

SPONSOR: Sen. Sturgeon & Sen. Poore & Rep. Griffith & Rep. K. Williams Rep. Brady

DELAWARE STATE SENATE 151st GENERAL ASSEMBLY

SENATE BILL NO. 136

AN ACT TO AMEND TITLE 14, TITLE 16, TITLE 29, AND TITLE 31 OF THE DELAWARE CODE RELATING TO EARLY INTERVENTION SERVICES.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE (Three-fifths of all members elected to each house thereof concurring therein):

1 Section 1. Amend Part I, Title 14 of the Delaware Code by creating a new Chapter 31A and by making deletions

- 2 as shown by strike through and insertions as shown by underline as follows:
- 3 Chapter 31A. Infants and Toddlers Early Intervention Program.
- 4 Section 2. Amend § 210 through § 218, Title 16 of the Delaware Code by transferring § 210 through § 218 of Title
- 5 16 to Chapter 31A of Title 14 and then by making deletions as shown by strike through and insertions as shown by
- 6 underline as follows:
- 7 <u>§ 210.</u> § <u>3101A.</u> Short title.
- 8 This subchapter chapter may be cited as the "Infants and Toddlers Early Intervention Act."
- 9 <u>§ 211. § 3102A.</u> Purpose.
- 10 (a) The General Assembly finds that early intervention services are cost-effective and effectively serve the
- 11 developmental needs of eligible infants and toddlers and their families. The purpose of this chapter is to provide a
- 12 comprehensive, coordinated, interagency, interdisciplinary early intervention services system for eligible infants and
- 13 toddlers and their families that enhances the capacity to provide quality early intervention services, expand and improve
- 14 existing services, and facilitate the coordination of payments for early intervention services from various public and private
- 15 sources.
- 16 (b) The specific purposes of this subchapter chapter are as follows: to do all of the following:
- 17 (1) To enhance Enhance the development and of all eligible infants and toddlers in the State in order to
- 18 minimize the potential for developmental delay of infants and toddlers with disabilities; and enhance individual
- 19 potential for adult independence.

20(2) To reduce Reduce the educational costs to society by minimizing the need for special education and 21 related services after infants and toddlers reach school age; age by identifying children eligible for early intervention 22 services at a younger age. 23 (3) To minimize the likelihood of institutionalization and the potential for independent living of individuals with disabilities: Enhance opportunities for inclusion in the community of eligible children and their families. 24 25 (4) To enhance Enhance the capacity of families to meet the special individual needs of infants and toddlers with disabilities; and disabilities. 26 27 (5) To fully Enact regulations and fully implement the infants and toddlers program established by the 28 Individuals with Disabilities Education Act, codified at 20 U.S.C. § 1431 et seq., or any amendment or reenactment 29 thereof. under the IDEA, including all of the following: 30 a. Affirm the importance of the family in all areas of the child's development and reinforce the role of the 31 family as a participant in the decision-making processes regarding their child. b. Identify and coordinate all available resources for early intervention within the State including those 32 33 from federal, state, local, and private sources. 34 c. Affirm that eligible infants and toddlers with disabilities have a right to receive early intervention 35 services to the maximum extent appropriate, in natural environments in which infants and toddlers without disabilities would participate. 36 37 § 212. § 3103A. Definitions. 38 The following words, terms and phrases, when used in this subchapter, shall have the meanings ascribed to them in 39 this section, except where the content clearly indicates a different meaning. For purposes of this chapter: 40 (1) "Department" means the Department of Health and Social Services. Education. (2) "Early intervention services" service" means developmental services that: a service that meets all of the 41 42 following: 43 a. Are Is provided under public supervision; supervision. 44 b. Are Is provided at no cost except where federal or State law provides for a system of payments by families, including a schedule of sliding fees; fees. 45 c. Are Is designed to meet the developmental needs of each eligible children in at least 1 of the domains 46 identified in paragraph (3)a. (4)a. of this section; child with a developmental delay and the needs of the family 47 48 related to enhancing the development of their child. 49 d. Meet Meets all applicable federal and state program standards; standards.

50	e. Are Is provided by qualified personnel consistent with Department regulations; an early intervention
51	service provider.
52	f. Are Is provided in conformity with an individualized family service plan Individualized Family Service
53	Plan adopted pursuant to § 215 under § 3107A of this title; title and are selected in collaboration with the parent or
54	guardian.
55	g. Are provided in conformity with a strong policy promoting service provision provided, to the
56	maximum extent appropriate, in natural environments including the home and community settings in which
57	children without disabilities participate.
58	h. Includes any of the following:
59	1. Family training, counseling, and home visits; training.
60	2. Special instruction; instruction.
61	3. Speech language pathology and audiology services; audiology.
62	4. Occupational therapy; therapy.
63	5. Physical therapy; <u>therapy.</u>
64	6. Psychological services; services.
65	7. Service coordination services; services.
66	8. Diagnostic or evaluative medical services; Medical services, but only for diagnostic or evaluation
67	purposes.
68	9. Early identification, screening, evaluation, and assessment services; services.
69	10. Health services specified by the lead agency as necessary to enable an eligible child to benefit
70	from the other early intervention services; services.
71	11. Social work services; services, including counseling.
72	12. Vision services; services.
73	13. Assistive technology devices and services; services.
74	14. Transportation and related costs that are necessary to enable an eligible child or family to receive
75	another service described in this paragraph; and under this paragraph (2)h.
76	15. Nursing services.
77	16. Nutrition services.
78	17. Sign language or cued language services.
79	15. Such other <u>18. Other</u> supportive services identified by the Department through regulation.

