

## EI and ECSE EVALUATION BILLING AND EVALUATION REPORT WRITING: July 2014

This document includes information about the revised evaluation billing process and offers instructions for completing evaluation reports using forms on ecWeb. There are significant changes to the billing process and specific information is required in the evaluation reports, so please read all sections carefully.

### EVALUATION BILLING: Revised March 2014

Three major changes are being made to the evaluation billing process to better reflect our cost to revenue projections and to make the process more efficient. The three changes include a rate change, changes in the types of evaluations, and the method for submitting billings. **Effective date – March 3, 2014.**

#### 1. The rates have been changed.

To better reflect our costs to date, the rates for each evaluation have been lowered.

#### 2. The types of evaluations also have changed slightly, to support more continuity (see chart below). Also, included are definitions of each evaluation type and examples.

Adjusted Types of Evaluations
File Review
Partial Evaluation
Partial Evaluation <b>with</b> Interpreter *
Full Evaluation
Full Evaluation <b>with</b> Interpreter *
Full Evaluation with Consult (school psych)
Full Evaluation with Consult <b>with</b> Interpreter *
ASD Evaluation
ASD Evaluation <b>with</b> Interpreter *

**\*bill with interpreter when interpreter is involved for one hour or more**

- Partial ASD and Partial Psycho-Social Evaluations have been eliminated
- ASD Full has been changed to ASD Evaluation with or without interpreter

### Definitions

#### • File Review

- When existing evaluation data from a previous EI or ECSE evaluation, an evaluation from different State, or an evaluation from another private provider are comprehensive enough for the team to use these data to determine eligibility, this evaluation is billed as a file review.
  - The data to determine eligibility should be no older than 6 months old. Data no older than 9 months old also can be used on a case by case basis, if the team believes the data continues to reflect the child's current developmental levels.

#### • Partial evaluation with or without interpreter

- Only one licensed professional is involved in the evaluation
- Only one area of development is evaluated
  - When more than one area is a concern but previous EI or ECSE evaluation data or records from other private providers can be used to assist in eligibility determination and only one person was involved in the current evaluation, the evaluation should be billed as partial.

- All 0-3 EI Medical Statement evaluations are billed as partial
- Partial evaluations typically result in the following eligibilities:
  - CD and HI and VI eligibilities (\*see note below)
  - DDPS- 0-2
  - Any eligibility when records from other providers are available
- **Full evaluation with or without interpreter**
  - At least two licensed professionals are involved in the evaluation
  - Two or more areas of development are evaluated
  - Full evaluations typically result in the following eligibilities:
    - DD 0-3 and DD 3-5
    - Other categorical eligibilities (OI, OHI)
    - A full evaluation could result in a HI, VI, Deaf blind, or CD eligibility but only if two or more areas of development are evaluated
- **Full evaluation with consult, with or without interpreter**
  - Evaluation team or IFSP team has requested consult from School Psychologist
  - School Psychologist must be involved in evaluation process to determine eligibility
  - At least two licensed professionals are involved in the evaluation
  - Two or more areas of development are evaluated
  - A full evaluation with consult typically would result in an ID, OHI, TBI, or ED eligibility
    - A school psychologist does not always need to be involved in OHI eligibilities but may need to be involved if multiple eligibilities are considered
- **ASD evaluation, with or without interpreter**
  - ASD evaluation is initiated by the evaluation team and then completed by the IFSP team
  - All components of the ASD evaluation could be completed by the evaluation team
  - All components of the ASD evaluation could be completed by the site team

**\* Note: There is no need to bill when a Regional VI, HI, or OI eligibility is completed after the child's initial eligibility**

## Examples

### Initial Evaluations

<ul style="list-style-type: none"> <li>ASD evaluation is initiated by the evaluation team and then completed by the IFSP team</li> </ul>	<ul style="list-style-type: none"> <li>Evaluation team submits billing as <b>ASD Evaluation with or without interpreter</b>. <u>The IFSP team submits no billing.</u></li> </ul>
<ul style="list-style-type: none"> <li>A school psych consult is requested by the evaluation team to consider ID, TBI, OHI (ADD/ADHD), or ED eligibility</li> </ul>	<ul style="list-style-type: none"> <li>Evaluation team submits billing as <b>Full Evaluation with Consult, with or without interpreter</b>. <u>The IFSP team submits no billing.</u></li> </ul>

