

A. The State Lead Agency assures that an Interim Individualized Family Service Plan is developed with the following conditions met:

1. Informed written consent from the parent(s) is obtained prior to the provision of early intervention services described in the plan.
2. An Interim Individualized Family Service Plan is developed that contains:
   a. The name of the Family Resources Coordinator who is responsible for the implementation of the Interim Individualized Family Service Plan and coordination with other agencies and persons; and
   b. The early intervention services that have been determined to be needed immediately.
3. The evaluation and assessment are completed within the required 45 day time period from referral.
4. In the event of exceptional circumstances that make it impossible to complete the evaluation and assessment within 45 days (e.g. if a child is ill), the Family Resources Coordinator will:
   a. Document those circumstances; and
   b. Develop and implement an Interim Individualized Family Service Plan.

I. Natural Environments

1. Policy

A. The State Lead Agency shall assure to the maximum extent appropriate that early intervention services are provided in natural environments. (See definition of Natural Environments in Section III.)

B. The State Lead Agency shall assure early intervention services, for any infant or toddler with disabilities, occurs in a setting other than a natural environment only when early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment.

2. Procedures

A. The Individualized Family Service Plan shall include a statement of the natural environment in which early intervention services shall appropriately be provided.

B. The Individualized Family Service Plan shall include a written statement justifying the extent, if any, to which the service will not be provided in a natural environment.

J. Transition Policy

1. Policy

The State Lead Agency shall assure a smooth transition for children participating in the early intervention program, who are eligible for preschool under Part B or other appropriate services. The transition plan shall be a component of the child's Individualized Family Service Plan. The State Lead Agency and the State Education Agency shall assure coordination on transition matters in the Interagency Agreement.

2. Procedures

A. The early intervention services contractor, in coordination with the Family Resource Coordinator, who is responsible for facilitating the implementation of the Individualized Family Service Plan, shall:

1. Notify the family of the need for planning regarding transition. The planning coincides with the review of the Individualized Family Service Plan, at least six months before the child's third birthday (see notification procedures Individualized Family Service Plan Policy).
2. With family permission, notify the local school district, in which the child and family reside, of the need for planning regarding transition by age three.
3. With parental consent, transmit information about the child to the subsequent service provider(s), including the local school district, to ensure continuity of services, including evaluation and assessment information and copies of Individualized Family Service Plans that have been developed and implemented.
4. The Family Resource Coordinator shall coordinate with the early intervention local service provider(s) and the local school district to:
   a. Compile existing evaluation information; and
   b. Complete any additional evaluations necessary for the school to determine eligibility for Part B services.
5. With the family's permission, the Family Resources Coordinator and the local school district convene the transitional planning meeting at least 90 days or, at the discretion of all parties, up to six months prior to the child's third birthday to discuss any preschool services the child may receive.
   a. The participants at the meeting include:
      (1) The parent(s) and other persons, as requested by the parents.
      (2) Local school district representative and if different the current serving school district or designee.
      (3) The early intervention services contractor, or designee.
      (4) The current early intervention service provider(s), as appropriate.

(5) The Family Resource Coordinator. And

(6) Others as appropriate.

b. The meeting shall include a review of the child's service/program options from the day the child turns three though the remainder of the school year.

6. The written transition plan shall include:

a. The service/program options; and

b. Steps required to support the transition including:

(1) Discussions with, and training of, parents regarding future placements and other matters related to the child's transition, including the local school district determination of eligibility.

(2) Procedures to prepare the child for change in service delivery, including steps to help the child adjust to, and function in, a new setting.

7. If the child does not meet eligibility requirements for the preschool special education program, but meets criteria for other services, the Family Resources Coordinator shall make a reasonable effort to convene a transition conference with the local early intervention services contractor, family, and providers of other appropriate public and private services that may be available, to discuss the services that the child may receive.

K. Comprehensive System of Personnel Development (CSPD)

1. Policy

The State Lead Agency shall assure a Comprehensive System of Personnel Development consistent with the Individuals with Disabilities Education Act (IDEA), Part B.

2. Procedures

A. The Comprehensive System of Personnel Development shall provide:

1. Pre-service and in-service training to be conducted on an interdisciplinary basis to the extent appropriate
2. The training of a variety of personnel to meet the requirements of this part including:
   a. Public/private providers
   b. Primary referral sources
   c. Paraprofessionals, and
   d. Family Resources Coordinators.
3. Opportunities for parents to participate in training.

B. Training provided in the comprehensive system shall relate specifically to:

1. Understanding the basic components of early intervention services available in the state.
2. Meeting interrelated social and emotional, health, developmental and educational needs of eligible children. And
3. Assisting families to enhance the development of their children, and to participate fully in the development and implementation of Individualized Family Service Plans.

C. The comprehensive system shall coordinate with existing agencies' and organizations' personnel development plan.

D. Comprehensive System of Personnel Development (CSPD) may include:

1. Innovative strategies and activities for the recruitment and retention of early intervention service providers.
2. Preparation of early intervention providers who are fully and appropriately qualified to provide early intervention services.
3. Training personnel to work in rural and inner-city areas and cross-culturally. And
4. Training personnel to coordinate transition services for infants and toddlers from an early intervention program to a preschool program under Part B, or other appropriate services.

L. Personnel Standards

1. Policy

A. The State Lead Agency assures the establishment and maintenance of standards for personnel necessary to carry out early intervention services for infants and toddlers and their families.

B. The State Lead Agency assures that personnel are appropriately and adequately prepared and trained, including the use of paraprofessionals and assistants who are appropriately trained and supervised in accordance with state law, regulations, or written policy, to assist in the provision of early intervention services to eligible infants and toddlers.

C. The personnel standards meet the highest entry level academic degree needed for the state approved or recognized certification, licensing, registration, or other comparable requirements that apply to that profession or discipline. (See Definition of State Approved or Recognized Certification, Licensing, Registration, or Other Comparable Requirements in Section III.).

D. In identifying the "highest requirements in the State" (see Definition of State Approved or Recognized Certification, Licensing, Registration, or other Comparable Requirements in Section III) the requirements of all state statutes and rules of all state agencies, applicable to serving children eligible under the early intervention section of IDEA and their families, were considered.

E. Personnel meeting the highest entry level academic degree needed for approved or recognized certification, licensing, registration, or other comparable requirements are qualified to provide early intervention services.

F. If personnel are identified who do not meet these standards, the State Lead Agency and/or the participating agencies assure necessary notification occurs to correct any identified deficiencies.

G. Standards include provisions for temporary and emergency certification.

H. Standards shall be on file in the State Lead Agency and available to the public by contacting: Department of Social and Health Services; Infant Toddler Early Intervention Program, Post Office Box 45201; Olympia, WA 98504-5201.

2. Procedures

A. The State Lead Agency and participating agencies shall follow existing Washington Administrative Codes.

B. The State Lead Agency and participating agencies shall follow existing hiring and personnel standards.
NOTE: Standards have been reviewed for all applicable statutes and rules.

C. The State Lead Agency and Department of Health shall adhere to Department of Personnel job qualifications for the following disciplines:

- Audiologist
- Developmental Disabilities Case/Resource Manager
- Nurse
- Nutrition Consultant
- Occupational Therapist
- Orientation and Mobility Specialist
- Physical Therapist
- Physician, Pediatrician
- Psychologist
- Social Worker
- Speech Consultant
- Speech Pathologist

D. The Office of the Superintendent of Public Instruction (OSPI) shall adhere to their current certification requirements for the following job titles:

- Communication Disorder Specialist (Speech Pathology, Audiology)
- Educational Staff Associate
- Occupational Therapist
- Physical Therapist
- School Counselor
- School Nurse
- School Psychologist
- School Social Worker
- Special Education and Early Childhood Special Education Teacher

E. The Washington State Department of Health has the following relevant professions listed in its regulations:

- Counselor, Marriage and Family Therapist
- Nurse
- Nutritionist
- Occupational & Physical Therapist
- Physician (Includes Pediatrician)
- Psychologist
- Social Worker (see Counselor regulations)

NOTE: Vision Specialists must be certified Special Education Teachers.

F. Notification

1. The State Lead Agency and each early intervention services contractor shall notify personnel of the steps needed to meet the highest entry level requirements.
2. Personnel policies and procedures are distributed to early intervention services contractors and County Interagency Coordinating Councils. They are on file at the State Lead Agency, have been distributed statewide, and continue to be available to the public.

G. Steps and Timelines

1. The State Lead Agency and each participating agency have established timelines for retaining or hiring personnel that meet the state's requirements. All personnel have requirements that meet state standards.
2. To bring personnel into compliance, the complemented self-evaluations and/or contractual monitoring will include a review of personnel qualifications, to assure that they meet or exceed Washington State's highest entry level requirements, as summarized in the following chart.
3. In the event that the Infant Toddler Early Intervention Program self-assessment tool, completed by the early intervention services contractor, reveals that any staff member providing early intervention services does not hold a Washington approved highest entry level or recognized certification, licensing, registration, or other comparable requirement, the early intervention services contractor will develop appropriate strategies, in their self-assessment action plan, to achieve compliance by completion of the contract year. This may include retraining a staff member or hiring a person who meets Washington's requirements.
4. In the event that Infant Toddler Early Intervention Program contract monitoring reveals that any staff member providing early intervention services does not hold a Washington approved highest entry level or recognized certification, licensing, registration, or other comparable requirement, the State Lead Agency will notify the early intervention services contractor and work with them to develop an appropriate technical assistance plan, to achieve compliance by completion of the contract year. This may include retraining a staff member or hiring a person who meets Washington's requirements.
5. In the event that barriers related to lack of qualified personnel and personnel standards are identified, the barriers will be presented to the State Interagency Coordinating Council for development of strategies to resolve the barriers.
6. By October 2005, all personnel in the state will meet the highest entry level requirements.

Highest Entry Level Requirements in Washington State for Early Intervention Professionals

References: Available for public inspection at the Department of Social and Health Services, Infant Toddler Early Intervention Program

1. Revised Codes of Washington Chapters 18 and 24A
2. Washington Administrative Codes 180 and 246
3. Washington State Department of Personnel Job Specifications

(This chart summarizes a review of all Washington statutes and the rules of all Washington agencies applicable to serving children eligible under the early intervention section of IDEA and their families.)

Discipline	Highest Entry-Level	Certification/Licensure/Registration
Audiologist	Master's in Audiology	Not Required (Certificate/DOH if fitting and dispensing hearing instruments)
Family Resources Coordinator	Complete training provided by DSHS Infant Toddler Early Intervention Program	Registration with DSHS Infant Toddler Early Intervention Program
Marriage and Family Therapist	Master's in Marriage and Family Therapy or Behavioral Science	Certificate/DOH
Mental Health Counselor	Master's in Mental Health Counseling or related field	Certificate/DOH
Nursing Personnel:		
a. Practical Nurse	Completed an approved program for the education of practical nurses, or its equivalent	License/DOH Carries out programmatic early intervention health and nursing services under the supervision of a registered nurse.
b. Registered Nurse	Diploma from an approved school of nursing	License/DOH
c. School Nurse	Baccalaureate degree in nursing from a National League of Nursing accredited program	License (Registered Nurse)/DOH Certificate/OSPI

Discipline	Highest Entry-Level	Certification/Licensure/Registration
Nutritionist	Master's in Human Nutrition, Nutrition Education, Foods and Nutrition, or Public Health	Certificate/DOH
Occupational Therapist	Baccalaureate	License/DOH
Orientation and Mobility Specialist (for the blind and visually impaired)	Baccalaureate and meets course requirements for certification with the Association for the Education and Rehabilitation of the Blind and Visually Impaired (AER)	Not Required
Physician (for example, Family Practitioner, Pediatrician, Ophthalmologist)	Doctor of Medicine	License/DOH
Physical Therapist	Baccalaureate	License/DOH
Psychology Personnel:		
a. Psychologist	Doctorate (including an integrated program of study in psychology)	License/DOH (Exception: A person who is employed by the state may practice psychology with a master's degree, under the supervision of a licensed Psychologist.)
b. School Psychologist	Master's with a specialization in School Psychology	Certificate/OSPI

Discipline	Highest Entry-Level	Certification/Licensure/Registration
Social Work Personnel: a. Social Worker b. School Social Worker	 Master's in Social Work Master's in Social Work	 Certificate/DOH Certificate/OSPI
Special Educator	Baccalaureate	Certification, with Early Childhood Special Education endorsement/OSPI (Exception: Endorsement is not required if a person applied for their certificate prior to July 1, 1988.)
Speech and Language Personnel: a. School Speech-Language Pathologist b. Speech-Language Pathologist	 Master's in Speech Pathology Master's in Speech Pathology	 Certificate/OSPI None
Teacher	Baccalaureate	Certification/OSPI
Teacher of the Visually Impaired	Baccalaureate	Special Education Certificate/OSPI

Temporary and Emergency Certification

The following is a brief overview of provisions for temporary and emergency certification for early intervention personnel. It is intended as a "roadmap," not a procedure.