80	(3) "Eligible children" means infants and toddlers from "Collaborating agencies" means the Department of
81	Health and Social Services, Department of Education, and Department of Services for Children, Youth and Their
82	Families.
83	(4) "Developmental delay" means a significant delay in 1 or more of the following developmental domains:
84	a. Cognition.
85	b. Communication, expressive or receptive.
86	c. Physical, including hearing or vision.
87	d. Social emotional functioning.
88	e. Adaptive behavior.
89	(5) "Early intervention service provider" means an individual who has the professional qualifications to
90	provide an early intervention service as established by the lead agency under this chapter.
91	(6) "Eligible child with a disability" or "eligible child" means an individual from birth through 36 35 months
92	of age who need early intervention services because they are: and any of the following apply:
93	a. Experiencing developmental delays, The child has a significant developmental delay, as measured by
94	appropriate diagnostic instruments and procedures, including informed clinical opinion, in one <u>1</u> or more of the
95	following domains:
96	1. Cognitive development; development.
97	2. Physical development, including vision or hearing; hearing.
98	3. Communication development; development.
99	4. Social or emotional development; and development.
100	5. Adaptive development; or development.
101	b. Diagnosed as having The child is diagnosed with a physical or mental condition which has a high
102	probability of resulting in developmental delay; or delay and the condition requires 1 or more of the services under
103	paragraph (2)h. of this section.
104	c. At risk of developing substantial developmental delay in the absence of early intervention services, to
105	the extent affirmatively authorized by regulations adopted pursuant to § 218 of this title.
106	(4) (7) "Federal infants and toddlers program" or "IDEA" means the program established by for infants and
107	toddlers with disabilities under Part C of the Individuals with Disabilities Education Act, codified in pertinent part at
108	20 U.S.C. § 1431 et seq., or any amendment or reenactment thereof. et seq.

109	(7) "Individualized family service plan" or "IFSP" means a written plan for providing early intervention
110	services to an eligible child with a disability and the child's family under § 3107A of this title.
111	(8) "Infant or toddler" or "child" means an individual from birth through 35 months of age.
112	(9) "Informed clinical opinion" means both clinical observations and parental participation to determine
113	eligibility by a consensus of a multidisciplinary team of 2 or more members based on the team members' professional
114	experience and expertise.
115	(10) "Lead agency" means the state agency responsible for administering this chapter and receiving and
116	disbursing public funds received in accordance with state and federal law and rules.
117	(11) "Service coordination" means a flexible process of interaction facilitated by a service coordinator to
118	assist the family of an eligible child with a disability within a community to identify and meet the child's needs.
119	Service coordination must not duplicate any case management services which an eligible child with a disability or the
120	child's family are already receiving or eligible to receive from another source.
121	<u>§ 213. § 3104A.</u> Powers and duties.
122	In furtherance of the purposes of this subchapter, the Department shall have the following powers and duties:
123	(a) The Department shall do all of the following:
124	(1) Develop and implement a statewide, comprehensive, coordinated, multi-disciplinary, interagency system
125	which ensures that appropriate early intervention services based on scientifically-based research, to the extent
126	practicable, are available to all eligible children and families; families.
127	(2) Clarify system eligibility consistent with § 212(3) of this title, including adoption of regulatory guidelines
128	defining "developmental delay"; A timely, comprehensive, multidisciplinary evaluation of the functioning of each
129	infant or toddler with a disability in the State, and a family-directed assessment of the needs of each family of each
130	infant or toddler, to assist appropriately in the development of the infant or toddler.
131	(3) Promote public awareness to all primary referral sources and ensure prompt identification and evaluation
132	of eligible children and their families; families.
133	(4) Develop and implement individualized family service plans Individualized Family Service Plans for
134	eligible children and their families in accordance with § 215 of this title; under § 3107A of this title.
135	(5) Serve as a clearinghouse for Maintain a central directory that includes information on early intervention
136	services, resources, experts experts, and research and demonstration projects in the State; State.
137	(6) Adopt and implement a comprehensive system of personnel development and qualifications;
138	qualifications.