### EI to ECSE Transition Evaluations

<ul style="list-style-type: none"> <li>ASD evaluation is completed during the transition process</li> </ul>	<ul style="list-style-type: none"> <li>EI service coordinator submits billing as <b>ASD Evaluation with or without interpreter</b></li> </ul>
<ul style="list-style-type: none"> <li>EI service coordinator requests a school psych consult to consider ID or TBI eligibility</li> </ul>	<ul style="list-style-type: none"> <li>EI service coordinator submits billing as a <b>Full evaluation with Consult, with or without interpreter</b></li> </ul>

### Follow-up Evaluations Once Child in Services

<ul style="list-style-type: none"> <li>ECSE IFSP team completes an ASD evaluation (more than 6 months after the initial evaluation)</li> </ul>	<ul style="list-style-type: none"> <li>Service coordinator submits billing as <b>ASD evaluation, with or without interpreter</b> (if less than 6 months from initial evaluation, no billing is submitted).</li> </ul>
<ul style="list-style-type: none"> <li>School psych consult is requested by an IFSP team to consider ID, TBI, OHI (ADD/ADHD), ED eligibility (more than 6 months after the initial evaluation).</li> </ul>	<ul style="list-style-type: none"> <li>Service coordinator submits bill as <b>Full Evaluation with consult with or without interpreter</b> (if less than 6 months from initial evaluation, no billing is submitted).</li> </ul>

### 3. Submitting billing: New form on ecWeb

#### EVALUATION TEAM - Evaluation Billing and Site Notification

- The **same day as the evaluation**, whenever possible, **complete the billing form on ecWeb** (forms, evaluation forms/evaluation billing).
- **Archive the form** and include the date of eval and type of eval in the notes box (3/13/14, ASD, 3/23/14 Full with interpreter, 4/12/14 Full with Consult). If an error has been made in an archived form, please delete the inaccurate version when the new form has been archived.
- **Send email** to [ei-census@nwrwesd.k12.or.us](mailto:ei-census@nwrwesd.k12.or.us), site contact, site coordinator, and nurse, if nursing will be needed (see Eval Team Communications with Site Teams Sept 2013 for site contacts).
  - **Flag as important** (mark as high importance - ! top right)
  - **Subject line** should read - New student and Evaluation billing
  - **Body of email** – child ID #, child initials, date of evaluation, type of evaluation, eligibility determination (category and status – yes, no, pending), and indicate if **evaluation report is complete or indicate the approximate number of working days needed to complete the evaluation report**. Also include any **required follow-up** in caps (e.g., HEARING RE-SCREENING, REGIONAL REFERRAL, ASD EVALUATION INITIATED, POTENTIAL CATEGORICAL ELIGIBILITY, etc.) and **other details important** to the evaluation billing or service provision (e.g., nursing/medical protocol needed).
    - \* email templates can be set up using the signature function in Outlook.
- **Update contact log** with date and type of evaluation completed, eligibility determination/eligibility category, areas of delay, whether IFSP is complete or anticipated days to completion, whether AEPS is complete, and statement that billing was submitted and site contacted.

#### EVALUATIONS COMPLETED AT SITES - Evaluation Billing and Notification

- The **same day as the evaluation**, whenever possible, **complete the billing form on ecWeb** (forms, evaluation forms/evaluation billing).
- **Archive the form** and include date of eval and type of eval in the notes box (3/13/14, ASD, 3/23/14 Full with interpreter, 4/12/14 Full with Consult). If an error has been made in an archived form, please delete the inaccurate version when the new form has been archived.
- Send email to [ei-census@nwrwesd.k12.or.us](mailto:ei-census@nwrwesd.k12.or.us)
  - **Subject line** – Evaluation billing
  - **Body of email** – child ID #, child initials, date of evaluation, type of evaluation, eligibility determination (category and status – yes, no, pending) and any additional information important to the evaluation billing
    - \* email templates can be set up using the signature function in Outlook.
- **Update contact log** – billing sent to ei-census email.

