Early Support for Infants and Toddlers

 **<Providing agency name>**

Eligibility Status and Services Update

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| **Child:**       | **DOB:**       |

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| **Referral Follow-Up:**Thank you for your referral for Early Intervention Services. <Name of person who referred the child> referred this child on <date>Date of our initial contact with the family: <date>[ ] Eligible for Early Intervention Services (see attached eligibility information for more details)[ ] Not eligible for Early Intervention Services[ ] Eligibility not yet determined [ ] Family has declined further services |

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| --- | --- |
| **Enrollment Status:** [ ] Enrolled in services | Date evaluated:      [ ] Not enrolled in services |

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| **Current Services:**Please see the attached information regarding this child’s eligibility and Early Intervention Services.Other comments:      If you would like more information, please contact the Family Resources Coordinator listed below:**<Providing agency name> FRC:**      **Phone number:**       **Fax number:**      **Email:**       |

Eligibility Status and Progress Update Form Instructions

This form is meant to be used to follow up on referrals and/or report eligibility status and progress updates for primary care providers (PCPs) or other service providers working with the child and family. It is important to have good communication with these partners in order to coordinate services and gain valuable input from other professionals. This can be used as a summary form when sending IFSP or other documentation to inform on a child’s services and/or progress. ESIT’s medical home practice guide states that the FRC must inform the child’s PCP regarding enrollment status and the IFSP services as well as progress updates as needed.

*Parent permission is always required before sharing the child’s and family’s information.*

Please use this form in a way that best fits your current practice for communicating with PCPs and other providers, it is meant to be an example or template. The following are suggestions for individualizing this form to meet your needs:

* It has been designed to be fillable but can also be printed for to hand write the information
* Copy and paste the content onto your agency’s letterhead
* Use the whole form or delete sections that will not apply to your process (for example; if you already have a mechanism for following up on referrals simply delete that box from the form)
* The “current services” section can be used to inform on initial services and outcomes or to share progress as needed after IFSP and evaluation updates