139	(7) Serve as the State's lead agency to implement the federal infants and toddlers program, for early
140	intervention services, including providing a single line of responsibility to carry out all the following:
141	a. The general administration and supervision of programs and activities receiving assistance under the
142	Act; IDEA.
143	b. The monitoring of programs and activities used to implement this State system; system.
144	c. The assignment of financial responsibility among applicable agencies; and Identifying and coordinating
145	all available resources within the State from federal, state, local, and private sources.
146	d. The development and adoption of interagency agreements that define ensure meaningful cooperation
147	and coordination, including the financial responsibility for each agency, agency and procedures to resolve
148	disputes, disputes. and procedures to ensure timely provision of early intervention services pending resolution of
149	disputes among public agencies or service providers; and
150	e. The development of procedures to ensure that services are provided to eligible children with disabilities
151	and their families in a timely manner pending the resolution of any disputes among public agencies or service
152	providers.
153	(8) A system for compiling data regarding early intervention services provided under this chapter that aligns
154	with the Department's system for children ages 3 through 21 and includes all of the following:
155	a. The number of eligible children in this State in need of appropriate early intervention services.
156	b. The number of children served.
157	c. The types of services provided, including a referral tracking and monitoring system.
158	(9) A policy pertaining to the contracting or making of other arrangements with public and private service
159	providers to provide early intervention services in this State, consistent with the provisions of this chapter, including
160	the contents of the application used and the conditions of the contract or other arrangements.
161	(8) (10) Otherwise meet and implement funding and eligibility requirements of the federal infants and toddlers
162	program. <u>IDEA.</u>
163	(11) Make all reports prepared regarding work under this chapter available on the Department website.
164	(b) The Department may charge a fee for services under this chapter to cover the cost of the program.
165	<u>§ 214. § 3108A.</u> Cooperation of participating agencies.
166	(a) All state agencies and contractors participating in the provision of early intervention services under this
167	subchapter chapter shall cooperate with the Department and Interagency Coordinating Council to ensure effective system

- 168 implementation, coordination coordination, and nonduplication of activities. In furtherance of this duty, the individualized
- 169 family service plan shall serve
- 170 (b) The IFSP under § 3107A of this title serves as the primary comprehensive service plan for all such cooperating
- agencies and contractors and <u>must</u> be accorded deference in determining the developmental, <u>educational</u> <u>educational</u>, and
- 172 medical necessity of included early intervention services.
- 173 § 3105A. Early intervention service providers; requirements.
- 174 (a) The Department shall promote the preparation of early intervention providers who are fully and appropriately
- 175 qualified to provide early intervention services.
- 176 (b)(1) To provide early intervention services under this chapter, an individual must be licensed under Title 24 or
- 177 licensed or certified under Subchapter I of Chapter 12 of this title, to provide the specific service.
- 178 (2) In addition to meeting the requirement under paragraph (b)(1) of this section, an early intervention service
- 179 provider must participate annually in the Department's child abuse detection and prevention training under § 4163 of
- 180 <u>this title.</u>
- 181 (c) The Department shall assign a unique identification number to each early intervention service provider
- 182 providing early intervention services under this chapter. The Department shall use the early intervention service provider's
- 183 unique identification number to track licensure, certification, employment, and professional development.
- 184 (d) The Department shall maintain an online, public database of early intervention service providers that can be
- 185 <u>searched by an individual's name and provides all of the following information:</u>
- 186 <u>(1) Education history.</u>
- 187 (2) Current licensure or certification.
- 188 (3) Current place of employment.
- 189 (e) Ensure that early intervention service providers complete the background checks required under § 309 of Title
- 190 <u>31.</u>
- 191 <u>§ 3106A. Child Find.</u>
- 192 (a) The Department shall conduct Child Find activities to ensure early identification and assessment of children
- 193 who may be eligible for services under this chapter. Child Find must include the opportunity for all children from birth
- 194 through 35 months, who have not already been found eligible for services under this chapter, to receive annual
- 195 <u>developmental screening.</u>
- 196 (b) Child Find must include online developmental screening and collaboration with home visiting programs and
- 197 child care providers, including school districts and Head Start.

198	<u>§ 215. § 3107A.</u> Individualized family service plan.
199	The Department's system shall Department must ensure that eligible children and their families annually receive
200	an IFSP that includes all of the following in a timely manner: following:
201	(1) A multi-disciplinary assessment of the unique strengths and needs of each eligible child and identification
202	of services appropriate to meet such needs; those needs.
203	(2) A family-directed assessment of the resources, priorities priorities, and concerns of the family and the
204	identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs
205	of the eligible ehild; and child.
206	(3) A written individualized family service plan, whose format shall be IFSP in the format specifically
207	prescribed by regulation, developed and approved as follows:
208	a. The plan shall IFSP must be prepared by a multi-disciplinary team which includes the child's parents;
209	parents.
210	b. The contents of the individualized family service plan shall IFSP must be fully explained to the parents
211	and informed written consent obtained prior to providing the provision of services described in the plan; and IFSP.
212	c. If parental consent to a particular service is withheld, then the early intervention services to which
213	consent is obtained shall must be provided.
214	(4) Services under the IFSP must be provided, to the maximum extent appropriate, in the natural environment.
215	(b) An IFSP must be reviewed every 6 months, or more often when appropriate based on the needs of the child and
216	<u>family.</u>
217	(c) The initial evaluation, assessment, and Plan meeting must be held within 45 calendar days after the initial
218	referral to the early intervention program, except under exceptional family circumstances as allowed under the IDEA.
219	(d) An IFSP must provide for the child to smoothly transition from services provided under this chapter as
220	required under the IDEA.
221	<u>§ 216.</u> § 3109A. Procedural safeguards.
222	The Department's system shall include Department shall provide procedural safeguards which include, at a
223	minimum, include all of the following:
224	(1) Availability of Provide the opportunity for a parent to resolve complaints through mediation and an
225	impartial, timely administrative hearing, in which hearing hearing where the burden of proof and persuasion rests with
226	the respondent agency, to resolve parental complaints; agency.
227	(2) Confidentiality Maintain the confidentiality of personally identifiable information; information.
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(3) Parental Provide the option to accept or decline early intervention services without jeopardizing eligibility

for other early intervention services; services.

