



Nebraska Early Development Network

A Family's Guide to Early Intervention Services in Nebraska

edn.ne.gov



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What Is Early Intervention?

Early Intervention can help you and your family support and promote your child’s development within your family activities and community life. Nebraska’s Early Development Network supports children birth through three years of age who have special developmental needs. The Nebraska Early Development Network program “connects” families with early intervention services, such as occupational, speech or physical therapy, to help infants and toddlers grow and develop and help their families in this process. It is a voluntary program and does not discriminate based on race, culture, religion, income level, or disability.

Need More Information?

For more information on your rights, or if you need help understanding the information provided, contact any of the following:

Your Services Coordinator: _____

Provider: _____

IFSP Team: _____

Your Local School District

Name: _____

Contact Information: _____

Special Education Director: _____

Notes:

Introduction to the Early Development Network (EDN)

Who should read this document?

This document is for any parent or guardian who has a concern regarding the development of their infant/toddler or whose infant/toddler has health care needs.

Why do I need this document?

As a parent/guardian, you have rights under both federal laws (Individuals with Disabilities Education Act-IDEA) and state early intervention regulations (92 NAC 52, 480 NAC 3) that affect any services your child may be eligible for. This document will help explain some of those rights, the process, and important contacts if you have questions.



What is Early Intervention?

Early Intervention is a collection of services families may need if their infants/toddlers have developmental delays and/or health care needs.

What is the Early Development Network (EDN)?

The Early Development Network (EDN) provides Early Intervention Services that are *voluntary and free* for children in Nebraska from birth to age three and their families. <http://edn.ne.gov>

The Early Development Network (EDN) is a partnership among:

- families and their young children with special needs (birth to age three);
- providers from the Nebraska Department of Education;
- providers from the Nebraska Department of Health and Human Services; and
- other community agencies.

What is the Special Education Law?

Federal Law

The Federal Law is called the Individuals with Disabilities Education Act (IDEA). It outlines rights and responsibilities regarding special education for children with disabilities and their parents. More information can be found at: idea.ed.gov

Nebraska State Law

In Nebraska, early intervention services are outlined in the Early Intervention Act. The state regulation covering early intervention services in Nebraska is NDE Rule 52 and DHHS 480 NAC 3 – Early Intervention Services Coordination Manual. More information can be found at: <https://www.nebraska.gov/rules-and-regs/regsearch>

What do the numbers in parentheses mean? (i.e., Rule 52 - 006.04)

Throughout this guide, you will see reference numbers that will guide you to topics listed in NDE Rule 52. Each reference number lists the section and paragraph where the topic can be found.

How do I know if my child is eligible? (Rule 52 - 006.04)

If you have a concern about your child’s development, or your child has been diagnosed with a health condition that will affect his/her development, he/she may be eligible for early intervention services.

The assigned EDN Services Coordinator will request your written permission for evaluations through the Special Education Department of your school district. Evaluations are conducted by a Multidisciplinary Evaluation Team (MDT), consisting of professionals within your school district and yourself.

The Multidisciplinary Evaluation Team (MDT) determines eligibility for free and appropriate early intervention services/education under state guidelines. Eligibility guidelines are found in Rule 52, section 006 (Eligibility for Early Intervention).

What is a Free Appropriate Public Education (FAPE)? (Rule 52 - 003.08-09)

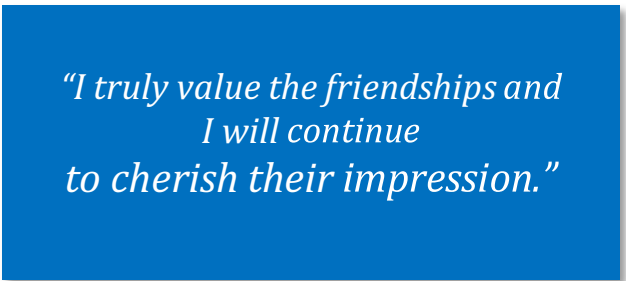
Free appropriate public education or FAPE means infants/toddlers who are found to be eligible under state and federal requirements can receive early intervention and related services that are provided at no cost to parents.

Early Intervention Services are developmental services that are provided by public agencies. They are selected in collaboration with parents, and provided at no cost to the family. Services are designed to meet the needs of a child with a disability and their family.