NOTE: Temporary permits or certifications are addressed in RCWs and WACs and are also included in the Personnel Standards section of the Appendix. These temporary permits include the steps necessary to bring the individuals up to the standard requirements of the state.

Merit System Rules/DSHS and DOH

Special Exam: Upon the written request of the appointing authority, the Director of Personnel may waive or modify the minimum qualifications for a class to fill a vacant position on a one-examination basis only when: 1.) there is an incomplete register following recent recruiting; and 2.) an underfill appointment is not feasible in that the position is supervisory or managerial in nature or otherwise requires the full and immediate discharge of duties and responsibilities; and 3.) the Director of Personnel determines the established minimum qualifications to be appropriate under normal conditions and should not be permanently changed.

The Director of Personnel may admit to an examination an applicant who does not technically meet the published minimum qualifications if the Director determines that the applicant's qualifications exceed the minimum qualifications of the class for which the examination is being conducted. (See Merit System Rules as follows.)

Emergency: When an emergency occurs requiring the immediate services of a person or persons, the appointing authority (DSHS [State Lead Agency] and DOH) may appoint a person without following the normal procedures governing appointment. An emergency appointment shall not exceed 30 calendar days. The Director of Personnel shall monitor emergency appointments made and may revoke delegated authority where abuse is found. (See Merit System Rules as follows.)

Special Exam and Emergency provisions apply to the following job classifications related to direct service provision with DSHS and DOH:

Developmental Disabilities Case/Resource Manager
Orientation and Mobility Specialist
Social Worker, Psychiatric Social Worker
Speech Consultant, Speech Pathologist

Limited Certification/OSPI

Conditional Certificates may be issued to persons who are highly qualified and experienced in subject matter to be taught in the common or non-public schools, provided that: 1.) no person with regular certification in the field is available; 2.) the basis on which the individual was determined competent for the assignment; 3.) the individual is being certified for a limited assignment and responsibility in a specified activity/field; 4.) the individual will be delegated primary responsibility for instructional activities, with the direct assistance of a school district mentor, and will not be serving in the role of a paraprofessional, which would not require certification; 5.) personnel so certificated will be oriented and prepared for the specific assignment, by the employing district or agency; a written plan of assistance will be developed, in cooperation with the person to be employed, within 20 working days from the commencement of the assignment; and 6.) within the first 60 working days, personnel so certified will complete 60 clock hours (6 quarter hours or 4 semester hours) of course work in pedagogy and child/adolescent development appropriate to the assigned grade level(s), as approved by the employing school district.

The certificate is valid for two years or less and only for the activity specified. It may be reissued for two years and for two year intervals thereafter, upon completion of 60 clock hours (6 quarter hours or 4 semester hours) of course work in pedagogy and child/adolescent development appropriate to the assigned grade level(s), as approved by the employing school district.

Emergency certification for specific positions may be issued to persons who hold the appropriate degree and have substantially completed a program of preparation, in accordance with Washington requirements for certification: provided that a qualified person who holds regular certification is not available or that the position is essential and circumstances warrant consideration of issuance of an emergency certificate. The emergency certificate is valid for one year.

Appendix, Personnel Standards, OSPI
WAC 180-79
WAC 180-79-230(1) Conditional Certificate; (3) Emergency Certification
These apply to teachers only.

Temporary Permits/OSPI

Temporary permits may be issued by the Superintendent of Public Instruction and designated agents under the following conditions: 1.) person has filed an application for a certificate and has completed all requirements for certification, 2.) individual has applied for a permit directly to the Superintendent or designated agents, 3.) permit entitles holder to serve as a teacher, educational staff associate, or administrator consistent with the endorsement(s) on his/her permit, 4.) permit is valid for 120 consecutive calendar days, unless prior to the expiration date the Superintendent of Public Instruction determines the applicant is ineligible to receive a valid certificate or endorsement, and 5.) the permit may be reissued only upon demonstration that the applicant has made a good faith effort to secure the missing documentation. Applies to OSPI.

Appendix, Personnel Standards Section, OSPI
Temporary Permits WAC 180-75-090, Applies to Teachers (includes Special Educators) and Educational Staff Associates (includes: Communication Disorders Specialists, Nurses, Occupational Therapists, Physical Therapists, School Counselors, School Psychologists, and School Social Workers)

Temporary Out-of-Endorsement Assignment

A temporary out-of-endorsement assignment may be made when: 1.) the district or agency is unable to recruit a teacher with the proper endorsement; 2.) the need for a teacher with such an endorsement could not have been reasonably anticipated and the recruitment of such a teacher, at the time of assignment, was not reasonably practical; 3.) a teacher from within the district could not be reassigned; 4.) the district has a surplus of teachers with endorsements in specified grade or subject areas and it is necessary to reassign such teachers in whole or part, in order to avoid adversely affecting such teachers' contract status. See WAC 180-16-223 for Temporary out-of endorsement assignment criteria.

Appendix, Personnel Standards, OSPI
Temporary out-of-endorsement assignment WAC 180-16-223 applies to teachers only.

Exception/OSPI

The Superintendent of Public Instruction or his or her designee may grant an exception to compliance with any of the staff qualifications, which are above and beyond certification requirements imposed by the State Board of Education, only upon the request of a school district and the provision of satisfactory assurances by the district that noncompliance: 1.) is unavoidable; 2.) will be temporary and not extend beyond the school year for which the exception is requested; and 3.) will not likely result in a significant reduction in the quality of the district's special education program.

Employees of a school district, who possess credentials as required by the State Board of Education and who were employed during the end of the 1974-1975 school year in the special education program of the district, shall be considered qualified for the purposes of state program approval, as long as they continue in such employment with that particular district.

Appendix, Miscellaneous Section
State of Washington Rules and Regulations for Programs
Providing Services to Children with Disabilities
WAC 392-171-701(5,6) Staff Qualifications

Health Care Personnel Licensed through DOH

Nurses: Interim Permit may be issued to a graduate from approved nursing school who has met all qualifications, has filed an application for examination, and is eligible for admission to the licensing examination. This permit expires when a license is issued, when first notice of failure is received, or within one year of issuance, whichever is the earliest date. The permit is not renewable. Applies to DSHS (State Lead Agency), DOH, and OSPI.

Appendix, Personnel Standards Section, DOH
Practical Nurse, Interim Permit RCW 18.78.060
Registered Nurse, Permits to Practice RCW 18.88.140 (paragraph 2)

Occupational Therapists: Limited permits may be issued to a person who has met education and experience requirements and is waiting for results of licensing exam. The person must practice in association with an occupational therapist. A limited permit is valid until results of the exam are made public. One extension of this permit may be granted, if the applicant has failed the exam, but during this period the person shall be under the direct supervision of an occupational therapist. This applies to DSHS, DOH, and OSPI.

Appendix, Personnel Standards Section, DOH; Limited Permits RCW 18.59.040(7)

Psychologist: A valid receipt for initial license application constitutes a temporary permit to practice psychology. The applicant must meet the educational, experience, and examination requirements. The Examining Board of Psychology must complete action within one year of the date such receipt is issued.

Appendix, Personnel Standards Section, DOH
Temporary Permits RCW 18.83.082, (Applies to Psychologist 5 and 6 only, Psychologists 1-4 work under the supervision of a Psychologist 5, DSHS, and DOH)

With the exception of the circumstances described above, personnel who do not meet the licensure, certification, or highest standards are not hired. Each of the above circumstances describes a situation in which the only missing qualification is the documentation of licensure or

certification. The exceptions are emergencies where personnel not meeting the highest standards may be hired, for 30 days only, and Conditional Certificates.

Merit System Rules

The following are Merit System Rules on waivers, certification underfills, and emergency appointments.

WAC 356-22-130 Examinations—Minimum Qualifications Waived or Modified—Examinations Modified.

1.) Upon the written request of the appropriate authority, the Director of Personnel may waive or modify the minimum qualifications for a class to fill a vacant position on a one-time basis only when (a) there is an incomplete register following recent recruiting or recruitment history data for the particular geographic location indicate that open competitive recruitment would result in an incomplete referral; and (b) an underfill appointment is not feasible in that the position is supervisory or managerial in nature or otherwise requires the full and immediate discharge of duties and responsibilities; and (c) the Director of Personnel determines the established minimum qualifications to be appropriate under normal conditions and should not be permanently changed.

2.) The Director of Personnel may admit to an examination an applicant who does not technically meet the published minimum qualifications, if the Director determines that the applicant's qualifications exceed the minimum qualifications of the class for which the examination is being conducted.

3.) The Director of Personnel may modify or substitute, for a person of disability, an examination which in his/her judgment is substantially equivalent to the regular examination for the class and compensates for the disability of the individual to be tested, when in the judgment of the director, all or portions of the examination constitutes an artificial barrier to the applicant's fully demonstrating his/her ability through the normal examination process, due to the disability.

4.) When a development plan established and administered by the Division of Human Resource Development is available for a classification, confirmed completion of this class development plan (CDP) admits the applicant to the next examination for that class.

WAC 356-26-090 Certification – Underfill

1.) The Director of Personnel may authorize the underfilling of a position if a register does not have names for a complete certification following active recruiting. Upon such authorization, a certification shall be made from the next lower class in the series or an allied class, as determined by the Director. Only the number of eligible individuals needed to complete the certification will be referred from the lower level class in the series or the allied class.

2.) Eligible personnel so certified shall be advised, during the employment interview with the appointing authority, of the underfill status of the appointment, which shall be confirmed in writing.

3.) An underfilled position shall not be certified against from a subsequently developed higher register unless: the employee does not successfully complete the probationary or trial service period or the employee does not qualify for the higher level class within four months after being admitted to the examination.

4.) Should the employee not qualify for promotion, the rules regarding transfer, promotion, demotion, or reduction-in-force shall apply.

WAC 356-30-050 Appointments – Emergency – How Made – Status

1.) When an emergency occurs requiring the immediate services of a person or persons, the appointing authority may appoint a person, without following the normal procedures governing appointment. The appointment shall be based on the availability and fitness of the applicant, as well as consideration of the agency's Affirmative Action program.

2.) An emergency appointment of an individual shall not exceed thirty calendar days.

3.) Service in an emergency appointment shall not constitute a part of the employee's probationary service.

4.) The Director of Personnel shall monitor emergency appointments made pursuant to this section and may revoke delegated authority where abuse is found.