## INSTRUCTIONS FOR COMPLETING EVALUATION REPORTS USING ecWEB REPORT FORMS

Please read these directions carefully. Information that is provided in **bold**, in CAPS and underlined must be included in each report.

There are **three types** of evaluation reports on ecWeb that we are **using at this time**. These reports are similar in some respects but also are quite different, so separate directions are offered for each report. The three types of reports are described below.

- **EI report** – use for all EI evaluations, when completing an EI Medical Statement eligibility, and EI file reviews (see page, 6-9).
- **ECSE report** – use for all ECSE evaluations when child is evaluated in more than one area, when EI and ECSE eligibilities are being considered, and for EI to ECSE transition evaluations (see pages, 10-14 ).
- **ECSE Speech and Language report** – use when speech and/or language are the only areas evaluated (see pages, 14-18).

It also should be noted that changes may occur in these forms without warning, so these instructions may not include information about all sections. Typically, when new sections are added, they are optional, so individual discretion can be used in including the additional information.

### Helpful Hints

- Some basic information will auto populate.
- Information can be **transferred back and forth between the development page and the report**. To transfer information, the ***Transfer from Development*** button (report) or the ***EI or ECSE Eval*** button (IFSP) must be clicked. Placing your cursor on the button will show you the information that could be transferred. There must be information in either the report or the development page for these buttons to appear. The information can be added to (append) or replaced.
- **Check the box** to the left of each heading to view and complete the fields in each section. Before printing, make sure the box is checked for all sections including information (if box is not checked, information will not print).
- AEPS information can be embedded in the report but the scores must be entered into ecWeb (Assessments) to include the percentages.
- Adding a line at the bottom of the suggested goals box in the Skills and Recommendations section can help separate the developmental areas to improve readability of the printed report.

## **EI Report: Report Formatting**

(Information in bold, in CAPS, and underlined must be included)

If AEPS was used in the evaluation, enter scores into ecWeb

### **DATE OF EVALUATION**

### **CHILD INFORMATION**

- **Corrected age** needs to be included, if correcting for prematurity (up to age 2 years).
- **INFORMATION ABOUT THE FAMILY** - in Optional ***Additional Comments*** box, include **information about the family** (child lives with both parents, # of siblings, and other important facts relevant to family). Language and cultural considerations is included in the background section.

### **BACKGROUND INFORMATION** (all sections)

- List **who provided information** about the child (optional box). There may be more than one source (parent, preschool teacher, doctor, etc.)
- Developmental concerns – summarize the **referral concerns**, including parental concerns and the **results of the ASQ** and/or other screening tools. If **child attends** child care, preschool, Early Head Start, Healthy Families, include information about where and when and their concerns, if there are any.
- Medical/Health History – include **how information was obtained** (checklist, medical records) and **date** of checklist or records. Include **diagnosis**, if appropriate, and any specific **details about eating or sleeping concerns, hospitalizations, significant illnesses, falls, allergies, asthma, seizures, etc.** Also include any **private therapies** the child/family is involved with, including LifeWorks or Morrison Center. \*
- Hearing – include **tool used** to obtain information ((checklist, screening, exam), **date** completed, and **results**. Include **specific details, if there are concerns in this area.** \*
  - Hearing screening (OAE or pure tone), completed by EI/ECSE or other source, is required if the child is experiencing delays in communication.
  - Hearing screening (OAE or pure tone) must be completed when CD eligibility is being considered.
  - OAE or pure tone screening should be attempted. If child will not participate or there is a machine malfunction, follow-up hearing screening should be recommended and completed if child is eligible.
  - A separate section to detail the hearing screening is offered below (this is optional).
- Vision – include **tool used** to obtain information (checklist, screening, or exam), **date tool completed**, and results. Include **specific details, if concerns** noted. \*

**\*Information can be transferred, when information is entered into the report or the development page.**

- Language and cultural considerations – include **language spoken by child**, and language spoken by **family members** and **child care providers**. Other relevant cultural information provided by the family also can be included.

