



**COUNTY OF SAN BERNARDINO
PRESCHOOL SERVICES DEPARTMENT
POLICY**

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Updated

SUBJECT:

Referral Procedure

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PURPOSE

To identify the health needs of children and families, initiate referrals, track referral status, and work collaboratively with community based service providers to ensure delivery of needed services.

To ensure that, through collaboration among families, staff, and health professionals that all children's health and developmental concerns are identified. To ensure children and families are linked to an ongoing source of continuous, accessible care to meet their basic health and wellness needs.

POLICY

Generalists, Home Visitors, and site staff at Preschool Services Department (PSD) will submit "referrals" for any resource support, health, and developmental concerns identified for children and families during the intake process and after enrollment.

REFERENCE

Head Start Performance Standards 1304.40(b)(1)(i) – 1304.40(b)(1)(iii)
Head Start Performance Standards 1304.40(b)(2)
Head Start Performance Standard 1305.2
Head Start Performance Standard 1308.4
Head Start Performance Standard 1308.6

PROCEDURE

1. Generalists, Home Visitors, and site staff will generate a referral in the COPA database for child and family needs identified on the following documents:

- Child's physical
- Child's Medical History Profile (front and back)
- Family Services Assessment
- Family Partnership Agreements
- Nutrition questionnaire
- Parent interest survey
- ASQ
- ASQ-SE

- Health Screenings
 - Speech Screenings
 - Classroom Observations
 - Verbal discussions with parents
 - Parent Interview Form for Suspected Disabilities
 - Food Allergy Statement
 - Religious/Ethnic/Cultural Related Food Restriction Form
 - Communication Profile
 - IEP
 - IFSP
 - Categorical Diagnosis
 - Asthma Questionnaire
2. Referral "needs" may be identified through the use of the previous listed documents completed prior to/during enrollment or by staff observation and family contacts.
3. Generalists, Home Visitors, and site staff will generate a referral in the COPA database within 72 hours after a need is identified. The appropriate staff member should submit a referral in COPA
4. Within 72 hours of identifying a need; referrals for a broad range of services will require specific "memorandum" documents to be forwarded to content area experts. Documents submitted to content area experts may include but is not limited to the following:
- PSD C-1 Release of Information Form
 - Parent Interview Form for Suspected Disabilities
 - ASQ
 - ASQ-SE
 - Parent Consent form
 - Food Allergy Statement
 - Religious/Ethnic/Cultural Related Food Restriction Form
 - Communication Profile
 - IEP
 - IFSP
 - Categorical Diagnosis
 - C-1 copy of Authorization for Release of Information
 - A copy of Professional List
 - Asthma Questionnaire
 - Medical History Profile (front and back)
5. Upon receipt of the referral in the COPA database, the appropriate "content expert" will review the identified needs on the referral.
6. All social-emotional related referrals will require collaboration among Education Specialist and Mental Health Specialists.

7. Content Area Experts will create a file which contains all referral and memorandum supporting documentation submitted by Generalists, Home Visitors, and site staff.
8. Content Area Experts will secure the completed file in a locking file cabinet.
9. Content area experts are responsible for ensuring recommendations, anecdotal notes, staff observations, and other updated information is entered in the "case notes" section on the referral in the COPA database for all referrals received. Updated information is entered into COPA on a weekly basis when applicable or at specific and regular intervals.
10. In cases when service recommendations from content area experts are not found in the COPA database within ten working days after a referral by Generalists, Home Visitors, and/or site staff has been processed; the appropriate Content Area Expert should be contacted via email or phone.
11. Referrals requiring a written service delivery plan are developed by a team which includes the Content Specialist, teaching staff, Generalists, parent(s), primary caregiver(s), and other paraprofessionals.
12. Based on the extent/severity of the need; content area experts will collaborate with teaching staff, generalist, home visitors, parent(s), and primary caregiver(s) to develop a service delivery plan. Content area experts will present such plans to the Interdisciplinary Team for discussion and service delivery recommendations.
13. Copies of the service plan will be placed in the child's folder on site.
14. Referrals which do not require the participation of the Inter-Disciplinary Team are moved forward. The service plans are implemented and monitored (including follow-up) in the COPA database.
15. The Site Supervisor will report monthly follow-up (if any) at the Site's Monthly Service Delivery Team Meeting.