- (4) Parental Provide a parent the opportunity to examine and obtain copies of relevant records either without
 charge, or, if authorized by departmental regulation, at a fee not to that does not exceed actual cost; cost.
- 232 (5) Procedures to ensure Ensure the appointment of a surrogate decision-maker if the State has custody of an
- 233 eligible child is the ward of the State or the child's parents parent cannot be identified or located; located.
- 234 (6) Prior Provide prior written parental notice whenever to a child's parent if a participating agency or service
- provider proposes to initiate or change or refuses to initiate or change the identification, evaluation evaluation, or
- 236 placement of an eligible child or the provision of early intervention services; services.
- (7) Procedures to ensure that notice required under paragraph (6) of this section fully and effectively informs
 parents of the procedural safeguards identified in this section; and under this section.
- (8) Procedures to ensure, in the absence of contrary agreement, the continuation of early intervention services
 during the pendency of any proceeding or action involving a parental complaint by a parent or, in the context of initial
- 241 application, provision of services not in dispute.
- 242 § 3110A. Compulsion prohibited.
- 243 Nothing in this chapter may be construed to compel any person to submit to any medical or public health
- 244 <u>examination, treatment, or supervision.</u>
- 245 <u>§ 217. § 3111A.</u> Interagency Coordinating Council.
- 246 (a) There is hereby established the Interagency Coordinating Council whose members shall be appointed by the
- 247 Governor. Council (Council).
- 248 (b) The Council shall advise and assist the Department and the Delaware Early Childhood Council with
- 249 implementation of this subchapter chapter and otherwise fulfill any requirements of an advisory council under the federal
- 250 infants and toddlers program. IDEA. The Department shall ensure that the Council is provided with sufficient staff and
- 251 other supports to effectively meet its obligations.
- 252 (c)(1) The Council shall be is composed of 23 members appointed by the Governor. shall be appointed for 3-year
- terms. Members shall be eligible to The term of a member is 3 years and a member may serve more than 1 term.
- 254 Appointments shall <u>must</u> be made to ensure that membership reasonably represents the geographical diversity of the State
- and meets composition requirements of the advisory council under the federal infants and toddlers program. IDEA.
- 256 (2) The Governor shall designate a member of the Council to serve as the chair of the Council. A member of
- 257 the Council who is a representative of the lead agency may not serve as the chair of the Council.

- 258 (3) A majority of the total membership of the Council constitutes a quorum. A quorum is required for the
- 259 <u>Council to take official action. A vacant position is not counted for quorum purposes.</u>
- 260 (4) The Council may adopt rules and bylaws necessary for its operation.
- 261 (d) Members of the Council shall serve without compensation, except that they members may be reimbursed for
- reasonable and necessary expenses incident to their duties as members of the Council.
- 263 (e) Any replacement appointment to the Council to fill a vacancy prior to the expiration of a term shall be is filled
- 264 for the remainder of the term.
- 265 (f) The Council shall hold at least 1 joint meeting with the Governor's Advisory Council for Exceptional Citizens
 266 each calendar year.
- 267 <u>§ 218.</u> § 3112A. Regulations.
- 268 (a) The Department shall prescribe such promulgate regulations as may be necessary to carry out this subchapter
- 269 <u>chapter</u> and to ensure full funding eligibility and compliance with the federal infants and toddlers program. IDEA.
- 270 (b) Regulations prepared by the Department under this subchapter shall be chapter are subject to review and
- 271 comment by the Council and shall otherwise be promulgated in conformity with the Administrative Procedures Act,
- 272 Chapter 101 of Title 29. Council. The Department shall provide the Council with proposed regulations, including proposed
- 273 revisions, before publication for public comment under Chapter 101 of Title 29.
- 274 Section 3. Amend Subchapter I, Chapter 2, Title 16 of the Delaware Code by making deletions as shown by strike 275 through and insertions as shown by underline as follows:
- 276 § 201. Purpose.
- The intent of the General Assembly is to provide financial assistance for the treatment of children with congenital disabilities and to require the establishment and maintenance of a congenital disabilities surveillance system and registry for the State.
- 280 (1) Surveillance system and registry. — Responsibility for establishing and maintaining the system and 281 registry is delegated to the Department of Health and Social Services, along with the authority to exercise certain 282 powers to implement the system and registry. To ensure an accurate and continuing source of data concerning 283 congenital disabilities, the General Assembly by this subchapter requires certain health care practitioners and all 284 hospitals and clinical laboratories to make available to the Department of Health and Social Services information 285 contained in the medical records of patients who have a suspected or confirmed congenital disability diagnosis. All 286 confirmed congenital disabilities shall be classified and coded using the medically recognized system of International 287 Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), as well as the 6-digit modified British

Pediatric Association system (BPA/ICD-9), and all subsequent revisions to these publications which are used by the Centers for Disease Control and Prevention. It is intended that the product of these efforts will be a central data bank of accurate, precise and current information regarding all congenital disabilities diagnosed or treated, or both, in this State.