- **OTHER INFORMATION**

- EVALUATION PLANNING** (include this heading in this field)

- Include **what information was reviewed** to determine need for EI evaluation and **who reviewed** the information.
    - Include a statement that all **areas of development are evaluated in all EI evaluations**
    - Include the **tools the team determined would be used** to complete the evaluation, and **who** all would participated in the evaluation.
    - If the team **changes** evaluation plans during the course of the evaluation, explanation of what and why changes were made also should be stated here.

- **NORM-REFERENCED TESTING**

- Check box for all tests used. For each tool, **include all scores**. In this report, the speech and language sample is included in this list of tests. Check box to include a speech/language sample.
- If a tool used in the evaluation is **not included** in the list, click on “additional measures” at the bottom.
- Insert **appropriate statement** in the pull-down box (typical, below typical but does not support eligibility, 1.5 SD below, or 2 SD below) for each version of the test used. Leave this blank if the options do not apply (e.g., score is just above 1.5 SD, and the team will use that score to support eligibility).
- Optional comments for each test - this is optional, but in many instances information about **how the test was given** (e.g., direct testing and parent report, primarily parent report), any **accommodations** made for vision or orthopedic impairments, **how interpreter** was used to complete testing, etc. should be included. Information about the **child’s engagement levels or strengths specific** to the test also can be included.
- The speech-language sample only allows for intelligibility based on words (not phrases). If additional analysis is required, include that information in the optional comments. The entire sample also should be included in optional comments.

- **Criterion-Referenced Test Results**

- Check box if **AEPS was completed** during evaluation
  - If an AEPS was completed during this evaluation, enter the **scores in ecWeb** – Assessments, the percentages will then appear in the report.

\*an AEPS is at a minimum started at each EI and ECSE initial evaluation, but may not be completed.

- **Hearing Screening**

This section is **optional**. To include information, check box and enter information (make sure box not checked, if information not included).

## **OBSERVATION**

- **ALL REPORTS MUST INCLUDE A SEPARATE DETAILED OBSERVATION.** Observations **should not be embedded** in each assessment domain as suggested.
  - **In-direct** (child-directed, play, free-choice time) and **direct observations** (testing or adult-directed) should be noted. The **EI observation** should include some information about **all areas** of development.
  - **Include information about** - attention/engagement, cooperation, transitions between activities, the child's play (type of toys used, type of play, duration, how child linked play), the child's interactions with you and family members, and samples of what the child said.
  - If **another language** was used, describe how the interpreter was used. Include critical information regarding the child's understanding and speaking in the other language as well as English.
- According to... - this is always a good question to ask but it will not appear in the report if it is left blank. This is optional.

## **SKILLS AND RECOMMENDATIONS**

- Include **skills** (IFSP – “**Present Levels of Development**”), **comments** (optional), **summary** (pull down menu, choose one) and **suggested goals** (IFSP “**Needs to Learn**”) for all areas showing delays.
- Transfer information to and from development page once information is entered in either the report or the development page. **Buttons will not appear until information is inserted in the report or the development page.** This information can be added to what is currently included (append) or the information can be replaced.

## **STRENGTHS AND INTERESTS**

Describe the child's **strengths and interests** as child indicates, from parent report, and what was observed during evaluation. Information should be included in this section. Information can be transferred between report and development page.

## **SUMMARY**

- Check all appropriate boxes
- Optional Additional Comments

**FOLLOW-UP INFORMATION MUST BE INCLUDED IN THIS AREA.** At a minimum include information about the following needs

### **FOLLOW-UP NEEDED**

**Pending Regional Referral**

**Hearing Re-screen**

**Potential Categorical Eligibility**

- Include **summary statement** about eligibility determination specific to the type of evaluation completed and when eligibility will be considered. The summary also should include information about other



recommendations (e.g., follow-up evaluation if progress not seen, consult child's physician) referrals (e.g., Morrison Center, Public Health, Head Start) and resources offered (e.g., Strategies to Support Communication Development).

