

Your rights as a parent in Help Me Grow begin with referral to the early intervention service coordination agency and continue throughout your participation in Help Me Grow (HMG) Early Intervention. Your service coordinator is mandated by law to explain these rights to you verbally, as well as provide this brochure to you in writing.

As a Parent, you have the right to:

- Be informed of your rights
- Be fully informed of all information related to the activity for which your approval is sought and provide written consent **before:**
 - Any screening, evaluation, child assessment or family-directed assessment is done (must sign a consent form which includes all of these before any one of these can be done);
 - Any Early Intervention (EI) service begins (signing IFSP does this);
 - Any information about your child and/or family is shared, who it will be shared with, and the time frame in which the information was shared;
 - Your child's personally identifying information is collected (HMG does collect data on you and your child. If you have questions about what kind of information, ask your service coordinator before you sign the consent to participate in HMG EI);
 - Your child's or your public benefits or private insurance are used to pay for EI services (you must authorize this before it would be done on your behalf); and
 - An application to use the early intervention system of payment is completed and submitted on your behalf.
- Participate or decline participation in HMG at any time, as this program is voluntary

- Cancel or revise previously provided consent to participate and/or release/share personal information at any time
- Accept or decline some or all HMG services throughout your participation in HMG, even after initially accepting it; without risking other services, with the following exception:
 - Your child will not be eligible for early intervention services if you refuse to consent to any of the required screenings, evaluations and/or assessments (Developmental evaluation is required to establish eligibility for the program, in some cases; Child Assessment is required to determine your child's need for early intervention services in all cases initially and at least annually thereafter)
- Request to be present at, and contribute fully in all HMG meetings about your family, including IFSP meetings and the transition planning conference
- Opt out of personally identifiable information being provided to the local education agency (LEA-school district) once your child turns age two (you will be asked to make this decision at the IFSP meeting closest to your child turning 18 months old)

As a Parent, you have the right to:

- Receive one electronic or paper copy of each completed IFSP at no cost, within ten calendar days of the event
- Request reconsideration of an eligibility determination when you disagree with the eligibility determination made
- A Service Coordinator who is responsible, as a single point of contact, to assist you and your family. Your service coordinator has the following responsibilities:
 - Coordinating developmental evaluations and child and family assessments;
 - Facilitating and participating in the development, periodic review, and annual evaluation of your family's IFSP;
 - Conducting referral and other activities to assist you in identifying available early intervention service providers;
 - Helping you obtain access to needed early intervention services and other services identified in the IFSP;
 - Coordinating the provision of early intervention services and other services that your child needs or is being provided;
 - Coordinating, facilitating, and monitoring the delivery of services to assure that they are provided in a timely manner (In Ohio that is within 30 calendar days of your signature on the IFSP);
 - Conducting follow-up activities to determine that appropriate early intervention services are being provided;
 - Coordinating the funding sources for early intervention services on the IFSP; and,
 - Facilitating the development of a transition plan to preschool, school, or if appropriate, other services when participation in HMG early intervention is coming to an end.



As a parent you have the right to:

- A multidisciplinary developmental evaluation to determine your child's eligibility for early intervention
- A multidisciplinary child assessment to identify your child's unique strengths and needs related to early intervention services, within forty-five days of the referral to the service coordination agency
- Receive written notification (either in person, electronically, or post-mailed) in advance of your family's initial and annual IFSP meetings
- Ask for a different service coordinator at any time during your program participation
- Receive prior written notice, at least ten calendar days before an early intervention service is proposed, refused or changed outside of your family's periodic IFSP review. This notice must be in your native language (unless clearly not feasible to do so) and include the following;
 - The action being taken;
 - The reason for the action;
 - The information upon which the action is founded; and
 - Your rights and procedures if you disagree with the action.
- Review your child's record and request a copy of the record

You may file a complaint with the Ohio Department of Health if you feel that any one of your rights has been violated. You may request an investigation, mediation, or due process hearing to resolve your complaint.

- You will be asked to put your complaint in writing.
- The complaint will be shared with the service providers and other state partners, as appropriate.

To file a complaint about your child's early intervention services please:

- Contact the Bureau for Children with Developmental and Special Health Needs at the Ohio Department of Health by phone at (614) 644-8389; or
- E-mail at beis@odh.ohio.gov; or
- Mail to The Ohio Department of Health, Bureau for Children with Developmental and Special Health Needs, Help Me Grow, 246 N. High St., Columbus, Ohio 43215



Parents' Rights in Ohio Help Me Grow Early Intervention

Information about your family and child is confidential and will not be shared unless you provide consent to share information in writing.



Ohio Department of Health
Bureau for Children with
Developmental and Special Health Needs
(614) 644-8389