(2) Treatment. — The cost of treating children for congenital disabilities can be prohibitive and impose a
 substantial burden upon the children's families beyond the resources of those families and beyond the resources of
 state, federal or private agencies. The treatment of such children is in the best interest and welfare of the people and the

295 State. It is the intent of this subchapter to provide assistance with the cost of treatment for children so afflicted.

296 Treatment paid for under this Program shall be provided, insofar as possible, within the State. The Secretary of the

297 Department of Health and Social Services shall establish rules and regulations for the eligibility of persons requesting

298 services under this subchapter, including the ability of those persons to pay for services, and for the disbursement of funds

299 appropriated for this Program. However, this This subchapter will in no way affect affects the rights, liabilities liabilities, or

300 duties of the Secretary of the Department of Health and Social Services or of persons or guardians of persons requesting

301 services under this subchapter from the operation of laws or prior existing laws and, in particular, § 7940 of Title 29.

302 § 203. Congenital Disabilities Surveillance and Registry Program.

303 (a) The Department may adopt, promulgate, amend amend, and repeal any rules and regulations necessary to
 304 accomplish the purpose of this subchapter. These rules and regulations may include provisions for: the following

305 provisions:

306 (1) The establishment and maintenance of an up-to-date registry that shall document every diagnosis or
 307 treatment, or both, of any congenital disability in any child under age 5 in this State; State.

308 (2)a. The establishment of a procedure for reporting to the Department, within 30 days of initial diagnosis or
 309 treatment, every occurrence of a congenital disability in any child under age 5 in this State. The procedure shall must
 310 include the reporting of specified information, through a combined system of active and passive surveillance, on every

311 child under age 5 with 1 or more congenital disabilities. Specified information shall be is deemed necessary and

- 312 appropriate to accomplish the purpose of this subchapter and in accordance with the recommendations from the
- 313 Centers for Disease Control and Prevention, for <u>any of</u> the following reasons:
- 314 1. To identify risk factors for congenital disabilities; disabilities.
- 315 2. To investigate the causes and prevalence of congenital disabilities; disabilities.
- 316 3. To develop preventive strategies to decrease occurrences of congenital disabilities; disabilities.

317	4. To analyze incidences, prevalence and trends of congenital disabilities through epidemiological
318	studies; or studies.
319	5. To investigate the morbidity and mortality rates resulting from congenital disabilities; disabilities.
320	b. Those required to report to the Department occurrences of congenital disabilities shall include: include
321	all of the following:
322	1. Any physician, surgeon, dentist, podiatrist podiatrist, or other health-care practitioner who
323	diagnoses or provides treatment, or both, for children under age 5 with congenital disabilities; disabilities.
324	2. The designated representative of any hospital, dispensary dispensary, or other similar public or
325	private institution that diagnoses or provides treatment, or both, for children under age 5 with congenital
326	disabilities; and disabilities.
327	3. The designated representative of any clinical laboratory that performs any test which identifies
328	children under age 5 with congenital disabilities; disabilities.
329	(3) The establishment of a procedure for the publication and distribution of forms, instructions instructions,
330	and notices required by this subchapter or necessary to accomplish the purpose of this subchapter; and subchapter.
331	(4) The establishment of a procedure to obtain follow-up information from those required to report
332	occurrences of congenital disabilities pursuant to under this subchapter. Any follow-up information, including family,
333	physician, hospital hospital, or laboratory contact deemed necessary by the Department, shall must be submitted to the
334	Department at least 1 time each year by those required to report occurrences of congenital disabilities.
335	(5) The establishment of a procedure to refer the parent, custodian, or guardian of a child under age 3 who is
336	reported to the registry under this subsection to the Department of Education for services under Chapter 31A of Title
337	<u>14.</u>
338	(b) The provisions of this subchapter and any rules or regulations issued pursuant to under this subchapter shall do
339	not apply to any person or private institution that, as an exercise of religious freedom, treats the sick or suffering by
340	spiritual means through prayer alone.
341	(c) A parent, custodian custodian, or guardian of an infant having any congenital disability may refuse disclosure
342	to the surveillance system and registry of the infant's name and identifying information on the grounds that such congenital
343	disability identification is contrary to the religious tenets and practices of the infant's parent, eustodian custodian, or
344	guardian.
345	§ 204. Confidentiality of reports.