Interdisciplinary Team Process:

1. The Inter-Disciplinary Team will meet weekly to discuss children who have more significant needs or disabilities.
2. Service delivery recommendations are entered into the COPA database during the Interdisciplinary Team Meetings.
3. The Inter-Disciplinary Team will assign interns to children with significant Social-Emotional needs.
4. The Intern will "MENTOR" the teacher and provide families with ongoing direct services via community agencies.

5. The Interns will continue to "MENTOR" teaching staff using the concepts of Incredible Years.
6. The appropriate content area expert will provide diagnostic information.
7. Individualized Education Plan (IEP) or Individualized Family Service Plan (IFSP) goals will be identified, and support services implemented.
8. If the child being referred does not meet the Head Start criteria for a disability (as outlined in the Head Start Performance Standards); then a "child service plan" will be developed between the content area expert, teaching staff, and parent(s).
9. Service plans will be documented and placed in the child's folder on site. Otherwise the service delivery plan for the child will reflect the goals written on the IEP or IFSP.

Delineations for referrals according to content area:

Disabilities:

1. What constitutes a Head Start referral for Disabilities?

- When teacher observation reveal a suspected disability
- When Screen indicate a suspected disability
- When child history profile indicate a suspected disability
- When Desired Results indicate a suspected disability
- All of the above

2. What constitutes an Early Head Start referral for Disabilities?

- When Health History indicate a need for a referral
- When ASQ 3 indicate a need for a referral
- When ASQSE indicate a need for a referral
- When parent indicate a need for a referral

A referral for disabilities should be done 45 days after enrollment in the COPA database. The content area experts for disabilities will need to receive the following supporting documents within 72 hours of the referral being initiated in the COPA database:

Head Start:

- Copy of the screening
- Release of information
- Permission to refer
- Parent Questionnaire

Early Head Start:

- Copy of screen
- Release of information
- Permission to refer
- Communications Concerns

3. The following source documents can be used for identifying suspected disabilities:

- Teacher classroom observations reveal a suspected disability
- Screenings that indicate a suspected disability
- Child history profile
- Desired Results Developmental Profile 2010

4. A 911 referral for disabilities is completed when the child may be in danger if he/she is in the program.

Mental Health:

1. What constitutes a Head Start referral for Mental Health?

- When teacher observation reveal a concern in the child's behavior.
- When the screenings (i.e. ASQ-3 or ASQse) indicate a suspected social or emotional concern.
- When child history profile indicate a suspected disability.

2. What constitutes an Early Head Start referral for Mental Health?

- When Health History indicate a concern from parents or staff.
- When ASQ 3 indicate a need for a referral
- When ASQSE indicate a need for a referral
- When parent reports a concern with the child's behavior.

A referral should be initiated for mental health referrals in the COPA database within 24 hours after identifying a concern. The content area experts for mental health will need to receive the following supporting documents within 72 hours of the referral being initiated in the COPA database:

Head Start:

- Copy of the screening
- Release of information
- Permission to refer
- Medical History Profile
- Any other supporting documents.

Early Head Start:

- Copy of screen
- Release of information
- Permission to refer
- Medical History Profile
- Any other supporting documents which substantiates concerns identified by staff or parents.

3. The following source documents can be used for identifying Mental Health concerns:

- Teacher classroom observations reveal a suspected disability
- Screenings that indicate a suspected disability
- Child history profile
- Communication Profile
- ASQse
- ASQ-3
- Acuscreen
- Psychological assessment - (ADHD)
- Desired Results Developmental Profile 2010

4. A 911 referral for Mental Health is completed when the child is in danger of self or others (i.e., out of control behavior) when he or she is in the program setting.

Health:

1. What constitutes a Head Start/EHS health referral?

A health referral should be generated for an infant/toddler/child when the health, ability to learn, and/or activities for daily living of the infant/toddler/child are negatively impacted.

When a parent states a health concern on the MHP/Early Health History Form

- Asthma
- Seizures of any kind
- Anaphylactic shock
- Bee Allergies
- Diabetes
- Immune System Disease
- Sickle Cell Disease
- High Lead
- Cancer
- Heart Conditions
- Any health related concern that impedes the child's participation in daily activities of living and/or ability to learn.