WAC 356-30-060 Appointments – Underfill

1.) When an underfill appointment has been made from a certification authorized within these rules, the employee shall be advised in writing, by the appointing authority, of the underfill status of the appointment.

2.) The employee shall be paid within the salary range for the class from which certified and shall be evaluated against the standards for the lower class.

3.) The appointing authority shall provide the additional supervision and training to prepare the employee for the duties of the higher level class.

M. Procedural Safeguards

For the purpose of adopting IDEA early intervention requirements for procedural safeguards, the following definitions will apply:

A. Identification, Location, and Evaluation of Children with Disabilities means a comprehensive child find system;

B. Confidentiality of Personally Identifiable means Confidentiality of Information.

C. An early intervention services provider means a local public or private service provider or agency who is providing IDEA early intervention services.

D. An early intervention services contractor means the locally designated agency or organization, holding the Early Intervention Services contract with the Department of Social and Health Services (DSHS), Infant Toddler Early Intervention Program, within the Division of Developmental Disabilities (DDD), assuring the services are in accordance with the approved Washington State Grant Application.

1. Policy

A. The State Lead Agency assures procedural safeguards meet the requirements of the early intervention section of IDEA.

B. The State Lead Agency assures effective implementation of safeguards, by each early intervention services contractor and early intervention services provider in Washington that is involved in the provision of early intervention services, under the early intervention section of IDEA. Interagency agreements shall be written, to assure effective implementation of the early intervention section of IDEA safeguards, by each public agency in the state that is involved in the provision of early intervention services, under the early intervention section of IDEA.

2. Procedures

A. Definitions of Consent, native Language, and Personally Identifiable Information (see Section III Definitions)

B. Opportunity to Examine Records:

The parents of an eligible child shall be allowed to examine, inspect, and review any early intervention records relating to their child and family, to include:

1. Evaluations and assessments
2. Eligibility determination
3. Development and implementation of Individualized Family Service Plans
4. Individual complaints dealing with the child, and
5. Any other area involving records about the child and the child's family

C. Prior Notice, Native Language:

Written prior notice must be given to the parent(s) of an eligible child, a reasonable time before the early intervention services contractor or early intervention services provider proposes, or refuses, to initiate or change the identification, evaluation, or placement of the child or the provision of appropriate early intervention services to the child and the family.

D. Contents of Notice

1. The notice to parents shall include:
   a. All the procedural safeguards available to the parent.
   b. The action proposed or refused by the early intervention service contractor or early intervention service provider.
   c. An explanation of why they propose or refuse to take the action.
   d. A description of any options they considered and the reason why those options were rejected.
   e. A description of each evaluation and assessment procedure, test, record, or report they used as a basis for the proposal or refusal, including clearly defined results of all procedures or tests. And
   f. A description of any other factors that are relevant to the early intervention services contractor's or early intervention service provider's proposal or refusal.
2. The notice shall be:
   a. Written in language understandable to the general public; and
   b. Provided in the native language of the parent or other mode of communication used by the parent, unless it is clearly not feasible to do so.
3. If the native language or other mode of communication of the parent is not a written language, the early intervention service provider shall take steps to assure that:
   a. The notice is translated orally or by other means to the parent in his or her native language or other mode of communication.
   b. The parent understands the content of the notice. And
   c. There is evidence that the requirements in items (a.) and (b.) have been met.
4. If a parent is deaf or blind, or has no written language, the mode of communication, shall be that normally used by the parent (such as sign language, Braille, or oral communication).

E. Parent Consent

1. Written parental consent shall be obtained before:
   a. Conducting the initial evaluation and assessment of the child; and
   b. Initiating the provision of early intervention services to the child.

2. If consent is not given the early intervention services contractor, early intervention services provider, Family Resources Coordinator, or appropriate qualified personnel shall make reasonable efforts to assure 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.
3. The parent has the right to determine whether their infant or toddler or other family members will accept or decline any early intervention service, in accordance with state law, and may decline such service after first accepting it, without jeopardizing other early intervention services.
4. If the parent refuses consent procedures defined above, Washington State Child Protective Service Law applies, as appropriate. (See Appendix)

F. Surrogate Parents
1. Each early intervention services contractor or early intervention services provider shall assure that the rights of the child eligible under this part are protected when:
    a. No parent can be identified.
    b. The early intervention services contractor or early intervention services provider, after reasonable efforts, cannot discover the whereabouts of a parent. Or
    c. The child is a ward of the state.
2. The duty of the State Lead Agency or early intervention services contractor or early intervention services provider, under the early intervention section of IDEA, includes the assignment of an individual to act as a surrogate for the parent. This duty includes the establishment of method:
    a. For determining whether a child needs a surrogate parent; and
    b. For assigning a surrogate parent to the child.
3. Criteria for selection of surrogates: each public agency, early intervention services contractor, or early intervention services provider shall assure that a person is selected as a surrogate in a manner consistent with state law, and:
    a. Has no interest that conflict with the interests of the child he or she represents; and
    b. Has knowledge and skills that assure adequate representation of the child (see Appendix RCW 28A.155.090, WAC 392-172-308).
4. A person assigned as a surrogate may not be:
    a. An employee of the State Lead Agency.
    b. An employee of other state agencies. And

c. Any person or any employee of a person, providing early intervention services to the infant and toddler or to any family member of the infant or toddler.

5. A person who otherwise qualified as a surrogate parent under four above is not an "employee" solely because he or she is paid to serve as a surrogate parent.
6. The surrogate parent may represent a child in all matters related to:
   a. The evaluation and assessment of the child.
   b. Development and implementation of the child's Individualized Family Service Plan, including annual evaluation and periodic reviews.
   c. Ongoing provision of early intervention services. And
   d. Any other rights under the early intervention section of IDEA.

G. Mediation

The State Lead Agency shall assure that parties to a dispute, involving any matter relating to the identification, evaluation, or placement of the child or the provision of early intervention services to the child and family, are offered mediation as an alternative to a formal administrative proceeding.

1. Mediation is voluntary on the part of both parties.
2. The mediation process shall not deny any other procedural safeguards under the early intervention section of IDEA.
3. If mediation occurs after a due process complaint has been filed, mediation shall not be used to deny or delay a parent's rights. The complaint must be resolved, and a written decision made, within the 30 day timeline.
4. A qualified and impartial mediator who is trained in effective mediation techniques, such as at the local dispute resolution center shall conduct mediation (see Appendix RCW 7.75.020).
5. The State Lead Agency shall maintain a list of individuals who are qualified mediators and knowledgeable in laws and regulations relating to the provision of early intervention services.
6. The State Lead Agency shall pay for the cost of mediation, including the cost of meetings, as described in number five above.
7. Each mediation session shall be scheduled in a timely manner and shall be held in a location that is convenient to the parties of the dispute.
8. The agreement reached by the parties of the dispute shall be set forth in a written mediation agreement.
9. Discussions that occur during mediation shall be confidential and may not be used as evidence in any subsequent administrative civil proceedings. The parties to mediation may be required to sign a confidentiality pledge prior to the beginning of mediation.

H. Resolution of Individual Child Complaints by Impartial Decision Maker

1. The parent(s) of a child may initiate an administrative proceeding to challenge the appropriateness of the early intervention service contractor or early intervention services provider's refusal of the parent request to initiate or change:
   a. The identification, evaluation, or placement of the child; or
   b. The provision of early intervention services to the child and the child's family.
2. A request by the child's parent(s) for an administrative proceeding shall:
   a. Be in writing.
   b. Be mailed or provided directly to the chief administrator of the early intervention services provider. And
   c. Explain the complaint.
3. A notice of an administrative proceeding requested by parent(s) shall be provided by the administrative proceeding officer and shall include, but not be limited to:
   a. The date, time, and place of the administrative proceeding.
   b. The issues to be addressed at the administrative proceeding, as identified in the written complaint. And
   c. The rights, procedures, and other matters set forth for administrative proceeding officers through final decision.
4. The early intervention services contractor will provide to DSHS, as the State Lead Agency, and/or the appropriate participating agency a copy of the complaint prior to midnight of the fifth calendar day by depositing such complaint in the United States mail.
5. If an administrative proceeding is initiated:
   a. The administrative proceeding shall be conducted by and at the expense of the State Lead Agency or appropriate participating agency where the complaint originated.
   b. The appropriate participating agency shall inform the parent(s) of any free or low-cost legal and other relevant services available in the area if:
      (1) The parent request the information; or
      (2) The parent initiates an administrative proceeding.
   c. The administrative proceedings shall be conducted by a qualified, impartial person selected and appointed by the State Lead Agency and shall be a person who:
      (1) Is not an employee of the State Lead Agency, early intervention services contractor, or any service provider involved in the provision of early intervention services or care of the child.

(2) Does not have personal or professional interest that would conflict with his or her objectivity in implementing the process.

(3) Is not an employee of an agency solely because the person is paid by the agency to implement the complaint resolution process.

(4) Has knowledge about the provisions of the early intervention section of IDEA and the needs of and services available for eligible children and their families.

(5) Performs the following duties:

i. Listens to the presentation of relevant viewpoints about the complaint.

ii. Examines all information relevant to the issues and seeks to reach a timely resolution of the complaint. And

iii. Provides a record of the proceedings, including a written decision.

6. Any parent involved in an administrative proceeding has the right to:

a. Be accompanied and advised by counsel and by individuals with special knowledge or training with respect to early intervention services for eligible children.

b. Present evidence and confront, cross-examine, and request the attendance of witnesses.

c. Prohibit the introduction of any evidence at the administrative proceeding that has not been disclosed to the parent at least five days before the administrative proceeding.

d. Obtain written or electronic findings of fact and decisions.

7. Any administrative proceeding must be carried out at a time and place that is reasonably convenient to the parents.

8. No later than thirty days after the date of receipt of a request for an administrative proceeding:

a. A final decision shall be reached; and

b. A copy of the decision, consisting of the administrative proceedings officer's findings of fact, shall be mailed or provided directly to each of the parties, including the head of the agency where the complaint originated and to the State Lead Agency, by the administrative proceeding officer, together with a certification of the date of mailing and the parties to whom it was mailed.

9. The date of mailing or providing the decision to the parties shall be certified to, on the first page of the decision, by the person(s) who mails or provides the decision to the parties. The decision of the administrative proceeding officer shall be drafted in a manner which:

a. Sets forth the findings of fact and decisions separately, and numbers each finding of fact and decision; and

b. Avoids personally identifiable information that is unnecessary in reaching and understanding the decision. The surnames of children and their parents shall be indicated by use of their last initial and shall not be spelled out.

10. Any party aggrieved by the findings and decision regarding an administrative proceeding has the right to bring a civil action in state or federal court. A decision made in an administrative proceeding initiated pursuant to this section is final, unless modified or overturned by a court of law.

11. During the pendency of any administrative or judicial proceeding, regarding a complaint initiated pursuant to this section, unless the public agency, early intervention services contractor, or early intervention services provider and the parent(s) of the child agree otherwise, the child involved in the complaint shall continue to receive appropriate early intervention services currently being provided.

12. If the complaint involves an application for initial IDEA early intervention services, the child, with the consent of the parent(s) shall receive those early intervention services that are not in dispute.