What areas of development are addressed by Early Intervention Services (EIS)? (Rule 52 - 003.06A4)

EIS provides services to meet the child’s needs in the following areas:

- Physical Development;
- Cognitive Development;
- Communication Development;
- Social or Emotional Development; or
- Adaptive Development.



“I truly value the friendships and I will continue to cherish their impression.”

What Happens After Referral?

What does a Services Coordinator do?

During your first visit, the Services Coordinator will talk about the program and the process as well as answer any questions you and your family may have. With your permission and consent, the Services Coordinator will gather information about your child and family.

A Services Coordinator will:

- contact your family to determine if you are interested in Early Development Network services;
- arrange for evaluation of your child;
- work with agencies that provide services;
- make sure services are delivered smoothly and properly;
- inform you of services in the community;
- inform your family about advocacy and support groups;
- convene a team meeting to develop a plan for services for your child and family; and
- gather information about your family's goals and concerns.



You are entitled to help from a Services Coordinator up to the time of the evaluation. If your child is verified as having a disability, the Services Coordinator's services will continue.

What are the steps to determining if your child is eligible for Early Intervention Services? (Rule 52 - 006)

Within 45 days from the date of referral, the following activities must be conducted:

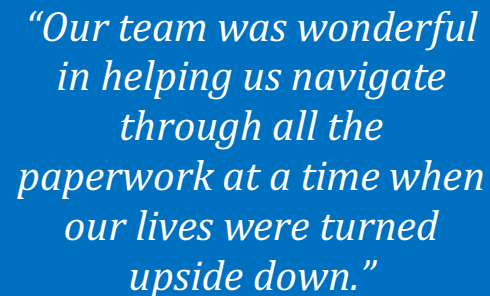
- Screening-may be conducted at the discretion of the Early Intervention team;
- Evaluation;
- Multidisciplinary Team determination of eligibility for Early Intervention Services;
- Child and Family Assessment; and
- Development of Individual Family Service Plan (IFSP).

What is Screening? (Rule 52 - 006.03)

At the discretion of the Early Intervention team, screening may be conducted to gather initial information about an infant or toddler to determine whether or not the infant or toddler has a disability. This includes the use of appropriate screening instruments by people trained to administer the screening instrument. You must be given a description of the screening process and why it is being used so you can decide if you want to give your informed written consent before the screening is conducted.

You may decline the option of screening and instead request a multidisciplinary evaluation be conducted at any time before, during, or after the screening procedure. The professional must ensure that you are aware of your options before initiating the screening procedure.

Professionals in no way should imply to you that a screening tool can be used in a way to “rule out” an evaluation. You may choose not to proceed with an evaluation based on information from the screening tool, but the professional must make sure you know your rights in this circumstance.



“Our team was wonderful in helping us navigate through all the paperwork at a time when our lives were turned upside down.”

What is a multidisciplinary Team (MDT)?

With your consent, an evaluation of your child is conducted by a Multidisciplinary Evaluation Team (MDT). This team includes you (the parents/guardians) and a variety of qualified professionals who evaluate your child and determine if your child meets the state requirements to receive Early Intervention services (Rule 52 - 003.16). An MDT evaluation must be completed within 45 calendar days from the date of referral (Rule 52 - 006.02).

The make-up of the MDT is determined by the child’s needs. Some of the professionals who may be included on the team are:

- An **infant/preschool teacher** works with children from birth until they enroll kindergarten. These Early Childhood Special Education teachers have a degree in special education as well as child development. They have specialized training to meet the needs of children and toddlers with learning or physical disabilities.
- A **psychologist** administers intellectual and developmental tests and collects other assessment information; interprets test results; consults with other staff members in planning services to address the needs of children; assists in developing positive behavioral intervention strategies; and helps parents meet their child’s needs.
- A **speech-language pathologist** identifies children with communication delays or impairments; diagnoses and appraises specific speech or language impairments; makes referrals for medical or other professional attention necessary for treating speech or language impairments; provides speech and language services for the treatment or

prevention of communication impairments; and collaborates with parents and other team members about speech and language impairments.

