

# SOONERSTART PROCEDURES

## ➤ PROCEDURES FOR CHILDREN CURRENTLY ON AN IFSP

Service Provider contacts family by telephone to schedule child's early intervention visit. \* Visit may be completed by telephone or virtually (Skype, FaceTime). It is recommended that written activities, giving clear, concrete next steps, be included in progress notes or as an additional document to provide to families.

### 1. If Family Agrees to Continue SoonerStart Visits by telephone

1. Provider schedules visit (or completes visit by phone)
2. Provider notifies RC by email/text/phone call that family will continue services by phone
3. RC documents info from provider in logging wizard
4. Provider completes phone visit with family (if not completed in Step 1)
5. Provider completes progress note with written activities and next steps
6. Provider emails/mailed/texts copy of progress note to family<sup>1</sup>

### 2. If Family Agrees to Continue SoonerStart Visits virtually (by Skype, FaceTime):

1. Provider shares information with the family regarding the technology required for virtual visits utilizing Skype or FaceTime as well as the potential for privacy risks that may be involved when using internet or data connections. (*Informed Consent for Virtual Services*<sup>2</sup>)
2. Provider asks the parent to give verbal consent to proceed with virtual services.
3. Provider fills out the *Informed Consent for Virtual Services* and signs/types his/her name on verbal consent form.<sup>3</sup>
4. Provider schedules virtual visit with family
5. Provider emails/texts completed verbal consent form to RC as notification that family will continue services virtually.
6. RC emails/texts/mailed copy of consent form to family
7. RC uploads consent form into EdPlan record
8. RC documents that consent form was received, and copy provided to family in logging wizard.
9. Provider completes virtual visit
10. Provider completes progress note
11. Provider emails/mailed/texts copy of progress note to family.

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### 3. If Family chooses not to continue services in any format until face-to-face services resume:

1. Provider notifies RC by email/text/phone call that family does not want to schedule phone, virtual visits or receive written activities to complete.
2. Provider documents family decision in progress note. A “green” cancellation note should be written for each cancelled visit until services are resumed or RC informs provider that the family has withdrawn from SoonerStart and the record is inactive.
3. RC completes PWN and sends to family
4. RC completes documentation in logging wizard
5. RC follows up with family one week after PWN is sent to offer resource information and provide information about resuming EI services at a later date.
6. Child’s record will remain active in EdPlan unless child turns 3 before services are resumed or family tells RC that they want to withdraw from SoonerStart.

#### ► NOTE

Providers that have already initiated telephone or virtual services with the family should email/text/call the RC to let them know how services are being provided. If the provider has already completed virtual services (Skype for Business or Face Time) and indicated on their progress note that the family was informed of privacy risks and gave verbal consent to proceed, the Provider should fill out the Informed Consent for Virtual Services and send to the RC. If virtual services have been initiated and verbal consent not yet obtained, Provider should follow Step II above

#### ► IFSP Services Provided

Providers should anticipate that services will be provided for the same length of time and the same frequency as written in the child’s current IFSP. A written plan of activities or step-by-step instructions the provider develops that is individualized to the child and family’s specific needs as indicated by the Outcomes on the IFSP can be included in the total visit time recorded.

If the visit time does not last as long as entered on the IFSP due to the family, that should be documented in the progress note. A minimum 15-minute visit is required to bill Medicaid for most provider visits.



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