

**Department of Health
Early Intervention Section**

**Guidance for EI Service Delivery Method During the Pandemic
Effective April 1, 2021**

INTRODUCTION

The purpose of this document is to provide guidance for early intervention (EI) services that aligns with the [State Reopening Strategy](#) and [State’s Reopening Status](#), as well as the [Department of Health \(DOH\), Disease Outbreak Control Division School Guidance](#) which provides information for moving from remote home learning to in-person learning. The Disease Outbreak Control Division School Guidance will be applied to how EI services will be provided.

The goals are to:

- prevent the spread of COVID-19.
- protect the health of children, families, and EI providers.
- partner with families around their children’s growth and development.
- support service providers in the delivery of early intervention services.

HOW WILL EARLY INTERVENTION SERVICES BE PROVIDED?

The EI service delivery method (i.e., in-person, telepractice, blended, or phone) will be based on guidance from the [DOH, Disease Outbreak Control Division on learning models for schools](#). The four EI service delivery methods listed below will be applied to COVID-19 daily case count and positivity levels found in Table 1: Early Intervention Services. Service delivery (e.g., in-person, telepractice, or Blended) is based on a discussion with the family on how services will be provided to support the family with meeting the needs of their child.

1. In-Person Visit
2. Telepractice (videoconference)
3. Blended (combination of in-person and telepractice)
4. Phone – used when a family does not have access to telepractice

Less Restrictive		More Restrictive			
TABLE 1: EARLY INTERVENTION SERVICES					
Level	A	B	C	D	E
Daily Case Count	0 - 2.0	2.1 – 5.0	5.1 - 10.3	10.4 – 15.4	15.5+
Percent Positivity	0 - .99%	1.0% - 2.49%	2.5% - 5.0%	5.1% – 7.5%	>7.5%
Service Delivery Method	In-person visit(s) or Blended based on team decision which includes family	Blended based on team decision which includes family	Telepractice or Blended based on team decision which includes family	Telepractice or Blended with no more than one in-person visit/month	Telepractice and/or Phone

According to DOH, Disease Outbreak Control Division, using a 7-day average per 100,000 population, the parameters may be applied to all islands. EIS will use the 7-day average data provided by the [DOH, Disease Outbreak Control Division](#) to guide the service delivery method.

1. EI services will move toward a less restrictive level when both daily case count and percent positivity in the less restrictive level are met for two consecutive weeks. The Program will inform families of the movement to a less restrictive level and determine if there will be any changes in the service delivery method.

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2. EI services will move back to a more restrictive level when the daily case count falls in a more restrictive service delivery method for two weeks. The Program will inform families of the movement to a more restrictive level and make the appropriate changes.
3. When an outbreak in a specific area (e.g., apartment complex) EI service may move to a more restrictive level of service. Data that is available will be used to guide the decision.

COMMUNICATION WITH FAMILY

1. EI service options and guidance may change at any time based on new information from Center for Disease Control and Prevention (CDC), the State, local County, and Department of Health, Disease Outbreak Control Division.
2. Families will be informed when changes are made to EI services.
3. All families enrolled in EI services will be provided this guidance document.
4. This guidance will be posted on the Early Intervention Section website.

WELLNESS QUESTIONS PRIOR TO START OF IN-PERSON VISIT

24-hours prior to the visit and prior to the provider entering the home for an in-person visit, the family will review the Wellness Questions and inform the provider if there is a “yes” response to any of the questions.

Wellness Questions:

1. *Does anyone in your home have any of the following symptoms?*
 - Cough*
 - Fever (higher than 100°F) or Chills*
 - Muscle or body aches*
 - Shortness of breath*
 - Difficulty breathing*
 - Sore throat*
 - New loss of taste or smell.*
 - Diarrhea*
 - Nausea or Vomiting*
 - Fatigue (tiredness or weakness)*
 - Congestion/Runny Nose*
 - Headache*
2. *Are you, your child, or anyone in your home currently under quarantine/isolation due to:*
 - a positive COVID-19 test result or living with someone with COVID-19*
 - close contact with someone with COVID-19*
 - waiting COVID-19 test result*
 - travelled in the last 10 days*