- A **physical therapist** provides services that generally address the development of a child's posture, muscle strength, mobility, and movement. Physical therapy may be provided to prevent the onset or progression of impairment, functional limitation, disability, or changes in physical function or health resulting from injury, disease, or other causes.
- **Occupational therapists** develop the functional use of smaller muscles to improve ability to perform tasks for independent functioning and prevent, through early intervention, initial or further impairment or loss of function.
- A **vision specialist** helps the infant or toddler to explore their environment; use limited vision if appropriate; develop functional skills with adaptations for vision disability; and helps family members to understand and enhance the child's development. *A vision specialist does not test visual acuity or make any kind of medical diagnosis.*
- An **audiologist** identifies children with hearing loss; determines the range, nature, and degree of hearing loss, including referral for medical or other professional attention for the treatment of hearing loss; provides treatment activities, such as auditory rehabilitation, speech reading (lip-reading), and determines children's needs for amplification including selecting and fitting an appropriate hearing aid for infants and toddlers, evaluating the effectiveness of amplification and providing training and orientation for listening devices.
- A **nurse** cares for infants and toddlers with health needs such as tube feeding, tracheostomy, and breathing difficulties. A nurse administers the care and treatment that a doctor prescribes and assists family members to follow treatment regimens.
- A **doctor** is a practitioner of medicine, as one graduated from a college of medicine, osteopathy, dentistry, chiropractic, optometry, or podiatry, and licensed to practice.

What is an Evaluation? (Rule 52 - 003.07 and 003.15)

A complete evaluation includes information provided by parents/guardians, observation of your child, and testing in each of the following areas of your child's development:

- **Cognitive**—ability to learn and how your child learns;
- **Physical**—ability to move, see, and hear as well as health development;
- **Communication**—ability to understand language and express needs;
- **Social/emotional**—ability to relate with others; and
- **Adaptive skills**—ability to dress, eat and take care of oneself.



An evaluation is a way of seeing if your child is eligible for early intervention services. The evaluation will occur **only** with your written permission and at no cost to you. You, your child, and the professionals on your team will be involved in this evaluation.

How is an Assessment different than an Evaluation? (Rule 52 - 006.07)

The purpose of an evaluation is to gather information to be used by the MDT to determine whether or not an infant or toddler is eligible to receive EDN services. Following the determination of eligibility, child and family assessments are conducted. Once again, these are completed only after the parent/guardian gives consent. Each family member can determine whether they want to participate in an assessment.

The assessments are carried out to pinpoint the child's unique strengths and developmental needs, determine how the child and family interact and move through their daily activities, and gather information from family members and caregivers about their role in supporting the child's development. The goal of gathering this information is to guide the EDN team as they establish desired outcomes for the child and family.

The Individualized Family Service Plan (IFSP)

What is an Individualized Family Service Plan (IFSP)? (Rule 52 - 007)

If eligible, your child can receive early intervention services. You will have a meeting with your EDN Services Coordinator and other service providers to write an Individualized Family Service Plan (IFSP). Your first IFSP meeting must be held within 45 days of the referral. Services begin when you have agreed to the IFSP that has been developed. The plan will reflect your family's concerns and priorities.

The IFSP is an ongoing process that adjusts to the changing needs of your child and family. It is reviewed every six months and rewritten on a yearly basis. If there are major changes in your child's health or development, or your family's situation, a review can occur at any time.

An IFSP is several pages long and includes the following information:

- **Present levels of functioning**—what your child is able to do now;
- **Family's concerns and priorities**—family concerns are what you are worried about for your child and family. Some of these concerns may center on pre-academic and/or developmental skills, and some may be more family centered, i.e., things that would help



your family to support your child. Priorities are those concerns you have identified as being the most important to address at this time;

- **Family’s resources**—the strengths and abilities or formal and informal supports your family has to help meet the changes you want for your child;
- **Outcomes**—measurable changes you want to see for your child or something you want for your family. These are sometimes referred to as “goals;”
- **Early intervention services needed**—what services are needed, how often and how long they will be provided, where they will happen, and who will pay for them.
- **Natural environments**—settings that are natural or normal for your child’s age peers without disabilities;
- **Other services**—these services may be medical, child care, recreational, or any service you want the IFSP team to know about;
- **Timelines**—when services will begin and end and when the team will formally review the plan again;
- **Name of your Services Coordinator**—someone to help you navigate the services that are named in your plan;
- **A transition plan** when your child nears the age of three—exploring and planning services after your child is three years old and exits from the EDN;
- **Assistive technology**—refers to a wide range of devices and modifications that can be used to support your child as he/she plays, communicates, and participates in daily activities.



You may invite other family members, a friend or support person to the meeting. Bring any information about your child you feel is important to share.