## **EVALUATORS**

- Service coordinator notifies team that form is ready for review and electronic signatures
- Each team member reviews report for content and accuracy, adds his/herself to the evaluators and enters name in the signature box
- Service coordinator lists who else will receive report

**Archive** the final report when complete and everyone has signed.

- When archiving, add the date of the evaluation, the type of evaluation, and EI/ECSE eligibility determination in the notes box.

## **Distribute report**

- Print, obtain hand-written signatures for all team members, and follow site distribution procedure.
- Please, continue to send a copy of the Test Results Handout to the parents when sending the report (O drive/Early Intervention/Eval Results Form and HO/Test Results (English and Spanish)).

**ECSE Report: Report Formatting**  
**(Information in bold, in CAPS, and underlined must be included)**

If AEPS was used in the evaluation, enter scores into ecWeb

**DATE OF EVALUATION**

**CHILD INFORMATION**

- **OPTIONAL COMMENTS** - include information about **preschool, child care, Head Start, Healthy Families**, etc., if child attending one of these programs or information about **other services** (e.g., Morrison Center) family is accessing.

**DOMAINS EVALUATED**– check all domains evaluated to access domains in the Skills and Recommendations section.

**BACKGROUND INFORMATION** (all sections)

- List **who provided information** about the child. There may be more than one source (parent, preschool teacher, doctor, etc.)
  - Developmental concerns – summarize the **referral concerns** including parental concerns, the **results of the ASQ** and/or other screenings, and **concerns of child care, preschool, and Head Start programs**, if appropriate. **INFORMATION ABOUT THE FAMILY** (living with both parents, # of siblings, important facts relevant to family) should be included in this section.
  - Medical/Health History – include **how information was obtained** (checklist, medical records) and **date of checklist or records**. Include **diagnosis** if appropriate, and any specific **details (eating, sleeping, hospitalizations, significant illnesses, falls, allergies, asthma, seizures, etc)**. Also include any **private therapies** the child/family is involved with, including LifeWorks or Morrison Center. \*
  - Hearing – include **tool used** to obtain information ((checklist, screening, exam), date completed, and **results**. Include specific **details, if there are concerns in this area**. \*
    - Hearing screening (OAE or pure tone), completed by EI/ECSE or other source, is required if the child is experiencing delays in communication.
    - Hearing screening (OAE or pure tone) must be complete when CD eligibility is being considered.
    - OAE or pure tone screening should be attempted. If child will not participate or there is a machine malfunction, follow-up hearing screening should be recommended and completed if child is eligible.
  - Vision – include **tool used** to obtain information (checklist, screening, and exam), **date tool completed**, and results. Include specific **details, if concerns noted**. \*
- \* **Information can be transferred, when information entered into the report or the development page.**
- Language and cultural considerations – include **language spoken by child**, and language spoken by **family members and child care providers**. Other relevant cultural information provided by the family also can be included.

- **OTHER INFORMATION**

**EVALUATION PLANNING** (include this heading in this section)

- Include **what information was reviewed** to determine need for ECSE evaluation and **who reviewed** the information
- Include the **tools the team determined would be used** to complete the evaluation, and **who** all would participated in the evaluation.
- If the team **changes** evaluation plans during the course of the evaluation, explanation of what and why changes were made also should be stated here.

**Screening Results (do not use this section – make sure box not checked)**

- **Do not use this section. This information is covered in the evaluation planning above.**

**General Evaluation Procedures (optional – check box and fill, if want to include)**

- This information can be included, but it is not required.

**NORM-REFERENCED TEST RESULTS AND SUPPORTING MEASURES**

- Check all tests used. For each tool, **include all scores**. In this report, the speech and language sample is included in this list of tests. Check box to include a speech/language sample.
- If a tool used in the evaluation is **not included** in the list, click on “additional measures” at the bottom and complete.
- Insert **appropriate statement** in the pull-down box (typical, below typical but does not support eligibility, 1.5 SD below, or 2 SD below) for each version of the test used. Leave this blank if the options do not apply (e.g., score is just above 1.5 SD and the team will use that score to support eligibility).
- Optional comments for each test - this is optional, but in many instances information about **how the test was given** (e.g., direct testing and parent report, primarily parent report), any **accommodations** made for vision or orthopedic impairments, **how interpreter** was used to complete testing, etc. should be included. Information about the **child’s engagement levels or strengths** specific to the test also can be included.
- The speech-language sample **only allows for intelligibility based on words** (not phrases). If additional analysis is required, include in the optional comments. The entire sample also should be included in optional comments.