- 346 (a) Any report of the diagnosis or treatment, or both, of a congenital disability made pursuant to <u>under</u> this
- 347 subchapter shall may not be divulged nor made public in any way that might tend to disclose the identity of the person or
- family of the person to whom it relates. However, patient-identifying information may be exchanged with the Department
- 349 of Education and among authorized agencies as approved by the Department and upon receipt by the Department of
- 350 satisfactory assurances by those agencies of the preservation of the confidentiality of such information.
- 351 (b) No individual or organization providing information to the Department in accordance with this subchapter shall
- 352 <u>may</u> be deemed to be liable for or held liable for divulging confidential information.

353 § 205. Compulsion prohibited.

- 354 Nothing in this subchapter shall may be construed to compel any person to submit to any medical or public health
- 355 examination, treatment treatment, or supervision.
- 356 § 207. Early intervention services; collaborating agency.
- 357 The Department, as a collaborating agency, shall provide vision services to children who are eligible for early
- 358 intervention services under Chapter 31A of Title 14.
- 359 Section 4. Amend § 3003, Title 14 of the Delaware Code by making deletions as shown by strike through and
- 360 insertions as shown by underline as follows:
- 361 § 3003. Organization and composition.
- 362 (a) The Governor shall appoint the members of the Delaware Early Childhood Council (ECC) shall be appointed
- 363 by the Governor upon recommendation by based upon recommendations from the Interagency Resource Management
- 364 Committee and shall: Committee. The members of the ECC must meet the following criteria:
- 365 (1) Represent the racial, economic economic, and geographic diversity of the State; State.
- 366 (2) Serve for staggered, renewable terms of 3 years, except in the case of public employees continuing in the
- 367 same designated position; and position.
- 368 (3) Consist of the following members:
- 369 a. Two center-based early care and education providers; providers.
- b. One family-home-based early care and education provider; provider.
- 371 c. One parent whose child participates in early childhood services; services.
- d. One Delaware Head Start/Early Childhood Assistance Program Association representative;
- 373 <u>representative.</u>
- 374
- e. One representative of a statewide early care and education resource and referral agency; agency.

375	f. Two representatives from advocacy organizations focused on children's health and well-being; well-
376	being.
377	g. One representative of the Delaware Association for the Education of Young Children; Children.
378	h. One public school district superintendent; superintendent.
379	i. One higher education representative who also serves on the P-20 Council; Council.
380	j. One business community representative; representative.
381	k. Two community members; members.
382	l. One representative of the General Assembly; Assembly.
383	m. The State Director of Head Start Collaboration; Collaboration.
384	n. A representative of the Delaware Department of Health and Social Services, representing children's
385	health, child cares subsidy, and Part C of Individuals with Disabilities Education Act (IDEA) [20 U.S.C. § 1431 et
386	seq.]; health and child care subsidy.
387	o. A representative of the Delaware Department of Services to Children, Youth and Their Families,
388	representing child mental health, child care licensing, and family services; services.
389	p. A representative of the Delaware Department of Education, representing early childhood professional
390	development, § 619 of the IDEA [20 U.S.C. § 1419], child care licensing, and State early learning guidelines; and
391	guidelines.
392	q. The chair of the Interagency Coordinating Council, representing Part C of the Individuals with
393	Disabilities Education Act (IDEA) [20 U.S.C. § 1431 et seq.].
394	Ex officio, nonvoting r. Nonvoting members shall must include the director of the Early Development
395	and Learning Resource Center of the Department of Education, Office of Early Learning, the chair of the Family
396	Support Coordinating Council, and the director of the State's Institute for Excellence in Early Childhood
397	Education. The ECC may appoint ex officio nonvoting members and advisors to assist them in meeting their
398	responsibilities.
399	Section 5. Amend § 3111, Title 14 of the Delaware Code by making deletions as shown by strike through and
400	insertions as shown by underline as follows:
401	§ 3111. Advisory council for exceptional citizens.
402	(a) The Governor shall appoint an advisory council to act in an advisory capacity to the Department of Education,
403	the State Board of Education and other state agencies on the needs of exceptional citizens. The General Assembly shall