2. Supporting documents that are needed for a health referral:

- Release of information with the doctor's complete address and phone number
- Specialist information
- Copy of the physical
- Disability Questionnaire
- Any specialist reports
- Early Health History Form for EHS

3. The following source documents can be used for identifying Health concerns:

- Medical History Profile
- Physical
- Emergency Card (if any health information is noted)
- Reports from Content Area Experts
- Early Health History

4. What constitutes a 911 referral for Health:

- Broken bones
- Unknown allergic reaction to bee sting
- Uncontrolled Bleeding
- Illness that a child did not have when first enrolled.
- When a child may be in danger if he/she is in the program

Nutrition:

1. What constitutes a Head Start referral for Nutrition?

For (children 2 years and older)

- Growth concerns: overweight/ underweight/ any weight changes such as a drop in percentiles for a 1-6 months period even if the child is within normal range e.g. a drop from 75% to 25% percentile.
- Low Hgb/Hct at 10.9 and below
- Food allergies/ chronic diseases/ religious food preference
- Constipation/ diarrhea

For (children 0 – 23 months)

- Growth concerns: overweight/ underweight/ any weight changes such as a drop in percentiles for a 1-6 months period even if the child is within normal range e.g. a drop from 75% to 25% percentile or a drop in Head circumference percentiles.
- Low Hgb/Hct at 10.9 and below
- Food allergies/ chronic diseases/ religious food preference
- Constipation/ diarrhea
- Feeding infants sugary drinks/ cereals from a bottle, sleeping w/a bottle.

2. Documents that are needed for a Nutrition referral

➤ For Food Allergies and Chronic diseases for HS/ EHS: (Emergency Referrals)

- Medical statement signed by MD
- Parent interview for food allergy questionnaire completed
- Medical release of information
- Nutrition Survey / Physical

➤ For Religious/ Cultural food preference for HS/ EHS: (Emergency Referrals)

- Religious / Cultural food preference form completed and signed by parent
- Nutrition survey

3. The following source documents can be used for identifying Nutritional concerns:

- Physical
- Medical History Profile
- Allergy statement from doctor
- Parent Concerns
- Early Health History
- Staff observations