I. Confidentiality of Information – Definition of "Early Intervention Records."

NOTE: The following policies and procedures meet the requirements in 34 CFR 300.560 through 300.576 (Part B regulations), Family Education Rights to Privacy Act (FERPA) 1974 34 CFR Part 99 with the following modifications:

- Any reference to the "State Education Agency" means the State Lead Agency, the Department of Social and Health Services, under the early intervention section of IDEA.
- Any reference to "education of children with disabilities," "education of all children with disabilities," "provision of free appropriate public education to all children with disabilities," or "special education, related services" means the provision of services to children eligible under this part and their families.
- Any reference to participating agency when used in reference to "local educational agencies" or "intermediate educational units" means early intervention services contractor or early intervention service provider.
- Any reference to 34 CFR 300.128 means 303.164 and 303.321.
- Any reference to 34 CFR 300.129 means this section (303.460)

J. For the purpose of this section governing eligible child records, the term "early intervention records" shall mean those records that:

a) Are directly related to the child or family; and

b) Are maintained by an early intervention services contractor, early intervention services provider, or by a party acting for the service provider.

1. The term "early intervention records" does not include:

Records of instructional, supervisory, and administrative personnel and service delivery personnel which:

(1) Are in the sole possession of the maker; and

(2) Are not accessible or revealed to any other individual except a substitute. For the purpose of this definition, a "substitute" means an individual who performs on a temporary basis the duties of the individual who made the record and does not refer to an individual who permanently succeeds the maker of the record in his or her position.

b. Records of any law enforcement unit which are:

(1) Maintained apart from the records described in subsection one of this section.

(2) Maintained solely for law enforcement purposes. And

(3) Not disclosed to individuals other than law enforcement officials of the same jurisdiction: provided, that records maintained by the service provider are not disclosed to the personnel of the law enforcement unit.

c. Records relating to an individual who is employed by an early intervention services contractor or early intervention services provider which:

(1) Are made and maintained in the normal course of business.

(2) Related exclusively to the individual in that individual's capacity as an employee. And

(3) Are not available for use for any other purposes: provided, that this exception from the definition of "early intervention records" does not apply to records relating to attendance of a parent who is employed as a result of his or her child's status as an eligible child.

J. Definitions

1. "Destruction" means physical destruction or removal of personal identifiers from information, so that the information is no longer personally identifiable.

2. "Participating agency" means any agency or institution which collects, maintains, or uses personally identifiable information from which information is obtained.

K. Notice to Parents

1. The State Lead Agency, the early intervention services contractor and early intervention services provider shall give adequate notice to fully inform parents about the comprehensive child find system, including:

a. Description of extent that notice is given in native language of population groups in Washington.

b. Description of children on whom personally identifiable information is maintained, types of information sought, methods used to collect information, (including the sources from whom information is gathered) and uses made of the information.

c. Summary of policies and procedures service providers must follow regarding storage, disclosure to third parties, retention, and destruction of personally identifiable information. And

d. Description of all rights of parents and children regarding this information, including FERPA rights.

2. Before any major identification (child find), location, or evaluation activity, notice must be published in a newspaper or other media with circulation adequate to notify parents in the region of the activity.

L. Access Rights

1. Each early intervention services contractor or early intervention services provider shall permit parents of eligible children to inspect and review, during business hours, any early intervention records relating to their child or family, which are collected, maintained, or used by the service provider under this section. The early intervention services contractor or the early intervention services provider shall comply with a request, without unnecessary delay, and in no case later than 45 days and before any meeting regarding an Individualized Family Service Plan or administrative proceeding relating to the identification, evaluation, or service to the child.

2. The right to inspect and review early intervention records under this section includes:

a. The right to a response from the early intervention services contractor or the early intervention services provider to reasonable requests for explanations and interpretations of the records.

b. The right to request that the early intervention services contractor or the early intervention services provider provide copies of the 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 records.

3. Early intervention services contractors and early intervention services providers may presume that a parent has authority to inspect and review records relating to his or her child, unless advised that the parent does not have the authority under applicable state law governing such matters as guardianship, separation, and divorce.

M. Records of Access

Each early intervention services contractor or early intervention services provider shall keep a record of parties obtaining access to early intervention records collected, maintained, or used under this section (except access by parents and authorized employees of the service provider), including the name of the party, the date access was given, and the purpose for which the party is authorized to use the records.

N. Records on More Than One Child

If any early intervention record includes information on more than one child, the parent(s) of those children shall have the right to inspect and review only the information relating to their child (or themselves) or to be informed of that specific information.

O. List of Types and Locations of Information
Each early intervention services contractor or early intervention services provider shall provide parents, on request, a list of the types and locations of early intervention records collected, maintained, or used by the agency.

P. Fees
1. An early intervention services contractor or early intervention services provider may charge a fee for copies of records, which are made for parents under this section, if the fee does not effectively prevent the parents from exercising their right to inspect and review those records.
2. An early intervention services contractor or early intervention services provider may not charge a fee to search for or to retrieve information under this section.

Q. Amendment of Records at Parent's Request
1. A parent of an eligible child, who believes that information in early intervention records collected, maintained, or used under this section is inaccurate or misleading or violates the privacy or other rights of the child/family, may request the service provider that maintains the information to amend the information.
2. The early intervention services contractor or early intervention services provider shall decide whether to amend the information, in accordance with the request, within a reasonable period of time after receipt of request.
3. If the early intervention services contractor or early intervention services provider 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 an administrative proceeding.

R. Opportunity for a Hearing
The early intervention services contractor or early intervention services provider, on request, shall provide the parent an opportunity for an administrative proceeding to challenge information in early intervention records that is inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child and family.

S. Administrative Proceeding Procedures Regarding Records
An administrative proceeding initiated pursuant to this section to challenge information in early intervention records shall be conducted according to procedures that include at least the following elements:
1. The administrative proceeding shall be held within a reasonable period of time after the early intervention services contractor or early intervention services provider has received the request.
2. The parent shall be given notice of the date, time, and place reasonably in advance of the hearing.
3. The administrative proceeding may be conducted by any party, including an official of the early intervention services contractor or early intervention service provider, who does not have a direct interest in the outcome of the administrative proceeding.

4. The parent shall be given a full and fair opportunity to present evidence relevant to the issues raised and may be assisted or represented by individuals of his or here choice, at his or her own expense, including an attorney.
5. The early intervention services contractor or early intervention services provider shall provide a written decision to the parent, within a reasonable period of time after the conclusion of the administrative proceeding. And
6. The decision of the early intervention services contractor or early intervention service provider shall:
   a. Be based solely upon the evidence presented at the administrative proceeding; and
   b. Include a written summary of the evidence and the reasons for the decision.

T. Result of Hearing

1. If, as a result of the administrative proceeding, the early intervention services contractor or early intervention service provider decides that the information is inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child and family, it shall amend the information accordingly and so inform the parent in writing.

2. If, as a result of the administrative proceeding, the early intervention services contractor or early intervention service provider decides that the information is not inaccurate, misleading, or otherwise in violation of the privacy or other rights of the child and family, it shall inform the parent(s) of the right to place in the records it maintains on the child a statement commenting on the information or setting forth any reasons for disagreeing with the decision of the agency.

3. Any explanation placed in the records of the child or family pursuant to this section shall be maintained by the early intervention services contractor or early intervention service provider, as part of the records of the child or family, as long as the record or contested portion is maintained.

4. If the records of the child and family or the contested portion is disclosed by the early intervention services contractor or early intervention service provider to any party, the explanation shall also be disclosed.

U. Consent

1. Consent of a parent shall obtained before personally identifiable information is:

   a. Disclosed to anyone other than the early intervention services contractor or early intervention service provider collecting or using the information under this section; or

   b. Used for any purpose other than meeting a requirement imposed by this section.

2. No early intervention services contractor or early intervention services provider shall release information from early intervention records to other agencies without the parent's consent, except as permitted by the Federal Education Rights to Privacy Act.

3. In the event that an early intervention services contractor or early intervention services provider seeks to over-ride a parent's refusal to release information from their child's early intervention records, the early intervention services contractor or

early intervention service provider may initiate an administrative hearing procedure regarding records.

V. Safeguards

1. Each early intervention services contractor and early intervention service provider shall protect the confidentiality of personally identifiable information at the collection, storage, disclosure, and destruction stages.
2. The early intervention services contractor and early intervention service provider shall be designated individuals responsible for assuring the confidentiality of any personally identifiable information.
3. All persons collecting or using personally identifiable information shall receive training or instruction regarding:
   a. The policies and procedures on protection of the confidentiality of personally identifiable information; and
   b. Federal Educational Rights to Privacy Act
2. The early intervention services contractor and early intervention services providers shall maintain, for public inspection, a current listing of the names and positions of those employees, within the agency, who may have access to personally identifiable information.

W. Destruction of Information

The early intervention services contractor and early intervention services provider shall inform parents when personally identifiable information collected, maintained, or used pursuant to this section is no longer needed to provide early intervention services to the child and family. The information shall be destroyed at the request of the parent(s). However, a permanent record of a child or family's name, address, phone number, and early intervention services may be maintained without time limitation.

X. Enforcement

Policies and procedures to assure the early intervention section of Individuals with Disabilities Education Act requirements, including sanctions, are located in the Monitoring Policy and Procedures and the Interagency Agreement.

Y. Department

If the State Lead Agency, or its authorized representatives, collected personally identifiable information regarding an eligible child that is not subject to Federal Educational Rights to Privacy Act (FERPA), the Secretary of Education shall apply requirements of the Statute (5USC522A) and regulations implementing those provisions.

N. Supervision and Monitoring of Programs

1. Policy

A. The State Lead Agency shall assure the general administration, supervision, and monitoring of programs and activities receiving assistance (funding) to ensure compliance.

B. The State Lead Agency shall be responsible for:

1. Monitoring of agencies, institutions, and organizations receiving assistance under the early intervention section of Individuals with Disabilities Education Act.
2. Enforcing any obligations imposed on those agencies under the early intervention section of Individuals with Disabilities Education Act regulations.
3. Providing technical assistance, if necessary, to those agencies, institutions, and organizations. And
4. Designing a process for correction of deficiencies that are identified through monitoring.

C. The State Lead Agency shall monitor programs and activities used by the state, whether or not these programs or activities are receiving assistance (funding) under the early intervention section of the Individuals with Disabilities Education Act, to assure that the state complies with the early intervention section of the Individuals with Disabilities Education Act.

2. Procedures

A. The State Lead Agency shall supervise and monitor programs receiving assistance (funding) to include:

1. A general schedule for monitoring. (A representative sample should be used if it is not feasible to monitor all programs in a given contract year.)
2. Notification in advance of the monitoring schedule for that year.
3. Program observation, interview, and inspection of records.
4. Compiling of findings, evidence, conclusions, and recommendations; a copy of the report will be sent to the program.
5. A provision for technical assistance.
6. A process for how corrective action plans are shared, by the monitoring team with the program, within 30 days of a monitoring event.
7. A process for follow-up to the corrective action plan. And
8. A provision for how contingencies of non-compliance will be instituted, if necessary.

B. Each participating agency delivering early intervention services shall develop or use their existing procedures regarding supervision and monitoring. Copies of the following will be sent to the State Lead Agency:

1. Monitoring report
2. Corrective action plan, and
3. Follow up to corrective action plan.

O. State Lead Agency Procedures for Resolving Complaints

1. Policy

A. The State Lead Agency shall resolve any complaint, including a complaint filed by an organization or individual from another state, that any public agency or early intervention services contractor or service provider is violating a requirement of the early intervention section of IDEA, by providing for the filing of a complaint with the State Lead Agency.

B. An individual or organization may file a written, signed complaint that includes a statement that a violation of a requirement of the early intervention section of Individuals with Disabilities Education Act or the regulations has occurred and the facts on which the complaint is based.

C. The State Lead Agency shall:

1. Widely disseminate the information about filing complaints to parents and other interested individuals, including parent training centers, protection and advocacy agencies, independent living centers, and other appropriate entities about the complaint procedures; and

2. Conduct in-service training sessions on the complaint process for Family Resources Coordinators.

2. Procedures

A. All complaints received by the State Lead Agency shall be reviewed, a written response prepared, and appropriate action taken within 60 days after receipt of the complaint.