What services does early intervention include? (Rule 52 – 003.06B)

EDN services that are appropriate and agreed-upon by the Individualized Family Service Plan (IFSP) team are provided *at no cost to your family*. These services are family-centered and written on the IFSP. They are provided year round.

Services may include, but are not limited to:

- **Services coordination** means planned efforts to assist and enable the child’s family and the infant or toddler with a disability to receive the services and ensure the rights to which they are entitled according to the federal regulations (IDEA) and state requirements. This includes procedural safeguards, such as your rights regarding consent, confidentiality, access to records, revision of records, and a right to request a hearing. Services

coordination includes supporting the child and family through the IFSP process and support in accessing services to make achieving child and family outcomes easier.

- **Assistive technology** is any item or piece of equipment that is used to increase, maintain, or improve the functional capabilities of an infant or toddler with a disability. This most commonly refers to devices that help with speech and/or walking. The term does not include a medical device that is surgically implanted, such as a cochlear implant.
- **Audiology services** include identification of children with hearing impairments, using at-risk criteria and appropriate hearing evaluation techniques. It also includes the provision of auditory training, aural rehabilitation, speech reading and listening devices, orientation and training, and other services.
- **Family training, counseling, and home visits** are services provided by social workers, psychologists, and other qualified personnel to assist the family of an infant or toddler with a disability to understand the special needs of the child and enhance the child's development.
- **Health services** might include clean intermittent catheterization, tracheostomy care, tube feeding, and the changing of dressings or colostomy collection bags. It does not include services that are surgical or purely medical or routine ("well-baby" care that is routinely recommended for all children).
- **Medical services** are provided by a licensed physician for diagnostic or evaluation purposes to determine a child's developmental status and need for early intervention services.
- **Nursing services** include the assessment of current health in order to provide nursing care. This can include: (1) the identification of potential health problems; (2) the provision of nursing care to prevent health problems, restore or improve functioning, and promote optimal health and development; and (3) the administration of medications, treatments, and routines prescribed by a licensed physician.
- **Nutrition services** include individual assessments in nutritional history and dietary intake, feeding skills and feeding problems, and food habits and food sensitivities or preferences, and providing recommendations for the development of IFSP goals as needed.
- **Occupational therapy** includes services to help an infant or toddler with a disability adapt to his/her environment, including sensory, motor, and fine motor development. These services are designed to improve the child's ability to perform tasks in home, school, and community settings.
- **Physical therapy** includes services to improve the movement skills of a child with a disability. It includes enhancing bone/muscle interaction, improving perceptual and motor development, heart/lung functioning, and adaptation to the environment.
- **Psychological services** include administering and interpreting psychological and developmental tests and other assessment procedures, and designing behavioral interventions.

- **Sign language and cued language services** include teaching sign language, cued language, and auditory/oral language; providing oral interpretation for deaf persons who lip-read; and providing sign and cued language interpretation and sound amplification.
- **Social work services** include making home visits to evaluate a child’s living conditions and patterns of parent-child interaction; preparing a social or emotional developmental assessment of the infant or toddler within the family context; providing individual and family-group counseling with parents and other family members, and appropriate social skill-building activities with the infant or toddler and parents.
- **Special instruction** includes the design of learning environments and activities that promote the infant’s or toddler’s acquisition of skills; curriculum planning, including the planned interaction of personnel, materials, and time and space, that leads to achieving the outcomes in the IFSP for the infant or toddler with a disability; and working with the infant or toddler with a disability to enhance the child’s development.
- **Speech-language pathology services** include identification of children with speech or language disorders and delays in development of communication skills, including the diagnosis and appraisal of specific disorders and delays in those skills.
- **Transportation and related costs** include the cost of travel and other costs that are necessary to enable an infant or toddler with a disability and the child’s family to receive early intervention services
- **Vision services** include evaluation and assessment of visual functioning, including the diagnosis and appraisal of specific visual disorders, delays, and abilities that affect early childhood development. It also includes communication skills training, orientation and mobility training for all environments, visual training, and additional training necessary to activate visual motor abilities.

More in-depth definitions are available at:

www.parentcenterhub.org/repository/keyterms-ei/#coordination

When do services begin? (Rule 52 – 006.02 and 007.02E)

The process of evaluation, determination of eligibility, assessment and the development of the Individualized Family Service Plan (IFSP) must be completed within 45 calendar days from the date of referral to the Early Development Network. A delay may occur if your child is hospitalized or your family has other extenuating circumstances. Services must begin in a timely manner, i.e. within 30 days of the time the parent signs the consent for the services.

