

Referral Notice to Coordinators

BACKGROUND

Early On[®] Michigan and the Individuals with Disabilities Education Act of 2004 (IDEA) require that certain components occur once a referral is made.

REQUIREMENTS

Once a primary referral source has identified a concern with the development of a child, they must make a referral to *Early On*. The timeline begins once the designated agency, which is an agency that is designated to receive referrals (typically the intermediate school district) has received the referral, via fax, phone, mail or email. The following activities and timelines (from the receipt of the referral) must be accomplished and met:

1. a service coordinator must be appointed as soon as possible;
 2. notice to the family of the referral and request for permission to evaluate the child must be made within 10 calendar days;
 3. a complete evaluation and assessment must be conducted within 45 calendar days, and
 4. an initial IFSP meeting must be held within 45 calendar days.
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REFERENCES

The requirements delineated in this bulletin are referenced and supported in the following federal and state statutes, regulations, rules, and policies:

1. Public Law 108-446 Individuals with Disabilities Education Improvement Act 2004, Part C
 2. Part C regulations 34 CFR 303.321
 3. Michigan State Plan, Part Three, Section V
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DEFINITIONS

Referral is defined as the process by which the local Part C agency is notified of a suspected developmental delay or established condition for an infant or toddler, birth to age three. This notification of a suspected developmental delay or established condition begins the

DISCUSSION

Anyone can make a referral for an *Early On* evaluation if it is suspected that the child is developmentally delayed or has an established condition. Primary referral sources can include hospitals, physicians, parents, child care providers, local education agencies, public health facilities, other social service providers and other medical providers.

Service Area Unable to Contact the Family

In some instances it is difficult for the local lead agency to make contact with the family in order to get consent for an evaluation and assessment. If the local lead agency is unable to contact the family after three attempts, then a letter needs to be sent to the family and the referral source indicating that the referral is being closed. The letter must state that the local lead agency has been unable to contact the family. The letter shall explain what potential services the child may be eligible for and contact information so that the family may contact the local lead agency if they change their minds. If contact is re-established by the family or referral source, it would result in a new referral date.

Service Area Contacts the Family, but Consent Not Obtained

If the local lead agency contacts the family, but the family refuses consent for the evaluation and assessment, then the local lead agency shall send a letter to the family. The letter shall explain what potential services the family is refusing and contact information so that the family may contact the local lead agency if they change their minds. The local lead agency should include a contact date in the letter that they send to the family.

Consent Received, but Family Does Not Show for the Evaluation and Assessment

If a local lead agency has contacted the family and the family has consented to the evaluation and assessment, but the family does not show up for the evaluation and assessment, the local lead agency must try and reschedule the appointment. The local lead agency must make three attempts to reschedule with the family. If the family fails to respond, then the local lead agency must send a letter to the family. The letter must explain the

situation and request the family to contact the agency to resume the referral. The local lead agency would consider the date the family responds to the letter or contacts the local lead agency as a new referral date.

It is important that the local lead agency maintain documentation of all contacts with families of infants and toddlers potentially eligible for Part C services.