B. The alleged violation must have occurred not more than one year prior to the date that the complaint is received by the State Lead Agency unless:

1. A longer period is reasonable because the alleged violation is continuing; or

2. The complaint is requesting reimbursement or corrective action for a violation that occurred not more than three years prior to the date the complaint is received by the State Lead Agency.

C. An independent on-site investigation shall be carried out if the State Lead Agency determines that such an investigation is necessary.

D. The complaint may submit additional information, either orally or in writing, about the allegations.

E. The State Lead Agency shall review all relevant information and make an independent determination, as to whether the public agency or service provider is violating a requirement of the early intervention section of the Individuals with Disabilities Education Act.

F. The State Lead Agency shall issue a written decision to the complainant and the public agency, early intervention services contractor, or service provider that addresses each allegation in the complaint and contains:

1. Findings of fact and conclusions; and

2. The reason for the final decision.

G. In resolving a complaint in which the State Lead Agency finds a failure to provide appropriate services, the State Lead Agency shall address:

1. How to remediate the denial of those services, including, as appropriate, the awarding of monetary reimbursement or other corrective action appropriate to the needs of the child and the child's family; and

2. Appropriate future provision of services for all infants and toddlers with disabilities and their families.

H. An extension of the 60 day time limit may occur only if exceptional circumstances exist with respect to a particular complaint.

I. If the public agency, early intervention services contractor, or service provider is determined to be in violation, the Sate Lead Agency shall:

1. Provide technical assistance related to corrective actions.

2. Negotiate corrective actions.

3. Assure corrective actions are implemented in a timely manner. And

4. If corrective actions are not implemented in a timely manner, funds will be held, funds will be repaid, and/or contract(s) will be terminated.

J. If a written complaint is received that is also the subject of an administrative proceeding or contains multiple issues, of which one or more are part of the administrative proceeding, the State Lead Agency shall set aside any part of the complaint that is being addressed in the administrative proceeding until the conclusion of the proceeding.

K. Any issue in the complaint that is not a part of the administrative proceeding shall be resolved within the 60 day timeline using the above complaint procedures.

L. If an issue is raised in a complaint that has previously been decided in an administrative proceeding involving the same parties:

1. The administrative proceeding decision is binding; and

2. The State Lead Agency shall inform the complainant of the decision.

M. A complaint alleging any public agency's, early intervention services contractor's or service provider's failure to implement an administrative proceeding decision shall be resolved by the State Lead Agency.

P. Policies and Procedures Related to Financial Matters

1. Policy

A. The State Lead Agency shall assure that all early intervention services relating to the child's developmental needs, under the early intervention section of IDEA, shall be at public expense and at no cost to eligible infants and toddlers and their families.

B. The State Lead Agency shall maintain the responsibility for administering the early intervention section of IDEA and its funds. State responsibilities are reflected in the Interagency Agreement.

C. If Medicaid or private insurance funds are available to pay for an early intervention service, they must be used first, unless this would cause the family to be unable to access the service. The inability of the parents of an eligible child to pay for early intervention services will not result in the denial of services to the child or the child's family.

D. A sliding fee scale may be established and implemented by the State Lead Agency for early intervention services, if program services costs exceed the funds available.

E. Prior to any changes in current state policy regarding fees for early intervention services, policies shall be revised to reflect which, if any, early intervention functions or services will be subject to fees, in which case a 60 day public comment period will occur.

F. IDEA funds for early intervention services may not be used to satisfy a financial commitment for services that otherwise would have been paid for in full or in part from another public or private source.

G. These federal funds may be used only for early intervention services that an eligible child needs, but is not currently entitled to under any other federal, state, local, or private source.

H. The State Lead Agency assures that the following functions and services shall be provided to all eligible children and families, at no cost.
   1. Child Find (early identification)
   2. Evaluation and Assessment
   3. Family Resources Coordination
   4. Administration and coordination of activities related to the development review and evaluation of Individualized Family Service Plans
   5. Implementation of procedural safeguards
   6. All components of the Infant Toddler Early Intervention Program

I. The State Lead Agency assures that:
   1. Fees shall not be charged for the services that a child is otherwise entitled to receive at no cost to families; and
   2. The inability of the parents of an eligible child to pay for services shall not result in denial of service to the child or the child's family.

J. The State Lead Agency shall identify and coordinate all available resources for the early intervention system including federal, state, local, and private sources.

K. The State Lead Agency shall update the information on the funding sources if a legislative or policy change is made under any one of those sources. The federal funding sources that are coordinated include:
   1. Title V of the Social Security Act (relating to Maternal and Child Health)
   2. Title XIX of the Social Security Act (relating to the general Medicaid program and Early Periodic Screening, Diagnosis and Treatment (EPSDT-Healthy Kids)
   3. Parts B and C of the Individuals with Disabilities Education Act (IDEA)
   4. The Head Start Act
   5. The Developmentally Disabled Assistance and Bill of Rights Act (P.L. 94-103)
   6. Department of Defense (CHAMPUS)
   7. Other federal programs.

L. The State Lead Agency shall assure the timely reimbursement of funds used under the early intervention section of IDEA.

M. The State Lead Agency shall assure that no services that a child is entitled to receive are delayed or denied because of disputes among public agencies regarding financial or other responsibilities.

2. Procedures

A. IDEA early intervention funds shall be used to pay for early intervention services for eligible children and families pending resolution of disputes among public agencies (see Resolution of Individual Disputes).

B. IDEA early intervention funds may be used to pay the provider of services pending reimbursement from the agency that has ultimate responsibility for payment.

C. The State Lead Agency may use early intervention funds to make payments pending resolution of dispute for:
   1. Child find
   2. Evaluation and assessments
   3. Development of Individualized Family Service Plans
   4. Family Resources Coordination, and
   5. Early intervention services.

Q. Interagency Agreements and Resolution of Individual Disputes

1. Policy

A. The State Lead Agency has entered into formal interagency agreement(s) with other state agencies involved in providing early intervention services.

B. Each agreement includes:

1. Financial responsibility of each agency for payment of early intervention services consistent with state law and the early intervention section of IDEA requirements.
2. Procedures for achieving a timely resolution of intra- and interagency disputes about payments for a given service or disputes about other matters related to Washington's Infant Toddler Early Intervention Program. And
3. Additional components necessary to assure effective cooperation and coordination among all agencies involved in early intervention services.

2. Procedures

A. Each agency shall resolve internal disputes, based on their respective procedures, in a timely manner.

B. In the event that an interagency dispute arises related this agreement or disputes about payments or other matters related to the state's early intervention program, the agencies may elect mediation to resolve the dispute or refer the dispute to the Dispute Board. In the event that mediation cannot resolve the dispute, it must be referred to the Dispute Board for timely resolution.

C. The Dispute Board will be appointed and convened as disputes arise. The following members will comprise the Dispute Board:

1. DSHS shall appoint a member to the Dispute Board.
2. DCTED shall appoint a member to the Dispute Board.
3. DOH shall appoint a member to the Dispute Board.
4. DSB shall appoint a member to the Dispute Board.
5. OSPI shall appoint a member to the Dispute Board.
6. The Chair of the State Interagency Coordinating Council is a member of the Dispute Board and will serve as the Board's Chair.

D. While disputes are pending, which involve payment for or provision of different required services, DSHS shall:

1. Assign financial responsibility to an agency to the extent of the agency's responsibility to pay for services, in accordance with the payor of last resort provisions. Or
2. Pay for the service in accordance with the payor of last resort provisions.

E. If in resolving a dispute it is determined that the assignment of fiscal responsibility was inappropriate, DSHS shall reassign responsibility to the appropriate agency.

F. Based on the outcome of the dispute resolution, DSHS shall make arrangements for reimbursement of costs incurred by the agency originally assigned the fiscal responsibility, if appropriate.

G. The decision of the Dispute Board shall be final.

H. To the extent necessary to ensure compliance with the Dispute Board's decision, if any agency involved in the dispute is not satisfied with the Dispute Board's decision, the agency may request the decision be referred to the Governor.

I. DSHS assures that services are provided to eligible infants and toddlers and their families in a timely manner, pending resolution of dispute(s).

R. Policy for Contracting or Otherwise Arranging for Service

1. Policy

A. The State Lead Agency shall assure that contracting or making other arrangements with public or private service providers, to provide early intervention services, meets Washington State standards and are consistent with the provisions of the early intervention section of IDEA.

B. The State Lead Agency shall contract or make other arrangements with public or private service providers, for the provision of early intervention services.

C. Each public or private service provider shall meet minimum standards for contracting, as defined in the following policy.

D. Awards or other arrangements shall be made through request for proposal, non-competitive awards, intra- or interagency agreements, personal service, and/or client services contracts.

E. Each agency responsible for providing early intervention services will use their respective contracting policies, to arrange for providing services.

Washington State
DEPARTMENT OF
SOCIAL & HEALTH
SERVICES

Administrative Policy No. 13.08

Subject: Purchased Goods and Services

Information Contact: Chief, Office of Administrative Resources (OAR)
MS 45823 (360) 664-6050

Authorizing Source:
Chapter 43.19 RCW
Department of General Administration, Office of State Procurement;
State Administrative & Accounting Manual, Office of Financial Management
Chapter 43.105 RCW
Information Services Board Information Technology Investment Policy
Information Services Board Information Technology Portfolio Policy
DSHS Administrative Policy 14.07 Control of Capital Assets

Effective Date: March 1, 1997

Revised: February 26, 2007

Approved By: Kathleen Brockman
Chief Administrative Officer

Sunset Review Date: February 26, 2009

Purpose

This policy sets forth general requirements to:

A. Ensure that all administrations make purchases for goods and services in compliance with state and federal law, Information Services Board (ISB) policy, and Department of Social and Health Services (DSHS) policy. The DSHS General Purchasing Authorities Letter provides specific direction.

B. Ensure that the appropriate fiscal office, Division Director or designee, and agency Chief Information Officer or designee (when appropriate) authorizes purchases.

Scope

A. This policy applies to:

1. All DSHS administrations and programs, including their institutions.

2. All purchases of goods, equipment, supplies, and services governed by Chapter 43.19 RCW.

3. All purchases of information technology (IT) purchased goods and services governed by Chapter 43.105 RCW, including telecommunications equipment and cellular phones.

B. This policy does not apply to:

Contracts governed by statutes other than Chapter 43.105 RCW and Chapter 43.19 RCW, such as personal services, client services, and interagency agreements. Refer to DSHS Administrative Policy 13.10 for information on these types of contracts.

Definitions

Central Purchasing Unit (CPU) - The organizational unit within the Administrative Services Division that provides technical assistance and consultation to DSHS staff regarding the procurement of purchased goods and services.

Cost Center – A two-digit number in the TRACKS system comprised of numerous Physical Address Codes that identifies a DSHS administration, institution, division, program or council.

Delegated Authority - The purchasing authority that the Department of General Administration (GA) and Department of Information Systems (DIS) delegates to DSHS with dollar amount limitations for purchasing goods, equipment, supplies, and services.

Equipment - Tangible property of a more or less permanent nature – other than land, buildings, or improvements to buildings – that is useful in carrying out routine and daily operations. Examples include machinery, tools, vehicles, furniture, and furnishings.

General Administration (GA) Purchased Goods and Services - The materials, equipment, supplies, and services necessary to accomplish routine, continuing, and necessary functions. Examples include, but are not limited to, all equipment, food, and janitorial services. Contractors perform their work according to specifications provided by the department. Chapter 43.19 RCW

governs purchased goods and services and allows GA to delegate purchasing authority to DSHS. (Refer to the Office of Financial Management Guide to Personal Service Contracting for a definition and comparison of purchased and personal services.)