What is meant by services in “natural environments”? (Rule 52 – 007.06)

Natural environment is different for each family and is defined as settings where children of the same age without disabilities would be found. Consider where your child would be spending time if he/she did not have a disability. Whenever possible, EDN services occur in natural environments.



Examples would include community child care centers, church or synagogue play groups, public parks and pools, libraries, stores, restaurants, family vehicles, public transportation, birthday and holiday parties, barbers, dentists, festivals and fairs to name only a few. What is ‘natural’ for one child may not be natural for all children, i.e., riding daily in dad’s pick-up truck.

A location may not be a natural environment if it is where the clients or patrons are primarily persons with disabilities or illness, i.e., clinics, hospitals, special schools/classrooms. The provision of early intervention services for any infant or toddler may occur in a setting other than a natural environment only if early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment.

Why does assessment continue after the IFSP is developed? (Rule 52 – 006.05)

An assessment is an ongoing collection of information about your child’s strengths and needs. The EDN Service Providers use this data to determine your child’s level of progress and whether program changes need to be made as your child grows. Assessments are ongoing and the information is included in the review of your child’s IFSP.

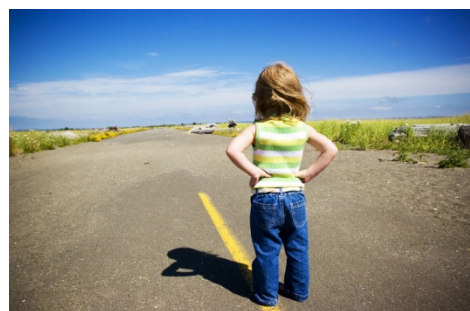
What happens in the summer?—Year Round Services (Rule 52 – 007.07)

School districts, as well as services coordination agencies, are required to provide year round services for children birth to three. This includes providing services over the summer months. Services may not be interrupted, modified or otherwise changed for reasons such as service provider’s availability or scheduling that are unrelated to your child’s needs. Only a change in your child’s needs and your family’s preferences should dictate a reduction in services.

Transition at Age Three

What happens when my child reaches age three? (Rule 52 – 008.01)

At the age of 3 your child will transition out of the Early Development Network. You may choose to stay in the Early Development Network until August 31st after your child's third birthday.



If she/he is still in need of special education services following their third birthday, she/he will transition from an Individualized Family Service Plan (IFSP) to an Individualized Education Program (IEP). You and your team will schedule a meeting to ensure that the process of transition goes well for everyone. This meeting should occur at least 90 days prior to your child's third birthday. If desired, the meeting can be held up to nine months prior to your child's third birthday.

The team will review your child's program options for the remainder of the time they are involved in EDN services, describe how your family will participate in the transition process, and develop the transition plan with you.

Consent, Confidentiality, and Record Review

What is Prior Written Notice and why would I need it? (Rule 51 – 009.03B)

Prior written notice is a document provided to you within a reasonable amount of time before EDN proposes or refuses to initiate or change the identification, evaluation, or location of services for your child or the provision of a free appropriate public education (FAPE). It must include a description of the action proposed or refused and an explanation of why the action was proposed or refused. It must be written in an easily understandable manner, and in your native language. The notice is intended to allow you adequate time to learn more and respond to the proposed change before it occurs.

What does Informed Consent mean? (Rule 52 – 003.04)

It means that the Early Development Network (EDN) must have your permission in writing before any evaluations or services are provided. The information will be provided in your native language or other mode of communication, and your consent is voluntary and may be revoked at any time.

You can decide not to give permission for any specific services, and you may refuse a service at any time while keeping the services you choose to receive. The Early Development Network (EDN) must also have your permission before sharing information about you or your child with others. Consent means you have been fully informed about the activity for which consent is being sought and you understand and agree. More information on informed consent can be found in Rule 52 – 009.03.

Is information about my family confidential? (Rule 52 – 009.01)

Your consent must be obtained before personally Identifiable information is disclosed to parties other than officials of participating agencies unless specifically not required in the Family Education Rights and Privacy Act (FERPA). If you have any questions, you can request local policies and procedures regarding how your confidentiality is protected.



