

EVALUATION AND ASSESSMENT

The Department of Health for the State of Hawaii has made evaluations and assessments available for each eligible infant and toddler in accordance with §303.322 since October 1, 1990. The Department is responsible for ensuring that these requirements are implemented by all affected public agencies and service providers in the State.

Definitions. The following are the applicable definitions which will be used relative to this component:

1. **Evaluation** means the procedures used by appropriate qualified personnel to determine an infant or toddler's initial and continuing eligibility as defined in HRS §321-351, including determining the developmental status of the infant or toddler in the areas of cognitive development, physical development (including hearing and vision), communication development, social or emotional development, and adaptive development.
2. **Assessment** means the ongoing procedures used by appropriate, qualified personnel throughout the period of the infant or toddler's eligibility to identify:
 - a. The infant or toddler's unique strengths and needs in collaboration with parents;
 - b. The family's resources, priorities, and concerns related to the development of the infant or toddler;
 - c. The nature and extent of early intervention services that are needed by the infant or toddler and their family to meet these unique strengths and needs; and
 - d. This assessment process will include whatever reassessments are needed prior to the annual, or earlier, review of the IFSP.

Policies for Child and Family Assessment. The following general policies have been adopted by the Council to facilitate a family-centered assessment process:

- * Families will be given repeated opportunities over time to identify their resources, priorities, and concerns.
- * A "For Family" checklist will be provided to the family prior to the IFSP interview which will enable them to be prepared to identify areas of information, needed services and supports.
- * The conducting of the assessment in their home will be offered as an alternative to the family.

- * Every effort will be made to establish a partnership with the family to maximize parent participation in the assessment process.
- * The family assessment will focus only on assessing family strengths as they relate to family identified needs.
- * Assessments will be conducted in more than one setting and over time.
- * Professionals will share all results with the family, both orally and in writing, using language free of jargon.
- * The process will allow for an interim IFSP in situations where the infant or toddler is clearly in need of services, but the assessment has not been completed.
- * Assessments will be conducted with a respect for the family's privacy, integrity, and ability to make decisions for themselves.
- * In establishing child and family outcomes, the family will be provided the opportunity to speak first, with the outcomes generated by the family.
- * The outcomes will be written in the language of the family.
- * The family will be able to prioritize their child and family outcomes.

Evaluation and Assessment of the Child. The evaluation and assessment of each infant and toddler will be conducted by a multi disciplinary team, determined by the unique strengths and needs of the individual infant or toddler. Each team member will meet the standards as established by the Personnel Standards Component. The Department assures that these personnel will have been trained to use appropriate methods and procedures. The Department further assures that the evaluation and assessment will be based on informed clinical opinion.

Each evaluation and assessment will include the following components:

1. A review of the infant or toddler's current health records and medical history;
2. An evaluation of the infant or toddler's level of functioning in each of the following developmental areas:
 - a. Cognitive development,
 - b. Physical development, including vision and hearing,
 - c. Communication development,
 - d. Social or emotional development,
 - e. Adaptive development; and

3. An assessment of the infant or toddler's unique strengths and needs and identification of appropriate early intervention services in each of the foregoing areas.

Family Assessment. The family assessment has been designed to determine the resources, priorities, and concerns of the family related to enhancing the development of the child. Policies have been approved by the Council which would assure that the parents understand that this assessment is voluntary, and will in no way jeopardize the provision of needed services by the infant or toddler.

Any assessment conducted will be conducted by personnel trained to utilize appropriate methods and procedures. The assessment will be based on information provided by the family through a personal "talk-story" interview. The assessment will incorporate the family's description of its strengths and needs related to enhancing their infant or toddler's development.

The family assessments will be family-directed and designed to determine the resources, priorities and concerns of the family to enhance the development of their child.

Timelines. The evaluation and initial assessment of each child and family will be completed within 45 days of referral. In the event of exceptional circumstances that make it impossible to complete the evaluation and assessment within 45 days of referral, for example if the infant or toddler is ill, these exceptional circumstances will be documented. If appropriate, an interim IFSP, under presumptive eligibility, will be implemented.

Nondiscriminatory Procedures. The Department assures that nondiscriminatory procedures will be utilized in all evaluation and assessment activities. These procedures include the following requirements:

1. Tests and other evaluation materials and procedures are administered in the native language of the parents or other mode of communication, unless it is clearly not feasible to do so;
2. All assessment and evaluation procedures and materials that are used are selected and administered so as not to be racially or culturally discriminatory;
3. No single procedure is used as the sole criterion for determining a child's eligibility for early intervention services; and
4. Evaluations and assessments are conducted by qualified personnel.