

IN REPLY REFER TO BUMEDINST 1755.1A CH-1 BUMED-N3 11 Jan 2023

BUMED INSTRUCTION 1755.1A CHANGE TRANSMITTAL 1

From: Chief, Bureau of Medicine and Surgery

Subj: EDUCATIONAL AND DEVELOPMENTAL INTERVENTION SERVICES AND EARLY INTERVENTION SERVICES

Ref: (a) DoD Instruction 1342.12 of 17 June 2015

Encl: (1) Revised page 3

1. <u>Purpose</u>. To update responsibilities for the Educational and Developmental Intervention Services (EDIS) program manager. Navy EDIS programs were monitored once every 3 years by the Medical Inspector General (MED IG). Due to the transition of authority, direction, and control of medical treatment facilities (MTF) to the Defense Health Agency (DHA), the MED IG team ceased inspection of EDIS programs for MTFs in continental United States, locations in October 2019 and for MTFs outside continental United States, location in 2020. Navy Medicine continues to have oversight of the policy for Navy EDIS programs. To comply with reference (a), and to align with Joint Services monitoring practices, monitoring responsibilities for Navy EDIS programs will transfer from the MED IG to the BUMED EDIS program manager.

2. <u>Action</u>. Remove page 3 of the basic instruction and replace with enclosure (1) of this change transmittal.

3. Records Management

a. Records created as a result of this notice, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records Management Division portal page at <u>https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx</u>.

BUMEDINST 1755.1A CH-1 11 Jan 2023

b. For questions concerning the management of records related to this instruction or the records disposition schedules, please contact the local records manager or the Department of the Navy Directorate for Administration, Logistics, and Operations, Directives, and Records Management Division program office.

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Releasability and distribution:

This change transmittal is cleared for public release and is available electronically only via the Navy Medicine Web site, <u>https://www.med.navy.mil/Directives/</u>

BUMEDINST 1755.1A CH-1 11 Jan 2023

(a) The primary service provider model is designed to build a partnership between families and EIS providers by appointing a single, consistent provider to understand and remain well-informed of the family's needs, strengths, varying changes, and interests. This relationship between a primary provider and the caregiver facilitates better communication of child and family outcomes.

(b) The primary service provider must not work in isolation, and must maintain close communication, consultation, and monitoring from additional team members deemed necessary to support the primary service provider in addressing the needs of the family per the IFSP.

(3) Related services (formerly medically related services) provided by EDIS to schoolaged children, under the development or implementation of an individualized education plan (IEP), are necessary for the student to benefit from special education. Those services may include transportation, medical services for diagnostic and evaluative purposes, social work, community health nursing, diet, occupational therapy, physical therapy, audiology, ophthalmology, and psychological testing and therapy. Entitlement is based on eligibility to enroll in DoDEA overseas and meeting DoDEA special education eligibility. Therapy services beyond the scope of early intervention or special education are medical in nature. Such therapies are provided in the MTFs and must be excluded from the IFSP and IEP. Reference (a) provides guidance and outlines established procedures for related services by the military Medical Departments to students with disabilities in DoDEA.

5. <u>Responsibilities</u>

a. <u>BUMED Director Maritime Operations Center must:</u>

(1) Appoint a BUMED EDIS program manager who ensures program managers execute all the functions inherit for administering the EDIS Program.

(2) Develop and release policy, standardized procedures, and official guidance for providing, documenting, evaluating, and administering the EDIS Program within Navy Medicine.

b. <u>BUMED EDIS Program Manager must</u>:

(1) Coordinate with NAVMED regions on EDIS Program resourcing issues to fulfill established policies, procedures, and guidance.

(2) Establish reporting and monitoring standards to ensure each EDIS location is compliant with references (a) and (b), and this instruction. Outline performance benchmarks, targets, and corrective actions for identified issue areas. BUMED EDIS Program Manager will ensure site monitoring is completed at least once every 3 years per reference (a) and MED IG guidance. Collaborate with regional commanders to support on-site risk evaluation and mitigation to address any critical program gaps or issues.