Can I review my child’s records? (Rule 52 - 009.02)

Yes, you have the right to request, review, and receive copies of the records. You have the right to be informed about the types and the locations of records collected, maintained, or used in the program, who in the program has access to those records, and when they see those records. You can request information about who has seen the records or copies of the records. You may review all records that relate to your child. You can request that information be changed if you believe it is inaccurate, misleading, or violates the privacy or rights of your child or family. The local agency will decide if the information is amended and will inform you of any refusal along with the further information on your rights (Rule 52 – 009.02G).

*“Even when all I needed
was a shoulder to cry on,
our team was always
there for us.”*

Dispute Resolution

What if I don’t agree with a decision about my child’s services?

If you (1) disagree with any of the recommendations for your child, (2) think that your child is not receiving the services needed, (3) think the law is not being followed, or (4) your rights have been violated, you have the right to voice your concerns and be heard.

When you disagree, you have the following options:

Work it out informally

You may try to work the problem out informally by meeting with your Services Coordinator and/or your IFSP Team. If the disagreement is not resolved or you are not comfortable meeting informally, you may use any or all of the following options:

Request Special Education Mediation (Rule 52 – 009.05)

You may choose Special Education Mediation, which is a voluntary process where a neutral third party helps parents and providers resolve disagreements. Special Education Mediation is free. See page 18 for specific office contacts.

File a Complaint (Rule 52 – 009.06)

You have the right to file a written complaint with the Nebraska Department of Education and have your complaint investigated by the State Complaint Investigator. The complaint must be written, signed, and include the facts about the complaint. Contact the Nebraska Department of Education at 402-471-2471 for more information.



Request a Due Process Hearing (Rule 52 – 009.07)

You have the right to request a due process hearing. This is a formal hearing or proceeding conducted by a Hearing Officer appointed by the Nebraska Department of Education. A request for a due process hearing must be in writing and include the complaint. For additional information you can contact either PTI Nebraska or the Disability Rights-Nebraska.

If you would like additional information or resources, please refer to the contacts on page 1 or see the list of resources at the back of this book.

Rights Regarding EDN Services

What are my rights in receiving EDN Services?

Your Services Coordinator will give you this Family Guide to Early Intervention Services along with the EDN Procedural Safeguards that explains your rights.

Before eligibility for special education is determined, you have the right to:

- Services coordination
- Act as the primary and final decision maker for your child
- Access services which include:
 - Early identification of concerns
 - A multidisciplinary evaluation

- Determination of your child’s eligibility
- Voluntarily withdraw from or refuse the EDN process/specific services

If your child is determined eligible to receive EDN services, you have the right to:

- Services Coordination
- An Individualized Family Service Plan (IFSP)
- Receive early intervention services related to your child’s development
- Agree to the services, but disagree with how often or where the services will be provided
- Refuse some services recommended by the IFSP team and still receive other services (Informed Consent)
- Participate in all meetings concerning your child’s early intervention services and changes in delivery of services
- Have meetings at a time and place agreeable to your family
- Receive timely written notice of
 - Any changes with any service involving your child
 - Meeting participants
 - The date/time/location of MDT and IFSP meetings
- Receive notices and IFSP documents in your native language or the mode of communication used in your home.
- Receive services in your child’s natural environment
- Dispute Resolution
- Informed consent
- Confidentiality of information/records
- Year round services
- Free and Appropriate Public Education (FAPE)
- Access to all members of the IFSP team
- Receive services until August 31st following your child’s third birthday (Transition)

Available Resources

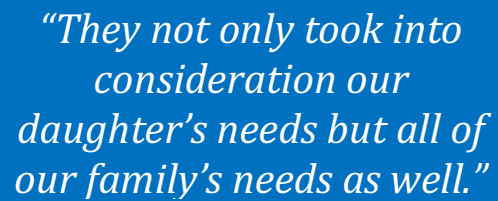
Where can I find help?

- **IFSPweb**
IFSPweb is an educational/informational online assistance program designed to help families develop Individualized Family Service Plans for young children with disabilities.
Web: <http://www.ifspweb.org/>
- **PTI Nebraska (Parent Training and Information)**
The mission of PTI Nebraska is to provide training, information, and support to parents in Nebraska who have a child birth through 26 with special needs. Resources are provided for parents, other family members, school personnel, and interested others.