General Purchasing Authorities Letter - A memo the Director of Administrative Services Division issues each July, which outlines the purchasing authority delegated to DSHS programs and their institutions. The General Purchasing Authorities Letter provides direction to programs and institutions regarding general and specific authorities for purchasing goods, equipment, supplies, and services.

Information Technology Acquisition Request (ITAR) – A form used to request approval for all single acquisitions and leases of IT equipment, software, or purchased services over $10,000. All acquisition requests over $10,000 must be approved by the Chief Information Officer and forwarded to the Central Purchasing Unit, along with the corresponding purchase request, for processing. Any items meeting DSHS Bulk Purchasing for Personal Computers and SmartBuy for IT Acquisition Standards are exempt from the ITAR approval process.

Information Technology (IT) Portfolio - The IT portfolio is a tool that supports IT decision-making. An IT portfolio demonstrates relationships among current and planned investments, and enhances the ability of decision-makers to assess the impact of IT investments on an agency's program, its infrastructure, and on the overall state of IT infrastructure.

Information Technology (IT) Purchased Goods and Services - IT goods and services include, but are not limited to, computer equipment, software/licenses, telecommunications equipment (including cellular phones), data processing, programming and analysis, equipment repair, and LAN support. Chapter 43.105 RCW and the Information Service Board (ISB) /Department of Information Services (DIS) policy govern IT purchased goods and services. (Refer to the most recent editions of the Office of Financial Management Guide to Personal Service Contracting or the Washington Purchasing Manual for a definition and comparison of IT purchased and IT personal services.)

Physical Address (Location/Sub-Location) Code- A nine-digit alphanumeric code in the TRACKS system that represents an organizational entity at a specific geographical site.

Purchase Order - A form generated by the TRACKS electronic purchasing module for the purchase of goods or services. A purchase order is a legally binding contract once the vendor has delivered the goods or services.

Purchase Request - A form generated from the TRACKS electronic purchasing module, used to request the purchase of goods, equipment, supplies and services.

Purchased Service Contract - A formal written agreement between DSHS and a contractor, used to provide specific terms and conditions related to the purchased service, which may include any exhibits, documents, and materials incorporated by reference.

Purchasing Coordinator - A person appointed by a Division Director to be responsible for purchases from a given cost center and to act as the liaison between the Central Purchasing Unit and the cost center for purchasing information.

Purchasing Representative - A person authorized by a supervisor and appropriate cost center coordinator to initiate purchase requests and generate purchase orders for a given cost center.

Record of Competition (ROC) - An internal tool administrations use to document competitively solicited responses from vendors in the TRACKS system. Administrations are free to develop their own ROC form, hard copy or electronic, to meet their internal needs.

Supplies - Assets DSHS consumes daily in the course of business. Examples include, but are not limited to, copy paper, pens, clothing and cleaning supplies.

TRACKS - The electronic purchasing and inventory system used within DSHS to track agency purchases and monitor fixed asset inventory.

Policy Requirements

A. All Administrations must:

1. Manage the purchase of goods, equipment, supplies, and services within their delegated authority as set forth in the DSHS General Purchasing Authorities Letter.

2. Use the TRACKS electronic purchasing system to process all purchase orders.

3. Use a Purchased Service Contract for purchases that CPU or CCS determine require a formal contract.

4. Submit a purchase request via TRACKS to CPU for all purchases exceeding their delegated authority, as outlined in the General Purchasing Authorities Letter. Purchases made using a state contract are not required to come through CPU for processing.

5. Submit a request for purchase of all telecommunications equipment (excluding cellular phones and personal wireless handheld devices) to Information Systems Services Division (ISSD) Telecommunications using the Request for Technical and Professional Services (RTPS) form (#17-015).

6. Maintain documentation for all competitively procured purchases within their delegated authority using a Record of Competition.

7. Consult with the ISSD Network Services, Wide Area Network (WAN) unit when purchasing equipment to initially connect, enhance existing connectivity, or add

new protocol and/or media streams to the DSHS WAN. This is necessary to ensure that utilization changes on the WAN are planned and to mitigate the possibility of hardware and/or software incompatibilities that might arise.

8. Obtain Information Services Board/DIS approval for acquisitions of IT resources as listed in the IT Investment Policy and the IT Investment Standards. Related DSHS investment standards are available in the DSHS IT Standards Manual

9. Acquire personal computers and laptops using the DSHS Bulk Purchasing for Personal Computers and SmartBuy for IT Acquisition Standards. Administrations must request any exceptions to these standards as outlined in Administrative Policy 15.20.

B. All Purchasing Coordinators must:

1. Submit a completed TRACKS access form to request access to the TRACKS system.

2. Act as liaison between CPU and purchasing representatives within their Cost Center.

3. Keep a current list of purchasing representatives having access to the TRACKS system and notify CPU of any changes or deletions, as necessary.

4. Ensure that all employees who are granted access to the TRACKS system as a purchasing representative or coordinator attend a purchasing training within 90 days or their access will be revoked.

5. Review the quarterly report of DSHS employees having access to the TRACKS system and submit any changes to CPU by the due date specified.

C. All Purchasing Representatives must:

1. Comply with all applicable purchasing rules and procedures as outlined in Chapter 43.19 RCW, Chapter 43.105 RCW, and all other authorizing sources as listed on the title page of this policy

2. Initiate purchase requests in the TRACKS system and generate purchase orders upon approval by a supervisor, or fiscal officer and Division Director, when appropriate.

3. Communicate any issues or concerns with the Cost Center Purchasing Coordinator and keep the Coordinator apprised of changes, as necessary.

D. The Central Purchasing Unit must:

1. Function as the DSHS liaison with the Department of General Administration and the Department of Information Services for the acquisition of equipment, supplies, services, rentals, and lease purchases, as governed by Chapter 43.19 RCW and Chapter 43.105 RCW.

2. Manage the purchase of goods, equipment, and services exceeding the authority delegated to DSHS administrations and their institutions.

3. Review purchased service acquisition requests and determine if they should be processed under a purchase order or referred to CCS to develop a Purchased Service Contract.

4. Procure Information Technology Purchased Goods and Services according to Information Services Board Policy.

5. Review orders daily to monitor compliance with purchasing rules and procedures, and communicate to the Purchasing Representative or Coordinator any corrections they must make.

6. Grant access to the TRACKS system after receiving the appropriate approvals on a TRACKS Access Form.

7. Conduct purchasing training, as needed, for DSHS employees throughout the state.

E. For authorization of equipment expenditures, DSHS administrations must obtain approval from:

1. The appropriate fiscal officer or designee via TRACKS.

2. The appropriate Division Director or designee via TRACKS.

3. The DSHS Chief Information Officer, or designee, for all purchases of IT equipment, software/licenses, or services of $10,000 or greater utilizing the Information Technology Acquisition Request (ITAR) process and form. Administrations may exclude from this requirement any items listed on the DSHS Bulk Purchasing for Personal Computers and SmartBuy for IT Acquisition Standards.

Washington State
DEPARTMENT OF
SOCIAL & HEALTH
SERVICES

Administrative Policy No. 13.10

Subject: Central Contract Services (CCS)

Information Contact: Central Contract Services
MS 45811 (360) 664-6200
http://asd.dshs.wa.gov/ccs/index.htm

Authorizing Sources: Chapter 39.29 RCW, Personal Services Contracts
Chapter 39.34 RCW, Interlocal Cooperation Act
RCW 41.06.142, Purchasing services by contract…
RCW 43.19.190, State purchasing and material control director…
Competitive contracting, chapter 236-51 WAC
Centennial Accord of 1989

Effective Date: August 1, 2000

Revised: June 22, 2006

Approved By: Kathleen Brockman
Chief Administrative Officer

Sunset Review Date: June 22, 2008

Purpose

This policy identifies the general process of developing Department of Social and Health Services within the scope defined below. This policy, and any procedures or guidelines

referenced is intended for internal use only. This policy is not intended, nor can it be relied upon, to create any substantive or procedural rights enforceable by any party involved in matters with the Department of Social and Health Services.

Scope

This policy applies to all DSHS organizational units governed by the "Authorizing Sources" listed above, including:

- Client service contracts
- Personal service contracts
- Interlocal agreements
- Intergovernmental agreements, including those with Indian Nations
- Purchased service contracts

This policy also applies to:

- Data sharing agreements reviewed by the Information Technology Security Administrator
- Other contracts as assigned by the Chief Administrative Officer or executive management

This policy does not apply to leases, easements, or contracts to purchase land or buildings. For contracts relating to these types of agreements, contact the DSHS Lands and Buildings Division at 360-902-8330.

Additional Guidance

- Administrative Policy 13.11, Monitoring Contractor Performance
- Administrative Policy 13.12, Competitive Solicitations and Procurements
- Administrative Policy 13.13, Insurance Requirements for Contracts
- "The DSHS Guide to Personal Services, Client Services, and Interlocal Contracting"

Definitions

Administration means the responsible DSHS administration, division, office, program, or similar organizational entity.

After-the-fact contract execution means a contract that DSHS staff signed **after** the department paid for services or the after contractor began work.

Agency Contracts Database (ACD) is the system used by DSHS for producing, tracking, and monitoring all DSHS personal service, client service, purchased service, Interlocal (interagency) or Intergovernmental contracts and agreements.

Central Contract Services (CCS) means the statewide DSHS headquarters contracting office in the Management Services Administration-Administrative Services Division.

Chief Administrative Officer means the individual reporting directly to the Deputy Secretary, Management and Operations, with executive authority responsible for all DSHS statewide agency policies and procedures pertaining to contracts under this policy.

Chief Information Officer means the individual in the Information Systems Services Division (ISSD) with executive authority responsible for information technology.

Client Service Contract means a contract for services provided directly to agency clients. (RCW 39.29.006[2])

Contract format means an electronic or hard copy contract template developed and/or approved by CCS. A contract format includes but is not limited to: data elements, general terms and conditions, and special terms and conditions. All approved contract formats are available in the ACD for use by authorized staff.

Competitive contracting means the process by which classified employees compete with businesses, individuals, nonprofit organizations, or other entities for the performance of services those employees have customarily and historically performed.

Contract management means any activity performed by DSHS staff on a day to day basis related to contracting for services. Such activities include, but are not limited to: decisions related to contracted services; contractor selection and screening; and contract preparation, coordination, and monitoring.

Contracts Administrator means the individual in Central Contract Services with oversight authority for DSHS statewide agency contracting procedures under this policy.

Data Sharing Agreement means an agreement between DSHS and one or more external entities for the sharing and safeguarding of electronic data. Data sharing agreement does **not** mean an agreement to lease or purchase computers or other IT equipment.

Division Director means the DSHS Division Director, or functional equivalent, with managerial oversight authority and responsibility for contracting staff and processes in a given Administration.

Interlocal Agreement means a contract or agreement between DSHS and any other public agency, political subdivision, or unit of local government of this state including, but not limited to: municipal corporations, quasi-municipal corporations, special purpose districts, and local service districts; any agency of state government; any agency of the United States; and any political subdivision of another state. An Interlocal agreement may acquire goods or services or both. Chapter 39.34 RCW, Interlocal Cooperation Act, governs Interlocal Agreements.

Intergovernmental Agreement means a contract or agreement between the department and any federally recognized Indian Tribe or Nation. Intergovernmental Agreements are governed by the Centennial Accord of 1989, Chapter 39.34 RCW, and applicable federal law, rule or executive order.

