



NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE
EARLY INTERVENTION PROGRAM

Table for Ongoing Service Coordination (OSC) Provision

Ongoing Service Coordination

1. Parents receive a copy of the applicable documents after an IFSP document.
2. OSCs ensure that services are given at the level specified in the IFSP.
3. Progress notes are transmitted to the Regional Office prior to the IFSP meeting.



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1. Parents receive a copy of the applicable documents after an IFSP meeting.

Federal Law and Regulations

34 CFR 303.23 (b) (4)

(b) Specific service coordination activities. Service coordination activities include—

(4) Coordinating and monitoring the delivery of available services.

New York City Policy and Procedure Manual as Amended

PP 5-C-8



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2. OSCs ensure that services are given at the level specified in the IFSP.

Federal Law and Regulations

34 CFR 303.23 (b) (4)

- (b) Specific service coordination activities. Service coordination activities include—
- (4) Coordinating and monitoring the delivery of available services.
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New York State Laws and Regulations Citations

10 NYCRR 69-4.6 (b) (1, 4)

(b) Service coordination shall be an active ongoing process that involves:

- (1) assisting parents of eligible infants and toddlers in gaining access to the early intervention services and other services identified in the Individualized Family Service Plan;
- (4) facilitating the timely delivery of available services.

10 NYCRR 69-4.6 (c) (4 - 7)

(c) Specific service coordination activities shall include:

- (4) coordinating and monitoring the delivery of services.
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**New York State Department of Health – Bureau of Early Intervention
IFSP Implementation Tool Kit for Service Coordinators**

**GUIDANCE FOR ONGOING SERVICE COORDINATORS
IFSP IMPLEMENTATION**

I. Arrange for providers to deliver Early Intervention Program services

1. Consult with the initial service coordinator immediately regarding any scheduling or other demographic needs that the family may have that will impact the assignment of providers
2. Review the IFSP to identify service needs, including type, frequency, specialties, etc.
3. Contact parents to confirm scheduling, service, and other needs
4. Identify providers who can deliver services in the geographic area of service provision, with consideration for providers' special expertise that may be needed by a child/family*
 - a. Use the search functionality in NYEIS (see documentation for NYEIS Version 2.0)
5. Contact providers to determine availability; request reply within two days
 - a. E-mail can be used as a resource for canvassing providers
 - i. Information regarding service needs such as specialty, service type, frequency, length, geographic area, etc., can be sent
 - ii. E-mail can be sent to multiple agencies/individuals at one time, increasing the likelihood of identifying available providers quickly
 - iii. Reminder: e-mail is not secure. Child and family identifying information should not be included in emails to providers
6. Make frequent and persistent attempts to contact providers if a timely reply is not received
7. Receive verbal commitment from provider(s) who is available to deliver services
 - a. Identify for provider the date by which services must begin
 - b. Identify the provider's planned service start date
8. Maintain documentation in case notes of all efforts to identify providers to deliver services
9. Amend service authorizations with assigned provider information and submit for municipal authorization
10. Follow up frequently with municipal staff to ensure amended service authorizations are processed
11. Ensure that service authorizations are issued, received, and accepted in NYEIS by assigned providers



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II. Ensure implementation of the child’s and family’s IFSP, in accordance with the IFSP, including ensuring the timely delivery of Early Intervention Program services within 30 calendar days from the projected dates for initiation of services as set forth in the plan. The projected dates for the initiation of services in the IFSP must be as soon as possible after the parent provides written consent for the service(s) in the IFSP, except in circumstances of intermittent or infrequent service delivery planned by the IFSP team and documented on the IFSP to occur more than 30 calendar days after the parent has signed the IFSP and provided written consent for the services.

1. Ensure that providers have IFSP and parent contact information
2. Facilitate contact between providers and parents
3. Offer and provide assistance as needed by providers and parents to facilitate scheduling and provision of the first service session
4. Follow up with providers and parents frequently to ensure the scheduling and first date of service occurs within the required timeframe
5. Document in service coordination notes and NYEIS, where applicable, all circumstances related to the start of IFSP services, including all factors which affect timeliness, especially family circumstances, and all steps taken to facilitate timeliness

**New York State Department of Health – Bureau of Early Intervention
Early Intervention Provider Agreement**

XII. El Model Specific Responsibilities

A. Service Coordination

A25. Provider shall ensure that the IFSP, including any amendments thereto, is implemented in a timely manner within thirty (30) days of parent consent to the IFSP, or if the projected date for the initiation of a service is greater than thirty (30) days of parent consent to the IFSP, not later than thirty (30) calendar days after the projected date for initiation of the service.

A26. Provider shall in consultation with the service Provider and the family/caregiver continuously seek the appropriate services and situations necessary to benefit the development of the child for the duration of the child's EIP eligibility, including providing appropriate referrals for families to access social and mental health services.



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A27. When notified by a Provider or by otherwise becoming aware of a child's absence from more than three (3) scheduled sessions for the delivery of services, Provider shall contact the child's parent/family to ascertain the reason for any absences and immediately notify the EIO regarding the absences, reason for such absences and whether there is a need to modify an existing IFSP.

New York City Policy and Procedure Manual as Amended

PP 6-A-1, PP 6-A-2



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3. Progress notes are transmitted to the Regional Office prior to the IFSP meeting.

New York State Department of Health - Early Intervention Provider Agreement

VI. Documentation and Recordkeeping

- E. Provider shall make periodic progress notes summarizing the effectiveness of the service and the progress being made toward outcomes included in the child's and family's IFSP. Progress notes shall be made at a minimum frequency of twice during the IFSP yearly cycle - for six month IFSP reviews and for the annual IFSP review. The Department may direct that the progress notes be made in a certain format or manner. Progress notes shall be included in the child's record and shall be available upon request by the service coordinator, Municipality, or Department.
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New York City Policy and Procedure Manual as Amended

Policy 5-C-2, 5-C