Connie Shockley
Parent Support Coordinator
PTI Nebraska
1941 S. 42nd Street, Suite 205
Omaha, NE 68105-2938
402-403-3911
Email: cshockley@pti-nebraska.org
Web: www.pti-nebraska.org

- **Nebraska's Family to Family Health Information Center**
Nebraska's Family to Family Health Information Center is a federally funded family-run center established to assist families of children with special health care needs to make informed choices about health care to promote good treatment decisions, cost effectiveness, and improved health outcomes. PTI Nebraska (Parent Training and Information) is home to the Family to Family Health Information Center and funded by the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, Division of Services for Children with Special Health Needs.

Nina Baker
PTI Nebraska
Health Information Coordinator
1941 S. 42nd Street, Suite 205
Omaha, NE 68105-2938
402-403-3908
Email: nbaker@pti-nebraska.org
Web: www.pti-nebraska.org



“They not only took into consideration our daughter’s needs but all of our family’s needs as well.”

- **Munroe-Meyer Institute**

The Munroe-Meyer Institute, located in the University of Nebraska Medical Center, is the federally designated University Center for Excellence in Developmental Disabilities for Nebraska. The goal of the Institute is to help build the professional capacity and the capacity of state and local systems to support individuals with disabilities and their families, including infants and toddlers with disabilities and their families.

Mark Smith
Resource and Family Support Coordinator
Nebraska Center on Disabilities
985450 Nebraska Medical Center
Omaha, NE 68198
402-559-5744
Toll Free: 800-656-3937
Email: msmitha@unmc.edu

NDE and DHHS serve as co-lead agencies for the Early Development Network that is supported by federal IDEA Part C funds. The Co-Leads monitor and assist school districts (NDE) and services co-ordination agencies (DHHS) in providing early intervention services.

- **Nebraska Department of Education (NDE)**

Early Development Network
500 S. 84th Street, 2nd Floor
P.O. Box 94987
Lincoln NE, 68510-2611
Web: www.education.ne.gov

- **Nebraska Department of Health and Human Services (DHHS)**

Early Development Network
P.O. Box 95026
Lincoln, NE 68509-5026
402-471-9310
Web: www.dhhs.ne.gov/Pages/default.aspx

- **Answers4Families: Connecting Nebraska's Families**


Answers4Families.org is Nebraska's support and information connection for families and professionals seeking assistance. This website is a collection of articles, resources and referrals organized by target groups.

Center on Children, Families, and the Law
P.O. Box 880227
206 S. 13th Street, Suite 1000
Lincoln, NE 68588-0227
402-472-0844
Toll free: 800-746-8420
[Web: www.answers4families.org](http://www.answers4families.org)

- **Assistive Technology Partnership (ATP)**

Assistive Technology Partnership provides assistive devices and modifications to help individuals with disabilities to perform daily activities leading to the development of skills to live independently.

Lincoln Office
3901 N. 27th Street, Suite 5
Lincoln, NE 68521
402-471-0734
Toll free: 888-806-6287
Web: www.atp.ne.gov



“We were able to locate resources and equipment that made a world of difference in our lives.”

- **The Arc of Nebraska**

The Arc of Nebraska is committed to helping children and adults with disabilities secure the opportunity to choose and realize their goals of where and how they learn, live, work, and play.

The Arc of Nebraska
215 Centennial Mall South, Suite 508
Lincoln, NE 68508
402-475-4407
Email: info@arc-nebraska.org
Web: <https://www.arc-nebraska.org/>

- **Disability Rights Nebraska**

Disability Rights Nebraska is a private, non-profit organization designated by the Governor to protect and advocate for the rights of Nebraskans with significant physical or mental disabilities.

Disability Rights Nebraska
The Center for Disability Rights, Law and Advocacy
The Protection & Advocacy System in Nebraska
134 South 13th Street, Suite 600
Lincoln, NE 68508
Phone: 402-474-3183
Fax: 402-474-3274
Toll-free: 800-422-6691
E-mail: info@disabilityrightsnebraska.org
Web: www.disabilityrightsnebraska.org

- **Mediation Centers**

Mediation is a process in which trained mediators assist people in conflict to communicate and to make voluntary, informed choices in an effort to find a mutually acceptable resolution to their dispute. There are six Mediation Centers in Nebraska. Information about the Mediation Centers can be found at: <https://www.education.ne.gov/sped/mediation.html>

Nebraska Early Development Network



Co-Lead Agencies:

Nebraska Department of Education
PO Box 94987
Lincoln, NE 68509-4987
402-471-2471

Nebraska Department of Health & Human Services
PO Box 95026
Lincoln, NE 68509-5026
402-471-9310

