

The following guidance addresses the selection and use of assistive technology devices and services for children and families enrolled in Missouri First Steps.

Between birth and age 3, many basic skills are developed. Part C of the Individuals with Disabilities Education Act (IDEA) provides for an early intervention program that offers services to eligible children and their families that are designed to enhance the child's developmental needs. Assistive technology is one of 16 early intervention services recognized under IDEA.

Federal and state regulations implementing Part C of IDEA provide for assistive technology devices **when these devices are necessary to increase, maintain, or improve the functional capabilities of an infant or toddler in one or more of the following areas of development:**

- physical
- communication
- cognitive
- social-emotional
- adaptive

IDEA defines assistive technology devices and services as follows:

***Assistive technology device*** means any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of children with disabilities.

AT devices can range from items considered low technology to those considered high technology. Low technology devices are items that rely on mechanical principles and can be purchased or made using simple hand tools and easy to find materials. High technology devices include sophisticated equipment and may involve electronics.

***Assistive technology service*** means a service that directly assists a child with a disability in the selection, acquisition, or use of an assistive technology device. Assistive technology services include:

- “(i) The evaluation of the needs of a child with a disability, including a functional evaluation of the child in the child's customary environment;
- (ii) Purchasing, leasing, or otherwise providing for the acquisition of assistive technology devices by children with disabilities;
- (iii) Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing assistive technology devices;
- (iv) Coordinating and using other therapies, interventions, or services with assistive technology devices, such as those associated with existing education and rehabilitation plans and programs;
- (v) Training or technical assistance for a child with disabilities or, if appropriate, the child's family; and,
- (vi) Training or technical assistance for professionals (including individuals providing

*early intervention services) or other individuals who provide services to, or are otherwise substantially involved in, the major life functions of individuals with disabilities” 34 CFR Sec. 303.12 (d)(1).*

Some examples of assistive technology services include installing, customizing or adapting equipment; assisting children utilizing these devices, and training of parents and other caregivers (including child care providers) in using assistive technology devices to improve children's functional capabilities. Customizing equipment can include constructing new equipment or fitting commercial items to an individual child (for example, a tri-wall insert can be made for a child to provide a customized fit in a chair or child-seat). Training of parents and caregivers can include specific instruction on the use of the device or follow-up visits to make adjustments to the device. **Attachment A** of this document contains examples of the types of assistive technology devices, both high and low, that may be provided to eligible children under First Steps, as well as, examples of items that are not considered assistive technology devices under First Steps. **Attachment B** of this document contains more information about hearing devices and accessories.

Information on assistive technology equipment loan programs, device recycling and exchange, assistive technology activities and web resources can be accessed through Missouri Assistive Technology at: <http://www.at.mo.gov>

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## **Attachment A**

### Assistive Technology Examples

The following are examples of assistive technology devices that **may be provided** to children eligible for First Steps and their families when determined necessary by the IFSP team. The assistive technology available to young children is changing and expanding at a rapid pace, and it should be noted that this list is not an exhaustive list of assistive technology devices. This list is intended to provide guidance for local decisions about assistive technology devices for individual children. There may be other items not listed that would appropriately meet the needs of children.

- **Devices to increase, maintain, or improve self-help skills and functional abilities related to daily living activities and routines.** Examples include adapted feeding utensils, devices that assist with seating and positioning, such as prone standers, and insertions and adaptations necessary to correctly position or support an infant or toddler in a seating position. These may include adaptations to common items such as car seats and strollers.
- **Devices to increase, maintain, or improve functional mobility.** Examples include orthotics, prosthetics, scooter boards, walkers, therapeutic strollers and wheel chairs.
- **Vision and hearing aids for children with diagnosed visual impairments and hearing impairments.** Examples include eyeglasses, external contact lenses, and magnifiers for children with diagnosed visual impairment; and assistive listening devices, such as hearing aids or other forms of amplification, for a child with a diagnosed hearing impairment.

**Note:** IDEA excludes medical devices that are surgically implanted, or the replacement of such devices (Sec. 602 B definitions).

