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Review Date: May of 2025	Subject: Referral and Intake
No.: NDEIS-2014-03	Responsible Party: Part C Coordinator

Referral and Intake

Purpose: To ensure timely referral of children into the North Dakota Early Intervention System (ND EIS).

Authority:

Federal Regulation	State Policy
<p>§303.34(a) General. (1) As used in this part, service coordination services mean services provided by a service coordinator to assist and enable an infant or toddler with a disability and the child's family to receive the services and rights, including procedural safeguards, required under this part.</p> <p>(2) Each infant and toddler with a disability and the child's family must be provided with one service coordinator who is responsible for -</p> <p>(i) Coordinating all services required under this part across agency lines; and</p> <p>(ii.) Serving as the single point of contact for carrying out the activities described in paragraphs (a)(3) and (b) of this section.</p>	<p>7.31 Service Coordination Services</p> <p>(a) General. As used in Part C of IDEA, service coordination services mean services provided by a service coordinator to assist and enable an infant or toddler with a disability and the child's family to receive the services and rights, including procedural safeguards, required under Part C of IDEA.</p> <p>(b) Each infant or toddler with a disability and the child's family must be provided with one service coordinator who is responsible for:</p> <ol style="list-style-type: none"> (1) Coordinating all services required under)Part C of IDEA across agency lines; and (2) Serving as the single point of contact for carrying out the activities described in this section. (3) Service coordination is an active, ongoing process that involves: <ol style="list-style-type: none"> (i) Assisting parents of infants and toddlers with disabilities in gaining access to, and coordinating the provision of, the early intervention services required under Part C of IDEA; and (ii) Coordinating the other services identified in the IFSP that are needed by, or are being provided to, the infant or toddler with a disability and that

<p>§303.303 (a)(2) The procedures required in paragraph (a)(1) of this section must –</p> <p>(i) Provide for referring the child as soon as possible, but in no case more than seven days, after the child has been identified.</p> <p>§303.310(a) Except as provided in paragraph (b) of this section, any screening under §303.320 (if the State has adopted a policy and elects, and the parent consent, to conduct a screening of child); the initial evaluation and the initial assessments of the child and family under §303.321; and the initial IFSP meeting under §303.342 must be completed within 45 days from the date the lead agency or EIS provider receives the referral of the child.</p>	<p>child's family. (Section II State Policies, Procedures, Methods and Descriptions-7.31 Service Coordination)</p> <p>10.4. Referral Procedures</p> <p>(a) General. (2) The procedures required in (a)(1) above: (i) Provide for referring a child as soon as possible, but in no case more than seven days, after the child has been identified;</p> <p>(Section II State Policies, Procedures, Methods and Descriptions-10.4 Referral Procedures)</p> <p>10.5 Post-Referral Timeline</p> <p>(a) Except as provided in (b) below, the initial evaluation and the initial assessments of the child and family under §303.321; and the initial IFSP meeting under §303.342 must be completed within 45 days from the date the NDEIS receives the referral of the child.</p> <p>(Section II State Policies, Procedures, Methods and Descriptions-10.5 Post-Referral Timelines)</p>
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Procedures: The following procedures shall be followed and activities documented in the administrative notes of the electronic record:

1. North Dakota is composed of eight Human Service Center regions, which include multiple counties, serving as the single point of entry for its defined catchment area.
2. Any child under the age of three who is suspected of having a delay or who has a medical condition that could result in a developmental delay or disability is eligible for referral.
3. Anyone can make a referral for services. Physicians, parents and/or family members, social workers, and others with whom the child and family have contact may make referrals by contacting the single point of entry for the Early Intervention program in the region in which the child resides.
4. Participation in the ND Early Intervention System is voluntary for parents.

