



## 5.2 Referral for Special Education Assessment (2.10 - 5 years) Instruction Sheet



### **PURPOSE STATEMENT:**

The Referral for Special Education form (the Referral) is used to initiate the referral process when the teacher and parent/guardian believe further consultation or evaluation may be needed for the Early Head Start/Head Start (EHS/HS) child based on evidence (parent report, teacher observation, Ages and Stages Questionnaire (ASQ-3), doctor report, etc.). The Referral for Special Education form documents parent/guardian and teacher concerns related to the child's speech and/or language development, behavior, or overall development, parent/guardian consent for referral to the school district, and that the parent/guardian's rights and responsibilities were reviewed.

### **TIMELINE:**

The Referral is to be initiated and sent to the school district of residence no sooner than 30 days after the child's first date of attendance into the program so that the child can adjust to the EHS/HS classroom setting and proper observation can be completed by EHS/HS staff.

### **STAFF RESPONSIBLE:**

EHS/HS Home Visitor, EHS/HS Teacher, EHS/HS Associate Teacher, Site/Home Based Supervisor/ Assistant Site Supervisor, Home-Based Supervisor, ECE/Disabilities Specialist

### **INSTRUCTIONS:**

EHS/HS staff meets with the parent/guardian to initiate the referral, which includes discussing concerns and explaining the referral process as follow:

- **For Center Based-** Teacher completes the Speech Language/Teacher Checklist in coloration with parent/guardian and notify their ECE/Disabilities Specialist. This involves the ECE/Disabilities Specialist meeting with the EHS/HS teacher and observing and/or interacting with the child for recommended next steps.
- **Children 2.10 and older enrolled in EHS-** Submit a Service Request to ECE/Disabilities Specialist for support in the referral process. In the Site/Program Option box, check the box indicating that the referral is for an EHS child. Fax referrals for EHS children directly to Special Education office. No Preschool Speech/Language Teacher Checklist is required, only attach supporting docs (i.e. ASQ results, observations, medical provider documentation, etc.).



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### **Top Section: Family and Site Information**

- Complete the first box with all of the requested information: child's information, parent/guardian's contact information, the site's contact information, and include dates and results of the most recent hearing and vision screenings for the child.

### **Middle Section: Areas of Concern**

- Mark the appropriate boxes and document the parent/guardian's concerns about their child's speech, behavior, and/or overall development. Document the Teacher/Home Visitor concerns as well.
- Indicate school district name, contact phone number and date referral was provided. See School District names and contact phone numbers below.
- Provide name, title, and signature of the referring staff and the date the referral was provided/faxed to the school district. This date **MAY NOT** be earlier than parent/guardian consent date.

### **Bottom Section: Authorization and Signatures**

- Review the consent statement with the parent/guardian that explains the referral and intake process. Provide the parent/guardian with the following documents: a copy of the referral, Disabilities Resource List for Parents of Children 3-5 Years Old and the Rights and Responsibilities of Parents of Children with Disabilities.
- Check off that the parent/guardian received these documents.
- Obtain the parent/guardian's signature and date the referral.
- Have the parent sign a completed Authorization to Release Information form for San Diego Unified School District (SDUSD), or other district if child does not reside in SDUSD boundaries.
- The Site Supervisor will review the referral for accuracy, fax the form and supporting documents (i.e. ASQ results, observations, medical provider documentation) to the Special Education office of the school district of residence. Then, enter the referral in PROMIS, and document the referral on the designated tracking log.
- File the completed form in the Child File, Section 5: Disabilities.
- Enter a Referral under Area of Concern. See PROMIS Record Keeping SOPS - Disabilities: How to Enter an Area of Concern. Then How to Enter an External Referral for an Area of Concern.



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### **Home-Based:**

- The Home Visitor is responsible for completing the form with the family and then submitting the referral to their supervisor.
- The Home-Based Supervisor will review the referral for accuracy, fax the form and supporting documents (i.e. ASQ results, observations, medical provider documentation) to the Special Education office of the school district of residence. Then, enter the referral in PROMIS, and document the referral on the designated tracking log.
- The Home Visitor, Supervisor, and assigned program support staff are responsible for follow-up on the status of the referral.

Refer to SOP DIS-Referral For Special Education Assessment for details.

### **LEA (Local Education Agencies) children 3-5 years:**

- SDUSD Special Education District Office: phone (619-725-7650) FAX (619-725-7246) and Special Education (SE) Parent Helpline (619) 725-7700
- La Mesa/Spring Valley School District (619) 668-5700 x 6208 or 6210
- Chula Vista Elementary School District (619) 425-9600 x1700
- Cajon Valley School District (619) 588-3053 or 3054
- National City School District (619) 336-7743
- Lemon Grove School District (619) 825-5623
- South Bay Union School District (619) 628-1669