



Early Intervention

WHEREAS, approximately five percent of all children experience developmental delays during their first 36 months after birth, (27,000 Illinois infants and toddlers); and

WHEREAS, developmental delays result from a wide variety of conditions, including Down Syndrome, Cerebral Palsy, failure to thrive, very low birth weight, and prenatal injury due to substance exposure; and

WHEREAS, untreated developmental delays produce negative individual and societal consequences of lifelong duration; and

WHEREAS, individualized therapeutic intervention on an interdisciplinary basis directed towards family involvement, known as 0-3 Early Intervention, has proved to ameliorate and often eliminate the consequences of developmental delay; and

WHEREAS, the value of 0-3 Early Intervention as a public policy goal was established in 1986 by the United States with the creation of the Part H entitlement program and accepted by Illinois through its participation since 1988 in Part H; and

WHEREAS, the 0-3 entitlement provides for both free services (identification, evaluation, plan development, service coordination, and due process), as well as services billable to families based upon ability to pay (the various therapies); and

WHEREAS, despite Illinois' 1991 passage of PA 87-680, the Early Intervention Services System Act, the federal courts found in 1996 that Illinois was only serving 7,900 children (29% of the eligible 5%)

NOW THEREFORE BE IT RESOLVED: That the Board of Directors approves an institutional policy that 0-3 Early Intervention be established by Illinois legislation as an entitlement for the estimated five percent of children who have measurable delays diagnosed conditions placing them at a high probability of delay.