Information Technology Security Administrator (ITSA) means the individual in the Information Systems Services Division (ISSD) who is responsible for the administration of the DSHS information technology (IT) security program, including IT Security and Disaster Recovery. Specific duties of the ITSA are listed in Administrative Policy 15.15, Information Technology and Security.

Key contract coordinator means the individual(s) designated by the Division Director, responsible for contracting in a given Administration, to be the liaison between the Administration and CCS. The key contract coordinator has specific, direct responsibilities for DSHS contracting processes that are identified under A. 5. of this policy.

Personal service competitive procurement means a documented, open process for soliciting bids from potential contractors, and that results in selection of a bidder for the purpose of entering into a contract in which the consideration is $20,000 or more. Selection must be based upon specific criteria which may include a bidder's cost, ability, experience, reputation, responsiveness to time limitations or requirements, and quality of previous performance.

Personal Service Contract means a contract for services provided to DSHS by a consultant to accomplish a specific study, project, task, or other work statement. (RCW 39.29.006[7])

Personal service evidence of competition means a streamlined, documented, competitive process for procuring personal services, in the amount of $5,000 or greater, but less than $20,000, where a written request for proposals is sent to a minimum of three potential bidders and a contract is awarded based upon an evaluation of responses.

Purchased Service Contract means services provided by a vendor to accomplish routine, continuing, and necessary functions. This term includes, but is not limited to, services acquired under RCW 43.19.190 or RCW 43.105.041 for equipment maintenance and repair; operation of a physical plant; security; computer hardware and software maintenance; data entry; key punch services; and computer time-sharing, contract programming, and analysis. (RCW 39.29.006[9])

Secondary level of competition means the second level of a two tier, competitive process for certain personal or purchased services. In level one, vendors are selected for inclusion on a prequalified list of services. The second level is a competitive process for only those vendors who are on the prequalified list. This process is used when an Administration chooses to contract for the services provided by a vendor on the prequalified list.

Signing authority means the authority to sign contracts on behalf of DSHS.

Policy

The Secretary, under authority in chapter 43.20 RCW and RCW 43.19.190(3) as delegated by the Director of the Department of General Administration, delegates authority to the Contracts Administrator and CCS to sign contracts on behalf of the department. The Contracts Administrator may sub-delegate signing authority to department staff who meet the requirements of this policy.

The Contracts Administrator and CCS are authorized to establish and enforce statewide agency: procurement and contracting policies and procedures; minimum standards for staff with sub-delegated authority to sign contracts; minimum training requirements for staff who prepare, sign and/or monitor contracts; and standards for contract form and content, including general terms and conditions.

A. **Contract Management** CCS establishes and maintains statewide agency contracting procedures and requirements in the "DSHS Guide to Personal Services, Client Services, and Interlocal Contracting." CCS develops and revises "The Guide" with input from the key contract coordinators. "The Guide" is available on the CCS Intranet web site at http://asd.dshs.wa.gov/ccs/index.htm.

1. CCS is responsible for:

   a. Establishing and ensuring compliance with statewide agency contracting policies and procedures concerning contracts subject to this policy.

   b. Administering the Agency Contracts Database (ACD).

   c. Providing guidance, consultation, and technical assistance to Administrations related to contract management practices to ensure compliance with applicable contracting law, regulations, policies, and procedures.

   d. Coordinating the development of and controlling general terms and conditions for all DSHS contracts and approving any modifications to the general terms and conditions.

   e. Creating and/or approving contract formats for use by authorized DSHS staff in developing contracts subject to this policy.

   f. Loading approved contract formats onto the ACD.

   g. Reviewing, approving, and executing all contracts for:

      - Personal services of $5,000, or more;
      - The Secretary's and Deputy Secretaries' Offices, as requested;
      - Divisions and offices reporting to the Chief Administrative Officer;

- The Financial Services Administration;
- Indian Policy Support Services;
- The Human Resources Division; and
- Outside entities that involve more than one DSHS Administration.

h. Developing and executing all contracts for purchased services.

i. Final DSHS review and approval on language developed by Administrations for preapproved and semi-custom contract formats.

j. Reviewing and executing:

- All default terminations for all Administrations; and
- Terminations for convenience if requested by key contract coordinators; and
- Terminations due to changes in funding if requested by key contract coordinators.

k. Controlling access to the ACD and signing authority for contracts under this policy. (See C. Signing Authority, below.)

l. Ensuring IT-related Personal Service Contracts are in compliance with the Department of Information Services, Information Services Board and DSHS ISSD requirements.

m. Providing legal review and assistance regarding contract management, contract monitoring, and other contracting matters to Administrations. (**Note**: In situations requiring legal advice or opinions, CCS encourages Administrations to contact assigned counsel at the Office of the Attorney General.)

n. Coordinating and assisting Administration staff with the resolution of contracting issues that cross administrations.

o. Managing and conducting personal service and purchased service competitive procurements, including secondary levels of competition.

p. Managing and conducting all personal service and purchased service evidence of competition procurements for information technology services.

q. Serving as the DSHS liaison with the Office of Financial Management (OFM), the Department of General Administration, the State Auditor's Office, and other state agencies on contracting matters.

r. Providing training to DSHS staff on contracting. (See D. Training, below.)

s. Providing quarterly reports from data entered in the ACD on after-the-fact contract executions to Division Directors and key contract coordinators. To permit time for review and verifying payment information, key contract coordinators will be provided an advance copy of the quarterly reports 10 business days prior to CCS sending reports to Division Directors. (See E. After-the-Fact Contract Executions, below.)

2. The Chief Information Officer is responsible for approving, prior to contracting, all Information Technology Acquisition Requests (ITAR) for IT projects over $10,000. (http://intra.dshs.wa.lcl/itstandards/ITAR.stm)

3. The ITSA is responsible for reviewing and approving data sharing agreements.

4. Division Directors are responsible for:

   a. Designating key contract coordinators. Each Administration must designate at least one employee as the key contract coordinator, who is the liaison between the Administration(s) and CCS. The designation must be submitted to CCS in writing and signed by the Division Director responsible for contracting in that Administration.

   b. Overseeing signing authority sub-delegated by CCS to employees in his or her Administration. (See C. "Signing Authority," below.)

   c. Approving exceptions to section E. After-the-Fact Contract Executions, below.

5. DSHS key contract coordinators are responsible for providing guidance and support to staff in their Administrations, by:

   a. Following this policy.

   b. Following contracting procedures established by CCS in "The Guide," available on the Management Services Administration-Administrative Services Division-CCS Intranet website.

   c. Ensuring that Administration staff receive information presented and discussed at all key contract coordinator quarterly meetings facilitated by CCS.

   d. Applying the general terms and conditions developed by CCS in all DSHS contracts.

e. Ensuring Administration contracts subject to this policy are developed in accordance with this policy.

f. Ensuring that contract terms are approved by CCS and that contract documents are recorded properly in the ACD **before** using formats developed by outside agencies when DSHS is the contractor.

g. Drafting, in collaboration with CCS, preapproved and semi-custom contracts for final approval by CCS.

h. Developing, reviewing, approving, and executing client service contracts and maintaining related records.

i. Developing, reviewing, approving, and executing "under $5,000" personal services contracts.

j. The ITSA is responsible for the review of data sharing agreements and contracts that contain data sharing language. The method of data access and the security provisions of the agreements must be approved by the ITSA before they are finalized.

k. Assuring all IT related personal service projects are approved by the CIO and documented through the ITAR process criteria located at the following Intranet web site: http://intra.dshs.wa.lcl/itstandards/ITAR.stm

B. Competitive Contracting

Under RCW 41.06.142, the department may competitively contract for services that state employees have customarily and historically provided. Chapter 236-51 WAC generally govern the department's activities related to competitive contracting. Administrations and CCS must work together to ensure that requirements in statute and rule are consistently met.

1. Before contracting for any new service, or modifying the scope of existing services, the responsible Administration must conduct an analysis of the service to be contracted to determine whether the service was customarily and historically provided by employees in classified service.

2. CCS must follow chapter 236-15 WAC when conducting any competitive procurement for services when the responsible Administration determines that the service is or has been customarily and historically provided by employees in classified services. (See also Administrative Policy 13.12, Competitive Solicitations and Procurements.)

C. Signing Authority

1. Subject to conditions in this section, the Contracts Administrator sub-delegates signing authority on behalf of the Secretary to qualified Administration staff, appropriate to meet the business needs of the Administration as determined by the Division Director requesting signing authority.

2. All DSHS staff managing or monitoring contracts subject to this policy must complete contracting training required by statute and CCS before receiving signing authority.

3. Signing authority must be requested by the responsible Division Director using the "ACD Access/Signing Authority" request form available on the Management Services Administration -Administrative Services Division-CCS Intranet web site.

4. The Contracts Administrator must e-mail the requesting Division Director a response to the signing authority request within three business days of the request being made. The Contracts Administrator must provide a written explanation for denied requests to the Division Director specifying what criteria were not met and make recommendations for how the employee may meet the criteria. CCS may offer to provide special training and/or mentoring to assist the employee in developing sufficient skill.

   If the Division Director does not agree with the Contracts Administrator's decision, the Director may ask the Chief Administrative Officer to resolve the matter.

5. A DSHS employee must not execute any contract subject to this policy unless CCS has sub-delegated signing authority under this policy.

6. DSHS staff must use the ACD to create and execute all contracts subject to this policy.

7. The Contracts Administrator may rescind delegated signing authority, after attempting to resolve the matter with the responsible key contract coordinator, if signing authority is not exercised in accordance with this Policy, if the requirements in the "The Guide" have not been met, as requested by the responsible Division Director, or as directed by executive management.

   a. The Contracts Administrator must provide reasonable notice to the responsible Division Director before rescinding signing authority, and must document the decision.

   b. The responsible Division Director may follow the procedure in subsection 4., above, to appeal a decision to rescind signing authority.

D. Training

1. CCS will provide contracts training to DSHS staff subject to this policy.

2. CCS contracts training must meet the requirements of RCW 39.29.120. CCS will establish other required training for contracting staff seeking signing authority.

3. All DSHS staff responsible for signing or managing contracts subject to this policy must satisfactorily complete CCS contracts training, as required by RCW 39.29.120, and other required contracts training before CCS sub-delegates authority to sign such contracts.

4. Minimum training requirements will be published in the "The Guide" and on the CCS web site: http://asd.dshs.wa.gov/ccs/index.htm.

E. After-the-Fact Contract Executions

1. All Administrations must execute written contracts in accordance with this policy for all services governed by "Authorizing Sources" cited above. DSHS staff must not make payment for services until such contracts are executed.

2. Each Administration must ensure local procedures are in place to prevent after-the-fact contract executions and to address corrective action, as appropriate, to meet the above goal. CCS will provide assistance to the Administration, if requested by the key contract coordinator or executive management.

3. The Contracts Administrator must notify the Chief Administrative Officer and the responsible Administration of any egregious instances in which a contract was not fully executed prior to the period of performance ending. CCS will work with the Administration, if requested by the key contract coordinator or executive management, to correct the presenting situation and prevent recurrence.

4. The Contracts Administrator may request the affected Administration to submit a corrective action plan to the Chief Administrative Officer if CCS identifies a pattern of after-the-fact contract executions that does not show improvement.

F. Attorney General Approval

Some contracts may need to be approved as to form by assigned counsel at the Attorney General's Office. (RCW 43.10.030[6]). Generally, if the contract is based on a model form that already has been approved, it is not necessary to get Attorney General Approval as to Form. However, if the Administration is entering into a long-term or important contract, the contract does not have a "termination for convenience" clause, or if the Administration has concerns about a contract, it should seek AGO Approval as to Form.