5. Parental consent is not required for referral under the Individuals with Education Disabilities Act (IDEA). A child suspected of being eligible for ND EIS must be referred as soon as possible and in no case more than seven calendar days, after the child has been identified. Recommended practice is that parents be informed and involved in the referral process.
6. A child is considered “referred” to the ND Early Intervention System when:
 - a. The parent contacts the single point of entry (regional human service center) and requests consideration of eligibility for early intervention services for their child and family; or
 - b. A child is identified by a primary referral source who contacts the single point of entry.
7. The date the referral is received at the single point of entry, Regional Developmental Disabilities Unit, is considered the referral date to be entered into the electronic record. This is the date that the referral source receives the referral via any method (i.e., voicemail, email, letter, facsimile, etc.). When a referral source contacts an entity other than the single point of entry, the entity (i.e., ND EI provider) must forward the referral to the corresponding Regional Developmental Disabilities Unit the same business day it is received. The entity will also inform the referral source that subsequent referrals should be made directly to the Regional Developmental Disabilities Unit.
8. Upon receipt of the referral, information is immediately entered into the electronic record and a DD Program Manager is assigned to serve as the Service Coordinator for the child and family.
9. The Service Coordinator (DD Program Manager) shall contact the family within **2 business days** of referral to schedule an intake visit. The intake visit should occur within the first week of referral. The intake visit should occur at a time and place convenient to the family. The service coordinator shall document the extenuating circumstances if the intake meeting cannot be held in person.
10. At the intake visit, the Service Coordinator (DD Program Manager) discusses:
 - a. The reason for referral;
 - b. An overview of the ND EI System including the role of the service coordinator;
 - c. Parental decision regarding eligibility determination:
 - i. If parent decides not to pursue eligibility determination, the service coordinator documents this decision in the administrative notes of the electronic record and informs the parent they can contact the service coordinator at any time if they have questions or wish to pursue a referral
 - ii. If parent pursues eligibility determination:

1. the application for the Human Service Center is discussed and signed; and
 2. the ND EI Parent Rights are discussed and provided.
 - d. The process for gathering information from sources outside of ND Early Intervention Program (ND EI Program) and obtaining consent for the parental release of information. Copies are distributed as directed on the form;
 - e. The evaluation/eligibility process including the steps and timelines for evaluation/assessment and eligibility including criteria for high risk eligibility, if applicable;
 - f. The importance of obtaining written parental consent to provide information to the referral source (i.e. physicians, clinics, Right Track) informing them of the child's eligibility status and sending them a copy of the evaluation and assessment results. With parental consent, the information shall be transmitted within two weeks of eligibility determination. The service coordinator shall document in the administrative notes of the electronic record if the parent declines to consent to this release of records.
 - g. The following and provides the family a copy of each of the following documents:
 - i. DD Bill of Rights;
 - ii. ND Department of Health and Human Services (ND DHHS) DD Home and Community Based Waivers Rights and Responsibilities;
 - iii. Grievance policy for Human service center;
 - iv. Facts for Families; and
 - v. Other documents or resources the region feels are important for families.
11. If there is more than one ND Early Intervention Provider (ND EI Provider) in the region, at the intake, the parent must be informed about the available providers and provided information about them in an unbiased and objective way. The parents are asked to make a decision about their choice of provider and given time to make the decision.
- a. The service coordinator (DD Program Manager) shall contact the parent about their decision within 2 business days of the intake and if the family needs more time to make an informed decision; this is documented in the administrative notes of the electronic record.
12. At the intake, the service coordinator uses the Family Intake Interview to facilitate a conversation with the family to discover their needs and history. Once completed, the original is put in the Regional Human Service Center file and a copy is given to the ND EI Provider.

13. In those instances, where an infant or toddler is hospitalized at the time of referral and intake, it is the recommended practice to conduct the intake with a regional experienced parent or the state family liaison.
14. Within 7 business days of the receipt of the referral, unless there are documented exceptional family circumstances, the referral and all intake information should be forwarded to the assigned ND EI Provider to initiate the evaluation process. If timeline is not met, reasons must be documented in the administrative notes of the electronic record. Refer to the Family or Agency reason procedure.
15. Documentation is required throughout the intake process. The following information must be included in the administrative notes of the electronic record:
 - a. Attempts to schedule
 - b. Contacts with parents
 - c. Parent decision regarding ND EI Provider
 - d. If delayed, reasoning for delay
 - e. Date intake information forwarded to ND EI Provider
 - f. Intake note, which includes:
 - i. Date of visit;
 - ii. Information reviewed with parents;
 - iii. Decisions made;
 - iv. Significant information;
 - v. Plans of action; and
 - vi. Expectation of next contact.