Intake Checklist

This checklist has been developed to help you organize and complete all Part C requirements for the intake process. This checklist is intended to be used as a companion tool after you have read the *Infant & Toddler Connection of Virginia Practice Manual.* For complete information about Intake, please refer to the *Infant and Toddler Connection of Virginia Practice Manual, Ch. 4 – Intake.* Please see the textbox at the beginning of *Chapter 4* for a list of topics to discuss with families during Intake.

Steps

- ❑ Provide an overview of early intervention (if not already provided prior to the Intake visit).
- ❑ Explain the role of the Service Coordinator.
- ❑ Explain the role of the Family in early intervention.
- ❑ Explain the state definition of eligibility and how eligibility is determined.
- ❑ Explain and complete the *Notice and Consent to Determine Eligibility Form* with the family.
- ❑ Provide a copy and explanation of the *Notice of Child and Family Rights and Safeguards Including Facts About Family Cost Share.* Explain the parts that are relevant to this step and emphasize confidentiality.
- ❑ Provide a copy of *Strengthening Partnerships: A Guide to Family Rights and Safeguards in the Infant and Toddler Connection of Virginia Part C Early Intervention System*.
- ❑ Explain and complete the *Notice and Consent for Assessment for Service Planning* form with the family (if appropriate at the point of intake)
- ❑ Determine whether eligibility can be established by medical or other records and complete Eligibility Determination Form if records establish eligibility.
- ❑ Complete developmental screening tool, unless eligibility is established by records.
- ❑ Complete the *Virginia Part C Hearing Screening and Virginia Part C Vision Screening*, unless the child is clearly eligible and this will be completed at assessment for service planning.
- ❑ Explain how early intervention services are provided in a child and family's natural environment with a focus on naturally occurring routines and activities in a family's day as the optimal places for intervention to occur.
- ❑ Ask the family to share information about their child and family and their activities that will be used in eligibility determination. Questions you might ask include:
    - How do you and your child spend a typical day?
    - Who does your child spend time with during the day?
    - What parts of your day go well? What parts of the day are challenging for you and/or your child?
    - Are there activities that you would like to do with your child that you are not currently doing? Why?
    - What are your child's favorite things to do?
    - What would you like for your child to be able to do?
    - How can we help your child and your family?
- ❑ Ask the family about the child's medical history (including any diagnoses).

- ❑ Obtain releases of information for pediatrician/primary care provider and any other relevant specialists.
- ❑ Ask the federally-required 2-part question:
  - Is your child Hispanic/Latino?
  - From which of the following racial groups is your child: American Indian or Alaska Native; Asian; Black or African American; Native Hawaiian or Other Pacific Islander; or White?
- ❑ Share general information about the cost of services.
- ❑ Complete the *Family Cost Share Agreement* if the child has Medicaid/FAMIS.
- ❑ Explain the Initial Early Intervention Service Coordination Plan and obtain parent signature. (Required for children with Medicaid or FAMIS; optional for others and recommended if there is a possibility that the child may receive Medicaid or FAMIS coverage).
- ❑ Provide the family with referrals and information regarding other community resources if the family is interested.
- ❑ After the Intake appointment:
  - Obtain any screening, medical, or other records with releases of information.
  - Document information obtained at intake.
  - Assist the family in completion of a Medicaid/FAMIS application or applications for other programs and supports, as needed and desired by the family.
  - Enter information into ITOTS.

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