

Referral Recommendation

Jackson County - Early Intervention/Early Childhood Special Education (EI/ECSE)

Date _____

Child's Name _____

Center _____

Specialist/Teacher/Family Advocate _____

Dear Parent,

All children enrolled in Early Head Start/Head Start are screened with the Ages & Stages Questionnaires (ASQ-3 and ASQ-SE). Your child's Early Head Start Specialist/Head Start Teacher has had the opportunity to screen your child and based on the results a referral is recommended to EI/ECSE for further evaluation in the following area(s):

- _____ Speech (e.g. difficult to understand)
- _____ Language (e.g. not using as many words as expected, not understanding directions)
- _____ Fine Motor (e.g. pre-writing/cutting skills)
- _____ Gross Motor (e.g. running, jumping, balance)
- _____ Personal/Social/Emotional Skills
- _____ Adaptive (self-help skills such as feeding, toileting, dressing)
- _____ Cognitive (academic reasoning, knowledge of basic concepts, problem-solving, attention/memory)

EI/ECSE program provides informational, emotional and educational support for children and families of young children with developmental delays or disabilities from birth to age 5. Each child has his or her own plan for services which is custom-made and based on child/family needs. Services may include community preschool or childcare consultation, therapy (speech/language therapy, occupational therapy, and physical therapy), Autism support, and developmental preschool or home visits.

There is no cost to families for the evaluation or services provided to eligible children by EI/ECSE.

What to expect if you agree with the referral:

1. You will be asked to sign a Release of Information form.
2. You will be contacted by EI/ECSE to schedule an evaluation appointment and to answer any questions or concerns you may have about the process.
3. Following the evaluation, if your child qualifies and is eligible to receive services, you will be invited to a meeting that includes EI/ECSE staff (evaluator, specialist, coordinator) and Early Head Start Specialist/Head Start Teacher to review the evaluation results and to create an initial plan (Individual Family Service Plan - IFSP) that includes individual goals and the specific services that will be provided.

Please be sure to return phone calls promptly and keep your evaluation appointment. If you need to cancel an appointment, please call 541-494-7800 as soon as possible.

If you have any questions or concerns, please don't hesitate to speak with your child's Specialist/Teacher/Family Advocate or contact Southern Oregon Head Start Disabilities/Mental Health Manager, Jodi Drosch at 541-734-5150 - ext. 1005.