*“YES” response to any question will require the family and provider to either reschedule the in-person visit or use telepractice for the rescheduled session. The in-person visit may be rescheduled when **ALL three items are met:***

- 1) At least 10 days have passed since the first day of the symptoms **AND***
- 2) At least 24 hours has passed since last fever without the use of fever reducing medication **AND***
- 3) Symptoms have improved (e.g., cough, sore throat, diarrhea, etc.).*

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ILLNESS

If the family or provider is sick the in-person visit will be cancelled. If the in-person visit is cancelled, the provider and family will work together to either reschedule the in-person visit or use telepractice for the cancelled session. The in-person visit may be rescheduled when **ALL three items are met**:

- 1) At least 10 days have passed since the first day of the symptoms **AND**
- 2) At least 24 hours has passed since last fever without the use of fever reducing medication **AND**
- 3) Symptoms have improved (e.g., cough, sore throat, diarrhea, etc.).

SAFE PRACTICES

- For the safety of the family and provider all safe practice (i.e., wearing a face mask and 6 feet physical distancing) requirements will be followed during an in-person visit.
- Anyone age two years or older who is present during the session must wear a face mask that covers their nose and mouth. CDC indicates that children younger than two years old are listed as an exception as well as anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance.

Safe Practice Requirements for Family and Provider:

1. *Evaluations and assessments that requires the evaluator to be within 6 feet physical distance of the child to complete the evaluation or assessment will be conducted via telepractice until further notice.*
2. *Whenever possible, only one provider will be in the home or identified location with the child and family. However, in certain situations a second provider may attend the visit, with family verbal consent. Therefore, there will be no more than two providers in the home or identified location with the child and family.*
3. *No more than two adult family members and the child receiving EI services is preferred during the in-person visit except when other children must be present.*
4. *When other children must be present, children two years and older must wear a face mask and maintain 6 feet physical distance throughout the in-person visit. When possible, it is preferred that other children are in another room from where the in-person visit is held.*
5. *If a family member or provider appears to be sick or becomes ill during the session, the in-person visit will end. The family and provider will work together to reschedule the visit via in-person or telepractice.*
6. *During the in-person visit, everyone present will wear a face mask, maintain 6 feet physical distance, and wash/disinfect hands as often as needed.*
7. *If the child receiving EI services is unable to wear a face mask or keep the face mask on during the visit, the provider will increase their protection by wearing a face mask and face shield or other necessary protection.*
8. *When the EI child does not maintain the 6 feet physical distance or the provider must get within 6 feet of the child and family, additional protective wear (e.g., face shield) will be worn by the provider.*

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9. *Family or Provider may use gloves during the in-person visit, as necessary.*
10. *In-person visits will be held in a ventilated area (e.g., home with windows open or outside location) that supports the purpose of the visit.*

Additional Safe Practices Requirements for Providers:

1. *Providers will replace their disposable face mask between visits.*
2. *Providers will clean and disinfect all items taken into a home, including face shields.*
3. *Providers may wear gloves at any time during the in-person visit.*
4. *Providers will discard any gloves worn at the end of each visit.*
5. *Providers will have the appropriate storage bag(s) (e.g., small trash bag) needed to store used items that need to be cleaned and disinfected or discarded.*
6. *Providers will keep a secured record of dates/times in the office and in-person visits.*

RESOURCES FOR FAMILIES AND PROVIDERS

- Department of Health, Disease Outbreak Control Division
[Disease Outbreak Control Division | COVID-19 | School Guidance \(hawaii.gov\)](https://health.hawaii.gov/disease-outbreak-control-division/covid-19/school-guidance/)
- Department of Health, Interim Return to Work/School Guidance
<https://health.hawaii.gov/coronavirusdisease2019/files/2020/08/COVID-19-Return-to-Work-School-Guidance-073120.pdf>
- How to Protect Yourself and Others
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>
- COVID-19 Resources in Various Languages
<https://hawaiiicovid19.com/resources/#multilingual-resources>
- COVID-19 Protective Handwashing
https://hawaiiicovid19.com/wp-content/uploads/2020/03/Fact-Sheet-Hand-Washing_031820.pdf
- Guidance for Wearing Masks
https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcommunity%2Fschoools-childcare%2Fcloth-face-cover.html