4. What constitutes a 911 referral for Nutrition?

- Food Allergies and Chronic Diseases
- Religious / Cultural food preferences

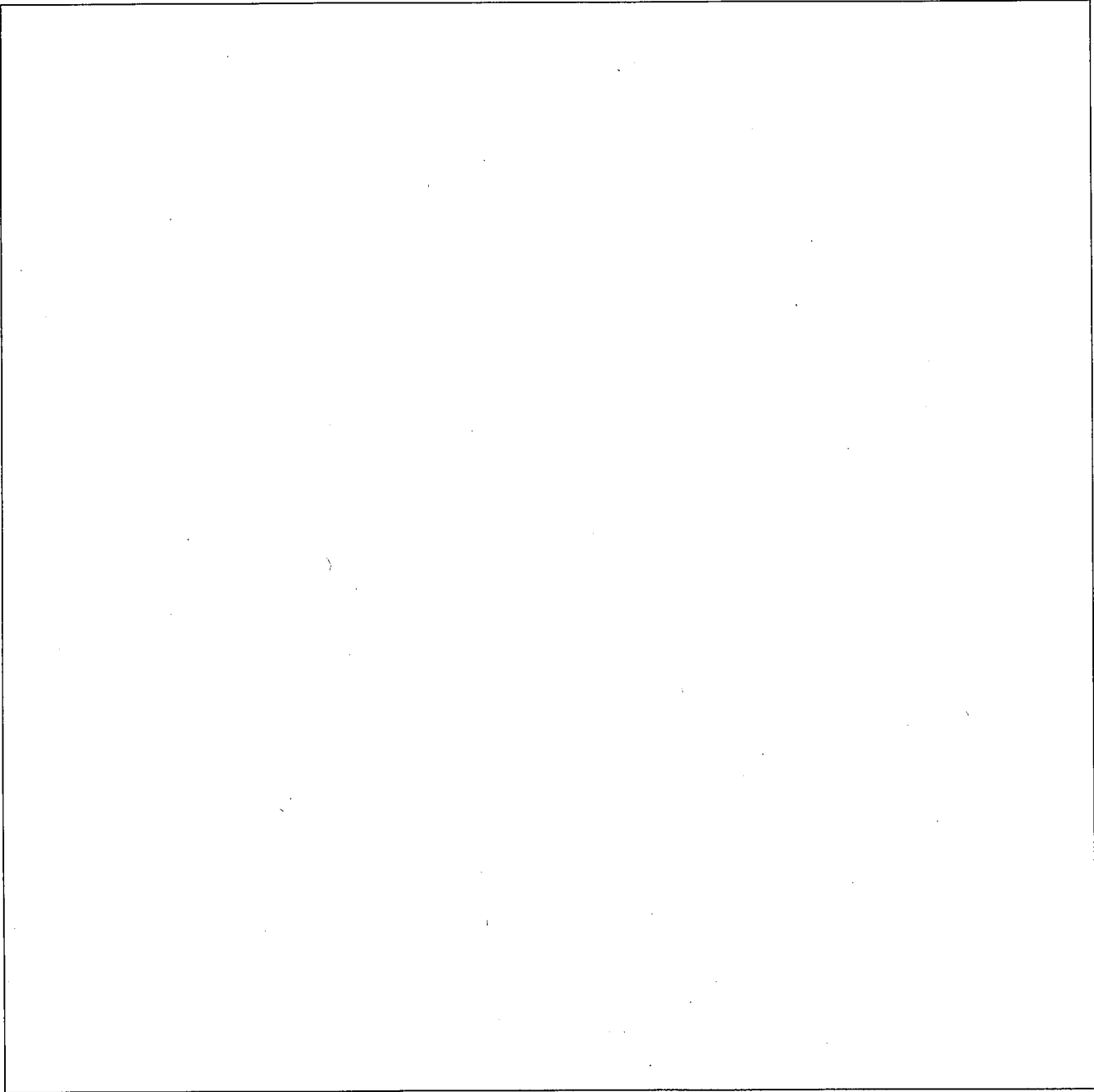
Registered Dietician will fax diet instructions to site, and document in COPA case note referral section. Registered Dietician will conduct pre-enrollment meetings with the site staff and parent(s) as needed.

Service Delivery Team Meetings

The focus of the Service Delivery Team Meeting is to ensure all appropriate staff members and caregivers are aware of the child's service needs in the classroom setting. Additionally, all appropriate staff members will use the Service Delivery Team Meeting forum to confirm the effectiveness of the services identified in the service delivery plan, refine approaches to service delivery as needed, and maintain an "informed team" approach to supporting each child and family.

Participants should include all staff involved with providing the specific services identified in this service delivery plan. The core team members will include appropriate teaching staff, appropriate support staff, and parents and/or primary caregivers when possible.

1. Implementation and follow-up of "classroom service delivery plans" will be monitored at the Site level via the " Monthly Service Delivery Team Meetings"
2. All children being referred for identified needs will have a classroom service delivery plan (developed by the appropriate content area expert) and be updated each month at the Monthly Service Delivery Team Meetings.
3. Site supervisor will facilitate each Monthly Service Delivery Team Meeting and invite appropriate support staff to ascertain the effectiveness of services identified in the service delivery plan.
4. Site Supervisors will generate the "Overall Referral Tracking Report (459)" from the COPA database. The Overall Referral Tracking report will be used to identify and discuss child referrals and service plans at the Service Delivery Team Meeting.
5. Generalist will generate the "Family Referral Report (1008)" from the COPA database. The Family Referral Report will be used to identify and discuss family referrals and follow-up at the Service Delivery Team Meeting.
6. Site Supervisors will collaborate with Program Supervisors, Generalists, Content Area Experts, and parents to develop and implement support strategies for children in the classroom relative to active child referrals at the site.
7. Program Supervisors will collaborate with Site Supervisors, Generalists, Content Area Experts, and parents to develop and implement support strategies for families who have active family referrals at the site.



Referral Process Flow Chart