- **Devices to increase, maintain, or improve communication skills and development, consistent with expectations for age-appropriate development.** Examples include communication boards, augmentative and alternative communication aids, and more complex communication systems.
- **Devices to increase, maintain, or improve cognitive development.** Examples include adapted toys, switches, and necessary connections to toys to enable an infant or toddler with disabilities to become more independent in their interactions with the physical environment (e.g., adapted toys with auditory signals for infants and toddlers with visual impairments).

The following are examples of items that are **NOT** considered assistive technology devices in First Steps

**Equipment or medical supplies solely related to a medical condition or chronic illness unrelated to the child's disability and developmental status, or that are life-sustaining in nature.** Examples include medical equipment such as suction machines, accessory pieces used for the maintenance of cochlear implants, feeding pumps, nebulizers, ventilators, apnea monitors, neuromuscular stimulators for shock treatment and pulse oximeters which are life sustaining and/or that would be needed by any child to maintain his or her health.

- **Toys not adapted for children with disabilities.** Examples include items such as building blocks, dolls, puzzles, balls and other common play materials that are used by all children and are not specifically designed or adapted to increase, maintain, or improve the functional capabilities of children with disabilities.
- **Generic items typically needed by all children.** Common child items such as car seats, high chairs, youth beds, play tables, bath seats, infant swings, potty chairs or strollers, which are typically needed by all children, are not considered assistive technology devices reimbursable under First Steps, unless these items require highly specialized adaptations to accommodate the child's disability (see first bullet on previous page).
- **Standard equipment** used by service providers in the provision of early intervention services (regardless of the service delivery setting). Examples include tables, desks, chairs, therapy mats, tumble forms, therapy balls, vestibular swings, gait ladders, etc.
- **Standard equipment and supplies** used by providers for the provision of preferred methodologies, such as listening tapes, special CDs, head phones, etc. are not considered assistive technology devices reimbursable under First Steps. This equipment should be provided or loaned to the family by the provider.

## **Attachment B**

### Hearing Devices and Accessories

First Steps does **not** purchase cochlear implants, accessories related to cochlear implants, or warranties related to cochlear implants.

First Steps does **not** purchase warranties on hearing aids or FM systems.

Generally IDEA considers hearing aids to be a personal use device that the child would need whether or not they are receiving services under IDEA and therefore not generally considered as necessary assistive technology. However, if the child's IFSP team determines a hearing aid to be a necessary assistive technology device in order to increase, maintain or improve the functional capabilities of the child, First Steps will purchase a hearing aid that is appropriate for the age and needs of the child during their participation in First Steps.

When it has been determined by the IFSP team that obtaining a hearing aid is an appropriate early intervention service for the child, First Steps will cover basic accessories for the hearing aid, if purchasing these accessories is necessary in order for the child to benefit from using the device.

Some examples of accessories and maintenance items that may be purchased if deemed necessary are:

- Batteries (estimated at not more than 40 per year)
- Ear molds (on average about 4 pair per year)

Items that are typically needed for care and maintenance may include:

- Battery tester
- Stethoset (allows you to listen to the hearing aid sounds)
- Air blower (blows out moisture and ear wax)
- Dry aid jar (necessary to help evaporate moisture out of the aid)
- Audio wipes (sterilize the ear molds and the aid)
- Volume control cover (prevents the child from accidentally turning up or down the volume)

Items that may be necessary on an individual child basis determined by the IFSP team:

- Otoease – sterile gel that is used to help with the fit when necessary
- Otoferm – similar to Otoease in purpose
- Oto clips – clips the aid to clothing to keep it from falling and being lost.
- Oto adhesive pads
- Super seals – used when there is feedback or fit needs to be improved
- Ear hooks
- Huggies – help keep the aid on and positioned properly
- Mic lock

If a child with a hearing aid is receiving services at a special purpose center, it is recommended that the parent provide the center with a supply of batteries or other accessories that may be needed while the child is in attendance (whether purchased by the parent or by First Steps). The center may already have on hand some of the non child-specific items such as battery testers, so those may not need to be provided.