Collaboration between Early Intervention and Early Head Start

Introduction

Early Intervention (EI) and Early Head Start (EHS) are two distinct early childhood programs. EI serves families with infants and toddlers with developmental delays and disabilities. EHS programs provide family-centered services to low-income families with children under the age of three. These services are designed to promote child development and to empower parents to fulfill their roles as parents and move toward self-sufficiency. By working together, at-risk children and families can benefit from the more intensive services they receive in combination. EI and EHS programs work to connect families to services and resources that might be provided by other programs. To ensure the coordination of both EI and non-EI services that a family is receiving, or could receive, local EI programs should consider ways to partner with EHS providers in their communities. This document details considerations for collaboration between EI and EHS.

How can EHS programs support EI programs?

EHS programs can be valuable partners to local EI programs. Head Start standards require that at least 10% of an EHS program’s enrollment should be children with an Individualized Family Service Plan (IFSP). An EHS program might engage in some of the following activities that would benefit local EI programs:

- Assist in the early identification of children potentially eligible for EI
- Conduct developmental screening and ongoing monitoring of children
- Provide weekly home visits and regular socializations
- Support parents’ understanding of the importance of intervening early when a child has a developmental delay or disability
- Make referrals to EI for potentially eligible children
- With parent consent, share screening, assessment, and observations with the IFSP team and participate in IFSP meetings
- Serve as a potential funding source for EI services (e.g., nursing or social work services) or provide interpreter services
- Support families in being advocates for their child
- Bring expertise in working and supporting families in poverty and families who are experiencing homelessness.

How can EI programs support EHS programs?

EI programs can also be an important resource to local EHS programs. Some of the activities that an EI program might engage in are the following:

- Assist in the identification of pregnant women and children eligible for EHS who would benefit from parenting education provided by EHS
- Refer families whose children might have some developmental concerns, but the child has been determined not to be eligible for EI
- Collaborate with the EHS Home Visitor on identifying modifications and/or adaptations to the EHS curriculum to address individualized needs of each infant and toddler with a developmental delay or disability.
- With parent consent, invite the EHS provider to participate in IFSP meetings to assist with the identification and development of family and child level goals and school readiness.
• Identify resources that support families with children with disabilities, such as Parent Education and Information Centers, find local and national organizations devoted to a particular disability, or put them in touch with other parents of children with disabilities.

*How should EHS services be documented on a child’s IFSP?*

The home visits, curriculum, referrals, and screenings provided by the EHS home visitor are unique to EHS and are not considered EI services. If an IFSP team determines that an EHS service could help support an outcome, the EHS service would be listed in Section 4 of the IFSP under the “supports that we currently have available to help us with this outcome (formal and natural, including services not provided by EI)” part of the outcome page.

When a family is dually enrolled in both programs, the programs should, with parent consent, collaborate to share and exchange information about screening, assessment, and observations to ensure that families receive the support that they need.

If the IFSP team, including the EHS provider, identifies a needed EI service and EHS is able and willing to provide and fund the EI service, it would be listed on EI services grid of Section 4 of the IFSP. The funding source would be EHS. Any EI service on the grid is subject to timely receipt of services and other related federal requirements, such as prior written notice and the system of payments. It is important for the EI service coordinator to ensure that the EHS provider, like any other EI service provider, is aware of these requirements and willing to follow them.

Given the many benefits to both EI and EHS programs and the need to ensure the coordination of all the services a family may be receiving, local EI and EHS programs are encouraged to enter into a memorandum of understanding (MOU) to clearly delineate roles and responsibilities. The MOU provides an opportunity for both programs to make explicit federal requirements regarding privacy, procedural safeguards and other protections, and program requirements. The MOU is especially important if an EHS program is providing a service that will be listed on the EI services grid of the IFSP.


*Conclusion*

Both EI and EHS programs provide important services to many of the same families. Local programs should collaborate to ensure that families are able to access the full array of services potentially available to them while also ensuring that these services are provided in a coordinated fashion to best meet families’ needs.

*Resources*

- Articles:
- Early Head Start website: [https://eclkc.ohs.acf.hhs.gov/](https://eclkc.ohs.acf.hhs.gov/)