- 404 provide for the maintenance of the council. The council shall also serve in the capacity of the advisory panel as required by
- 405 <u>the</u> Individuals with Disabilities Education Act (IDEA), 20 U.S.C. § 1400, et seq..
- 406 (b) The council shall hold at least 1 joint meeting with the Interagency Coordinating Council each calendar year.
- 407 Section 6. Amend § 4162, Title 14 of the Delaware Code by making deletions as shown by strike through and
- 408 insertions as shown by underline as follows:
- 409 § 4162. Child safety awareness, prevention, and other nonacademic trainings.
- 410 (f) The Department shall require early intervention service providers to receive 3 hours of a child abuse and child
- 411 safety awareness, prevention, detection, and reporting training program established under § 4163(b)(1) of this title.
- 412 Section 7. Amend § 7904, Title 29 of the Delaware Code by making deletions as shown by strike through and
- 413 insertions as shown by underline as follows:
- 414 § 7904. Division of Public Health; Department of Health and Social Services.
- (g) The Division is authorized to operate the following programs for which a fee for service is charged to cover the
- 416 cost of the program: Child Health, Vanity Birth Certificate, Public Water, Medicaid Enhancements, Infant Mortality,
- 417 Medicaid Aids Waiver, Children with Special Needs, Family Planning, Newborn, Indirect Costs, Vaccines, Food
- 418 Inspection, Medicaid Contractors/Lab Testing and Analysis, Tuberculosis (TB), Sexually Transmitted Diseases (STD),
- 419 Child Development Watch, Preschool Diagnostic and Development Nursery (PDDN), Home Visits, Food Permit, Water
- 420 Operator Certification, Long-Term Care Prospective Payment, Long-Term Care IV Therapy, and Health Statistics.
- 421 Notwithstanding the provisions of § 6102 of this title, the Division shall be allowed to collect and expend fees from the
- 422 aforementioned accounts except that the Children with Special Needs and Child Health programs shall continue to deposit
- 423 30 percent of program collections to the General Fund.
- 424 Section 8. Amend § 309, Title 31 of the Delaware Code by making deletions as shown by strike through and
- 425 insertions as shown by underline as follows:
- 426 § 309. Background checks for child-serving entities.
- 427 (b) Definitions. The following words, terms and phrases, when used in this section, shall have the meaning
- 428 ascribed to them in this subsection, except where the context clearly indicates a different meaning: For purposes of this
- 429 <u>section:</u>
- 430 (4) "Child-serving entity" as used in this section shall mean: means:
- 431 a. The DSCYF; <u>DSCYF</u>, which includes any employee or volunteer of DSCYF or 1 of its contractors
- 432 who have regular direct access to children and/or or adolescents under the age of 18, but who do not provide child-
- 433 care services at a facility as referred to in under paragraph (b)(4)b. of this section; section.

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434	b. Residential child-care facilities in Delaware which are under contract with or operated directly by
435	DSCYF; <u>DSCYF.</u>
436	c. Public and private schools, including employees of the Department of Education; Education.
437	d. Child-care providers as defined in § 3002A of Title 14; or 14.
438	e. Youth camps or summer schools that are exempt from child-care licensing requirements; requirements.
439	f. Facilities and individuals registered and eligible for Federal Child Care Development Block Grant
440	funds through the Delaware Department of Health and Social Services.
441	g. Early intervention service providers as defined under § 3103A of Title 14.
442	(5) "Contractor" means a person, not an employee, providing services or seeking a contract to provide
443	services within a child-serving entity and who: any of the following apply to the person:
444	a. Has regular direct access to children, or <u>children.</u>
445	b. Provides services directly to a child or children.
446	(c) Except as provided in paragraph (c)(4) of this section, all child-serving entities are required to obtain criminal
447	and Child Protection Registry checks for prospective employees, volunteers volunteers, and contractors.
448	(1) The SBI shall furnish information pertaining to the identification and criminal history record of
449	prospective employees, volunteers volunteers, and contractors of child-serving entities, except as otherwise allowed or
450	required, provided that the prospective employee, volunteers volunteer, or contractor submits to a reasonable procedure
451	established by standards set forth by the Superintendent of State Police to identify the person whose record is sought.
452	Such This procedure shall must include the fingerprinting of the prospective employee, individual subject to a criminal
453	background check and the provision of such other information as may be necessary to obtain a report of the person's
454	individual's entire criminal history record from SBI and a report of the person's individual's entire federal criminal
455	history record pursuant to under the FBI appropriation of Title II of Public Law 92-544. Notwithstanding any provision
456	to the contrary, the information to be furnished by SBI shall include child sex abuser information. The Division of
457	State Police shall be the intermediary for purposes of this section.
458	(2) Any employer person who is required to request a Child Protection Registry check under this section shall
459	obtain a statement signed by the prospective employee, volunteer, or contractor wherein the person individual
460	authorizes a full release for the employer person to obtain the information provided pursuant to such as a result of a
461	check. The DSCYF will process a Child Protection Registry check of the individual upon receipt of the above-
462	mentioned signed statement which shall be attached to the request from the employer person for the Child Protection
463	Registry check.
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464	(5) Costs associated with obtaining said criminal history information and Child Protection Registry
465	information shall be are borne by the applicant, except for those applicants designated in paragraph (b)(4)d. of this
466	section, whose costs shall be are borne by the State. Notwithstanding the foregoing, public schools may use funds other
467	than state funds to pay for criminal background check costs and may enter into consortia of school districts to pay such
468	costs for persons covered by this act section who work in more than 1 school district during the course of a year.
469	(6) All employees, volunteers volunteers, and contractors shall inform their employer of any criminal
470	conviction or entry on the Child Protection Registry which would lead to a prohibition pursuant to under subsection (d)
471	of this section.
472	(e) Upon completion of the criminal background and Child Protection Registry checks:
473	(1) Where the child-serving entity is a public or private school: school, a contractor with a school district or
474	the Department of Education, or an employee of a contractor who is an early intervention service provider:
475	a.1. The SBI shall provide the criminal background information and DSCYF shall provide the Child
476	Protection Registry check information to the individual and the employing or contracting school or district, which
477	school district or if applicable, a contractor employing the individual.
478	2. The school, school district, or employing contractor shall determine whether the individual is
479	prohibited from being employed by the school or district, pursuant to or contracting with the school, school
480	district, or contractor under subsection (d) of this section. If the individual is not prohibited from employment
481	by subsection (d) of this section but the individual has a criminal conviction or is on the Child Protection
482	Registry, the school or district shall make a determination regarding suitability for employment or contracting
483	using the factors in paragraph (d)(3) of this section.
484	3. Information obtained under this subsection (e) of this section is confidential and may only be
485	disclosed to any of the following, as applicable: the
486	<u>A. The</u> chief school officer or officer.
487	<u>B. The</u> head of school and the school.
488	C. The employing contractor.
489	D. The chief personnel officer of the school and 1 school or school district.
490	E. One person in each school or school district who shall be is designated to assist in the
491	processing of criminal background checks, receive training in confidentiality and be confidentiality, and
492	is required to sign an agreement to keep such information confidential.