Washington State
DEPARTMENT OF
SOCIAL & HEALTH
SERVICES

Administrative Policy No. 13.11

Subject:	Monitoring Contractor Performance
Information Contact:	Central Contract Services MS 45811 (360) 664-6200
Authorizing Sources:	Chapter 39.29 RCW, Personal Services Contracts Chapter 39.34 RCW, Interlocal Cooperation Act Chapter 43.19 RCW, Department of General Administration Chapter 43.105 RCW, Department of Information Services Chapter 10, Washington State Accounting and Administrative Manual, Office of Financial Management
Effective Date:	April 17, 2000
Revised:	March 1, 2005
Approved By:	Kathleen Brockman Chief Administrative Officer
Sunset Review Date:	March 1, 2007

Purpose

This policy establishes requirements for staff designated responsible by their Administrations for monitoring contractor performance to reasonably ensure: (1) the Department of Social and Health Services (DSHS) receives goods and services for which it paid; and (2) contractors meet the scope of work and specifications identified in contracts.

Scope

This policy applies to all client service contracts, personal service contracts, purchased service contracts, data sharing agreements, and Interlocal agreements.

This policy does not include core provider agreements administered by the Division of Alcohol and Substance Abuse or Medical Assistance Administration. This policy does not apply to staff who perform quality assurance reviews through facility licensing or certification processes unless the Administration specifically designates in writing that in addition such staff are performing contract monitoring activities.

Additional Guidance:

For further information or additional guidance, please refer to the following DSHS Administrative Policies:

13.08, Information Technology (IT) Purchased Goods and Services
13.09, Purchased Goods and Services
13.10, Central Contract Services
13.13, Insurance Requirements for Contracts
16.05, Internal Control Risk Assessment and Self-Evaluation

Definitions:

Administration means the affected DSHS administration, division, office, program, or similar.

Agency Contracts Database (ACD) is the DSHS information system used for the creation, tracking and monitoring of all DSHS client service, purchased service, personal service contracts, and Interlocal agreements. The ACD provides an efficient means for authorized staff to produce legally sufficient contracts, consistent in form and content.

Certificate of Insurance is a document providing evidence that the contractor has purchased appropriate types and limits of insurance for the services provided. Insurance transfers the financial and legal responsibility from DSHS to the contractor.

Client Service Contract means a contract for services provided directly to DSHS clients. Examples of client services include: medical and dental services; employment and training programs; and, residential care. (See RCW 39.29.006[2]). Client services are exempt from the competitive procurement and filing requirements of Chapter 39.29 RCW.

Contract Management means day-to-day activities related to contracting out of goods or services, including contractor screening, contractor selection, contract preparation, and monitoring contractor performance

Corrective Action means an informal administrative process to assist or guide contractors when a problem with contract compliance is identified.

Data Sharing Agreement means any agreement between the department and one or more external entities for the sharing and safeguarding of electronic data. Data sharing agreement does not mean an agreement to lease or purchase computers or other IT equipment.

Interlocal Agreement means a contract or agreement between DSHS and any public agency, political subdivision, or unit of local government including, but not limited to: municipal corporations, quasi-municipal corporations, counties, special purpose districts, and local service districts; any agency of state government; any agency of the United States; any Indian Nation recognized as such by the federal government; and any political subdivision of another state. The contract may acquire goods or services or both. Chapter 39.34 RCW, Interlocal Cooperation Act, governs Interlocal Agreements.

Performance Monitoring includes any *planned* and ongoing or periodic activity carried out by staff designated responsible by their Administrations for monitoring contractors that measures and ensures contractor compliance with the terms, conditions, and requirements of a contract. The planned activities may include responding to unanticipated concerns or stakeholders' complaints.

Performance-Monitoring Guidelines means an Administration's internal policy and procedure document that identifies program risks, establishes performance-monitoring practices, and assigns staff to develop performance-monitoring plan, and carry out monitoring activities.

Performance-Monitoring Plan means an Administration's plan for ensuring contractor compliance with contract requirements. The performance-monitoring plan must be based on a written risk assessment and *recorded* in the ACD.

Personal Service Contract means a contract for services that are provided to DSHS, and that accomplish a specific study, project, task, or other scope of work. (See Chapter 39.29 RCW.) This term does not include purchased services, as defined in RCW 43.19.190 or 43.105.041.

Purchased Service Contract means a contract for services or goods that are provided to accomplish routine, continuing, and necessary functions. These services include, but are not limited to: equipment maintenance and repair; janitorial services; security; computer hardware and software installation and maintenance; data entry; and, programming services. (See Chapter 43.19 and 43.105 RCW.)

Risk Assessment is the process of evaluating exposure to harm or loss that could arise from some activity associated with a contract for services. This process is active throughout the entire life of the contract, beginning with the Administration's pre-contracting process, continues through contractor selection, evaluating the contractor's performance, and post-contract factors such as the contractor's record retention and/or data destruction. (Note: Administrative Policy 16.05 requires an annual Risk Assessment and Self-Evaluation for the purposes of maintaining internal controls over core business functions. Risk assessment, as defined in this policy, establishes requirements specific to monitoring contractor performance.)

Risk Factors associated with contracting are those that may increase the likelihood that the contractor will not:

- Meet the goals of the contract;
- Provide contracted services safely, effectively and efficiently;
- Protect DSHS and/or its clients from loss or injury;
- Provide reliable financial data regarding how contracted dollars are spent; and/or
- Comply with applicable laws, regulations, and defined policies and procedures.

Single Audit Act is a federal law administered by the Office of Management and Budget (http://www.whitehouse.gov/omb/circulars/a133/a133.html) that sets forth standards for obtaining consistency and uniformity among federal agencies for the audit of states, local governments, and non-profit organizations expending federal awards. In relevant part, it requires state agencies (DSHS) to identify and monitor all federal subrecipients and for subrecipients receiving $500,000, or more, in federal awards from all sources, to have an annual audit.

Subrecipient means a non-federal entity that receives from a pass-through entity (DSHS) federal awards, and expends such funds to carry out a federal program but does not include an individual who is a beneficiary of such a program. A subrecipient may also be a recipient of other federal awards received directly from a federal awarding agency. (For further guidance on federal subrecipient status, contact the Office of Accounting Services.)

Policy:

A. Monitoring of Client Service Contracts, Personal Service Contracts, Purchased Service Contracts, data sharing agreements, and Interlocal Agreements.

Each Administration with responsibility for contract management must:

1. Develop contractor performance-monitoring guidelines with internal policies and procedures consistent with this administrative policy. Guidelines must designate staff who have responsibility for each of the tasks required by this policy.

2. Conduct a risk assessment of *each type of service* to be contracted, for example: Individual Providers; boarding homes; training; psychological evaluations; protective payee; janitorial services; IT purchased services; and the like. The risk assessment must also include types of insurance needed based on the services contracted.

3. Develop contract risk assessment and performance-monitoring tools to be used for *individual contracts and contractors*. Samples are available on the CCS web site (CCS Home Page) under Contract Monitoring.

4. Develop risk assessment and performance-monitoring plans for specific contracts.

Risk assessments for specific contracts must identify risks presented. Examples are: the number of contracts; services that include care of children or vulnerable adults; total dollar value of services; years of experience; complexity of service being delivered; negative history with program or contractor; and so forth.

Performance-monitoring plans must:

a. Include a brief description of the type of services contracted and covered by the performance-monitoring plan;
b. Identify mandatory performance-monitoring activities; for example, site visits, invoice review, determining subrecipient status, complying with federal funding requirements, complying with licensing requirements, etc.;
c. Identify contractor specific performance-monitoring activities. In determining the activities the responsible staff must:

    (i) Identify risk factors that were considered in the risk assessments on the program and on the specific contract;
    (ii) Prioritize risks and the performance-monitoring activities necessary to address highest risks first; and
    (iii) Describe the frequency and method of performance-monitoring activities, for example, on-site review, billing documentation review, etc.
    (iv) Record performance-monitoring activities in the ACD.

d. Detail corrective action procedures that will be used to follow-up on deficiencies noted during performance-monitoring activities. (See C. below.)

B. Entering Performance-Monitoring Activities in the ACD

1. The Assistant Secretary or designee in each Administration must designate in writing staff responsible for monitoring contractor performance who must enter into the ACD all:

    a. Performance-monitoring activities, using the Monitoring Screen, for each contract designated in the Administration's performance-monitoring plans.
    b. Criminal history background checks, using the Checks Screen, which is part of the Contractors Menu on the ACD.
    c. Insurance coverage, using the Insurance Screen (in conjunction with the Monitoring Screen where activities to monitor compliance with insurance requirements can be recorded).
    d. Federal subrecipients, using the Contract Information, CFDA Number, and Financial Screens.
    e. Other monitoring activities.

2. Each Administration must submit to CCS a list of those staff designated with responsibility for carrying out contractor performance-monitoring activities, and notify CCS by e-mail of changes as they occur.

   For further specific guidance, Administrations should contact CCS.

C. Corrective Action

In many circumstances, performance monitoring may enable the responsible Administration to identify problems early and take appropriate action allowing the contractor opportunity to correct the deficiency. There may be instances, however, in which the contractor fails to comply or, under egregious circumstances, it may not be advisable to extend to the contractor an opportunity to comply. Administrations have the following formal corrective action options:

1. Suspend placement or referral of clients.

2. Withhold payment or collect overpayment through the DSHS Office of Financial Recovery. (See DSHS Administrative Policy 10.02.)

3. Terminate the contract for convenience, after consultation with CCS and the Administration's AAG.

4. Terminate the contract for default. (All terminations for default are conducted by CCS.)

5. Request CCS to make a referral to the Division of Fraud Investigation. (See DSHS Administrative Policy 10.06.)

D. Consultation and Training

1. CCS must provide relevant training, consultation, and technical assistance regarding performance monitoring for client service contracts, personal service contracts, purchased service contracts, data sharing agreements, and Interlocal Agreements.

2. Each affected Administration must ensure that staff who monitor contractor performance are trained adequately, to include successful completion of all relevant CCS Contracts Academy training.

E. Exceptions to this Policy

An exception to this policy requirement may be approved by the DSHS Contracts Administrator. The request must be in writing detailing the justification for the exception.

S. Data Collection

1. Policy

A. The State Lead Agency has procedures to compile data on the statewide system. This shall include a process for collecting data from the various agencies and early intervention services contractors and service providers in the state. Such data shall be provided at the time and in the manner specified by the Secretary of the United States Department of Education.

B. The State Lead Agency shall compile data on:
   1. The number of infants and toddlers with disabilities, by race and ethnicity, who are receiving early intervention services.
   2. The number of infants and toddlers with disabilities, by race and ethnicity, who stopped receiving early intervention services because of program completion or for other reasons. And
   3. Other information required by the Secretary of the U.S. Department of Education.

C. The State Lead Agency may use appropriate sampling methods. Sampling methods will be described, if used to report to the Secretary of the Department of Education.

2. Procedures

A. The State Lead Agency shall compile data by:
   1. Requiring the early intervention services contractor to submit data reports, which include the following:
      a. The number of children receiving services, by race and ethnicity.
      b. The number of children by race and ethnicity, who stopped receiving services because of program completion, or other reasons.
      c. The number and type of services provided.
      d. The number and type of service professionals involved in service delivery.
      e. The settings where early intervention services are provided. And
      f. Other information requested by the State Lead Agency, SICC, or U.S. Department of Education.
   2. Gathering data from existing information systems managed by state agencies who administer funds or provide early intervention services.

B. In each case, the data collection forms to be used will be designed to gather information required by the U.S. Department of Education, Office of Special Education Programs, and will be based on the forms approved for states to report the data required by the Secretary of the U.S. Department of Education.