Nondiscrimination Practices

Policy
No eligible child or family will be denied access to early intervention services because of their race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation. Philadelphia County will not contract with agencies who decline to serve families because of their race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation. And in order to better meet the needs of families and children whose *native language is other than English, the County will implement the following steps (throughout the Early Intervention process) to insure that families are not discriminated against due to language, culture or native country of origin. The aforementioned may take place through various means:

A. Parents Rights Agreement (PRA): IDEA, Part C Sec. 639 (Procedural Safeguards) states that parents should be informed in their native language “written prior notice of the infant or toddler with a disability whenever the State agency or service provider proposes to initiate or change, or refuses to initiate or change, the identification, evaluation, or placement of the infant or toddler with a disability, or the provision of appropriate early intervention services to the infant or toddler”. The State approved [issued] parents’ rights agreement will be shared with each family at every phase of Early Intervention services and as outlined in IDEA. The PRA will be supplied to the family in their native language, including braille.

B. Child Find services: The County will support the translation of various documents, pamphlets and booklets regarding Early Intervention (EI) into a variety of languages so as to reach the underserved ethnic and racial populations of the city, for example the Watch me Grow brochure. Efforts will be made to place Early Intervention Advertisements in community based newspapers serving ethnically diverse populations, for example “El Dia.”

C. Registration and Intake: Bilingual staff that are work in the EI Intake unit will assist the parent in the completion of the Registration if their language is similar to the family’s native one and the staff is available to assist. The EI Intake Unit will use a professional translation service to complete the Intake if the EI Intake staff that do not speak the parent’s language.

D. Service Coordination and Service Delivery: Whenever possible the service Coordinators and service provider whose primary language (and culture) is similar to the family will be assigned to work with the family
E. **Assessment and Evaluation:** Service Coordinator (SC) and Multidisciplinary Evaluation Providers (MDE) providers will ensure that evaluation and assessment materials and procedures to determine eligibility for Infant Toddler Early Intervention (IT EI) are conducted in the child’s native language unless it is clearly not feasible. The SC and the MDE team members will communicate with the parent in the parent’s native language if the staff’s language is similar to the family’s native one and the staff is available to assist or through an interpreter. In addition, assessment and evaluation procedures and materials selected and administered will be racially and culturally sensitive and eligibility will be determined through various criteria.

**Individualized Family Service Plan:** The IFSP will be translated into the family’s native language and mailed out to them within one month of initial development or revision.

**Procedures:**

Providers will:
1. Be familiar with the County Position statement on Cultural Competence and insure that all staff and contractors employed at their agency are also familiar with it and have a copy to access as they interface with families
2. Have an established relationship (contract or agreement) with an agency that can provide interpretation so as to provide ongoing services to families needing it and an ability to start those services expediently.
3. During intake and registration, determine if the family has a specialized need for interpretation or translation. An attempt will be made to help the family identify informal supports (an adult family member or friend) who can be available to read (translate) early intervention written communication and documents and to interpret during ongoing service provision.
4. Hire bilingual or multilingual employees, who meet the regulations and qualifications to work in the early intervention field (staff who speak one or more languages in addition to English)
5. Make every effort to match families with bilingual or multilingual staff who share the same language(s) if the staff is available at the time
6. Utilize/purchase interpretation services when there is need of communicating with the family and there are not internal resources available to address the interpretation needs
7. Provide families with copies of written materials regarding their child in their native language regarding the early intervention program
8. Access the support of the Translation Coordinator for support in identifying translation and interpretation services. The may do this by completing the “translation request” form and submit it to the Resource and Purchased Services Department within ChildLink to have documents translated into the families’ native language or to identify an interpreter for a language that the provider does not have resources

*Note: Native language:* When used with respect to an individual who is limited English proficient or LEP (as that term is defined in section 602(18) of IDEA), means:
1) The language normally used by that individual, or, in the case of an infant or toddler, the language normally used by the parents of the infant or toddler, except as provided in (2) below.

2) For evaluations and assessments, the language normally used by the infant or toddler, if determined developmentally appropriate for the infant or toddler by qualified personnel conducting the evaluation or assessment.

3) Native language, when used with respect to an individual who is deaf or hard of hearing, blind or visually impaired, or for an individual with no written language, means the mode of communication that is normally used by the individual (such as sign language, Braille, or oral communication).