- 493 b. Upon making its determination of suitability, the public school shall forward the determination to the
- 494 person seeking employment. employment or a contract. If a determination is made to deny the person from
- 495 employment <u>or a contract</u> based on the criminal history of the person, the person shall have an opportunity to
- 496 appeal to the chief school officer and/or or head of school or designee for reconsideration.
- 497 (g) The State Department of Education shall, in the manner provided by law, promulgate regulations necessary to
- 498 implement this section. These regulations shall include: include all of the following:
- 499 (1) Establishment, in conjunction with SBI, of a procedure for fingerprinting persons seeking employment
- 500 with a public school or as an early intervention service provider and providing the reports and certificate obtained
- 501 pursuant to <u>under</u> subsection (c) of this section; section.
- 502 (2) Establishment of a procedure to provide confidentiality of information obtained pursuant to <u>under</u>
- 503 subsection (c) of this section.
- 504 (3) Establishment of a procedure for determining other job-related prohibitions for employees, volunteers
- 505 <u>volunteers</u>, and contractors, pursuant to <u>under</u> paragraph (d)(3) of this section.
- 506 Section 9. This Act is effective immediately and is to be implemented on July 1, 2023.
- 507 Section 10. This Act is known as the "Infants and Toddlers Early Intervention Act".

SYNOPSIS

This Act transfers responsibility for early intervention services for children ages birth to age 3 from the Department of Health and Social Services to the Department of Education and revises the Code to be consistent with federal law. The Individuals with Disabilities Education Act (IDEA) requires states to provide a comprehensive, coordinated, interagency, interdisciplinary early intervention services system for eligible infants and toddlers and their families. This Act requires that early intervention services be provided in compliance with all of the requirements of the IDEA, improves coordination between advisory bodies, and requires early intervention service providers to receive the same training on child abuse and the same background checks as school employees.

Specifically, this Act does all of the following:

Section 1. Creates a new Chapter 31A in Title 14 for the Infants and Toddlers Early Intervention Program.

Section 2. Transfers responsibility for the Infants and Toddlers Early Intervention Program from the Department of Health and Social Services (DHSS) under Subchapter II, Chapter 2 of Title 16 to the Department of Education (DOE) under the new Chapter 31A of Title 14, and revises the Code as follows:

1. Aligns the Code with the requirements under the federal infants and toddlers program known as Part C of the IDEA.

2. Creates duplicate sections in Title 14 regarding the confidentiality of reports and prohibiting compulsory participation in the program consistent with existing sections in Title 16.

3. Adds standard organizational language for the Interagency Coordinating Council (ICC).

4. Requires the ICC to hold at least 1 joint meeting each calendar year with the Governor's Advisory Council for Exceptional Citizens (GACEC) because the ICC and the GACEC are the 2 Delaware agencies that advise the Department of Education on implementation of the IDEA.

Section 3. Makes corresponding changes to Subchapter I, Chapter 2 of Title 16 to reflect the transfer of responsibility for the Infants and Toddlers Early Intervention Program to DOE.

Section 4. Adds the chair of the ICC as a member of the Early Childhood Council (ECC) and makes corresponding changes to the membership of the ECC to reflect the transfer of responsibility for the Infants and Toddlers Early Intervention Program.

Section 5. Requires the GACEC to hold at least 1 joint meeting each calendar year with the ICC because the ICC and the GACEC are the 2 Delaware agencies that advise the Department of Education on implementation of the IDEA.

Section 6. Requires early intervention service providers to receive the same child abuse and child safety awareness, prevention, detection, and reporting training as school employees.

Section 7. Makes corresponding changes to § 7904 of Title 29 reflecting the transfer of the authority to charge a fee for a service provided by Child Development Watch from DHSS to DOE.

Section 8. Requires early intervention service providers to receive the same background checks as other childserving entities and makes corresponding revisions to the procedures to obtain and review the information received from these background checks.

Section 9. Delays the implementation of this Act until July 1, 2023 to provide time for the transfer of the program, including the promulgation of regulations.

Section 10. Provides that this Act is known as the "Infants and Toddlers Early Intervention Act".

This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

This Act requires a greater than majority vote for passage because § 11(a) of Article VIII of the Delaware Constitution requires the affirmative vote of three-fifths of the members elected to each house of the General Assembly to impose a fee.

Author: Senator Sturgeon