

IV. PUBLIC AWARENESS PROGRAM

A. POLICIES

1. The State Lead Agency (DMHMRSAS) ensures that Virginia has developed and implemented a public awareness program that:
 - a. Focuses on the early identification of children who are eligible to receive early intervention supports and services under Part C;
 - b. Includes the preparation and dissemination of information by the State Lead Agency to all primary referral sources, especially hospitals and physicians, of information to be given to parents, especially to inform parents with premature infants, or infants with other physical risk factors associated with learning or developmental complications, on the availability of early intervention supports and services under Part C and of preschool services under Section 619:
(20 USC 1435(a)(6))
 - c. Includes procedures for assisting such referral sources in disseminating such information to parents of infants and toddlers; and
(34 CFR 303.320)
 - d. Includes information that is consistent with Virginia’s policies and procedures related to child find, evaluation and assessment, and provision of Part C supports and services.
2. The State Lead Agency ensures that the public awareness program provides for informing the public about:
 - a. Virginia’s early intervention program;
 - b. The child find system, including:
 - (1) The purpose and scope of the system;
 - (2) How to make referrals; and
 - (3) How to gain access to a comprehensive, multidisciplinary evaluation and other early intervention supports and services; and
 - c. The central directory. (34 CFR 303.320(a)-(c))
3. The State Lead Agency ensures that the public awareness program:
 - a. Provides a continuous, ongoing effort that is in effect throughout Virginia including rural areas;
 - b. Provides for the involvement of, and communication with, major organizations throughout Virginia that have a direct interest in Part C, including public agencies at the state and local level, private providers, professional associations, parent groups, advocate associations, and other organizations;
 - c. Has coverage broad enough to reach the general public including persons with disabilities and traditionally underserved groups, including minority, low-income, and rural and homeless families, and children with disabilities who are wards of the State;
 - d. Includes a variety of methods for informing the public about the provisions of this part including:
 - (1) Use of television, radio, and newspaper releases; and/or
 - (2) Pamphlets and posters displayed in doctors’ offices, hospitals, and other appropriate locations; and/or
 - (3) The use of a toll-free telephone service. (34 CFR 303.320, Note 2)

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Deleted: <#>Local interagency coordinating councils (LICCs) develop and implement policies and procedures (including mechanisms) to plan, organize and distribute information in their communities for the purpose of creating an overall public awareness campaign in coordination with child find policies and procedures. Local policies and procedures must determine responsibilities, content, outcomes and processes to be used for planning, organizing, and distributing public awareness information. All public awareness procedures developed and implemented are consistent with those set forth in State policies and state-level agreements. LICCs will adopt and implement for their local public awareness activities, the materials and strategies developed by the state. Neighboring localities are encouraged to collaborate in the development and implementation of an awareness plan that promotes a central theme throughout Virginia.¶

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B. PROCEDURES

1. Local lead agencies use the following mechanisms to inform the public about the early

intervention program (including how to make referrals and access evaluation and other supports and services):

- a. Use statewide materials and ensure that local public awareness materials are consistent with the statewide public awareness materials and reflect the diversity of the local community.
- b. Coordinate local activities with planned statewide public awareness activities (e.g., airing of public service announcements, dissemination of materials).
- c. Provide notice throughout the community before any major child find activity takes place.
- d. Disseminate materials to local agencies and places of business. The following agencies/businesses will be targeted for dissemination of information:
 - (1) Pediatricians'/general practitioners' offices;
 - (2) Hospitals, including NICUs and NICU follow-up and other outpatient clinics;
 - (3) WIC clinics;
 - (4) Well-baby/immunization clinics and mobile vans;
 - (5) Community and migrant health centers;
 - (6) Head Start and Early Head Start programs;
 - (7) Family support programs;
 - (8) Child day care centers and family day care homes;
 - (9) Visiting public health nurse programs;
 - (10) Local social service departments;
 - (11) Programs that serve families affected by substance abuse;
 - (12) Mental health clinics;
 - (13) Civic groups;
 - (14) Ethnic/community centers;
 - (15) Homeless family shelters;
 - (16) Family planning organizations;
 - (17) Businesses (e.g., banks, utility companies, grocery stores, laundromats, beauty parlors, etc.);
 - (18) Churches and synagogues;
 - (19) Professional associations;
 - (20) Advocacy associations;
 - (21) Private providers;
 - (22) Public schools;
 - (23) Adoption agencies;
 - (24) Parent support groups; and
 - (25) Other local points of contact with families and young children.

- 2. Local lead agencies develop procedures to implement the mechanisms in B.1 and include the following:
 - a. The methods to be used for planning and distributing public awareness information.
 - b. The roles of agencies and individuals in the community involved in public awareness activities, including, but not limited to:
 - (1) Public agencies (e.g., local school systems, Head Start and Early Head Start, health agencies, social service departments);
 - (2) Private entities (e.g., pediatricians);
 - (3) Lay groups (e.g., Chambers of Commerce, service organizations, neighborhood associations, faith based organizations, major employers, advocacy groups); and
 - (4) Agencies and individuals who represent underserved groups, including minority, low-income, homeless, and rural families and children and children with disabilities who are wards of the State.

Deleted: <#>Selecting a variety of methods for informing the general public including but not limited to:¶
 <#>Use of television, radio and newspaper releases;¶
 <#>Pamphlets and posters displayed in doctors' offices, and other appropriate locations; and¶
 <#>The use of the statewide toll-free telephone service. (34 CFR 303.320, Note 2)¶
 <#>Local efforts must be coordinated with statewide public awareness efforts. Materials and activities must be culturally diverse and include:¶
 <#>Adapting existing materials to be consistent with statewide public awareness materials;¶
 <#>Incorporating local public information with State public awareness materials;¶
 <#>Developing materials to augment statewide public awareness materials (e.g., philosophy of child find, screening resources, etc.); and¶
 <#>Coordinating local activities with planned statewide public awareness activities (e.g., airing of Public Service Announcements, dissemination of materials).¶

Deleted: Local public awareness materials including posters and brochures are requested to be displayed in highly visible and accessible locations. Other materials are requested to be included in agency/company mail outs (e.g., pay checks, newsletters, bills etc.).

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