**Criterion-Referenced Test Results**

- Check box if **AEPS was completed** during evaluation
  - If an AEPS was completed during this evaluation, enter the **scores in ecWeb** – Assessments, the percentages will then appear in the report.

\*an AEPS is at a minimum started at each EI and ECSE initial evaluation, but may not be completed.

## Hearing Screening

This section is **optional**. To include information, check box and enter information. If prefer not to include information, make sure the box is not checked.

## Oral Motor Examination

This section is **optional**. To include information, check box and enter information. If prefer not to include information, make sure the box is not checked.

## OBSERVATION

- **ALL REPORTS MUST INCLUDE A SEPARATE DETAILED OBSERVATION.** Observations **should not be embedded** in each assessment domain as suggested.
  - **In-direct** (child-directed, play, free-choice time) and **direct observations** (testing or adult-directed) should be noted.
  - **Include information about** - attention, engagement, cooperation, transitions between activities, the child's play (type of toys used, type of play, duration, how child linked play), the child's interacts with you and family members, and what the child said and did.
  - If **another language** was used, describe how the interpreter was used. Include critical information regarding the child's understanding and speaking in the other language as well as English.
- According to... - this is always a good question to ask but it will not appear in the report if it is left blank. This is optional.

## SKILLS AND RECOMMENDATIONS

- **Domains evaluated boxes** must be checked at the beginning of this report to view skills and recommendations. It will provide boxes in the report for only those areas evaluated.
- Include **skills** (IFSP – “**Present Levels of Development**”), **comments** (optional), **summary** (pull down menu, choose one) and **suggested goals** (IFSP “**Needs to Learn**”) for areas showing delays.

**Note: “Present Levels of Developmental” should be included in the IFSP development page for all areas of development. That information can be obtained from the ASQ, observations, general parent report**

- Transfer information to and from development page once information is entered in either the report or the development page. **Buttons will not appear until information is inserted in the report or the development page.** This information can be added to what is currently included (append) or the information can be replaced. Remember to add present levels for those areas not tested.

## STRENGTHS AND INTERESTS

Describe the child's **strengths and interests** as child indicates, from parent report, and what was observed during evaluation. Information should be included in this section. Information can be transferred between report and development page.

## **SUMMARY**

- Check all appropriate boxes
- Optional Additional Comments

**FOLLOW-UP INFORMATION MUST BE INCLUDED IN THIS AREA.** At a minimum include information about the following needs:

### **FOLLOW-UP NEEDED**

**Pending Regional Referral**

**Hearing Re-screen**

**Potential Categorical Eligibility**

- Include **summary statement** about eligibility determination specific to the type of evaluation completed and when eligibility will be considered. The summary also should include information about other recommendations (e.g., follow-up evaluation if progress not seen, consult child's physician) referrals (e.g., Morrison Center, Public Health, Head Start) and resources offered (e.g., Strategies to Support Communication Development).

## **EVALUATORS**

- Service coordinator notifies team that form is ready for review and electronic signatures
- Each team member reviews report for content and accuracy, adds his/herself to the evaluators and enters name in the signature box
- Service coordinator lists who else will receive report

**Archive** the final report when complete and everyone has signed.

- When archiving, add the date of the evaluation, the type of evaluation, and EI/ECSE eligibility determination in the notes box.

### **Distribute report**

- Print, include hand-written signatures for all team members, and follow site distribution procedure.
- Please, continue to send a copy of the Test Results Handout to the parents when sending the report (O drive/Early Intervention/Eval Results Form and HO/Test Results (English and Spanish)).

**ECSE Speech and Language Report: Report Formatting**  
**(information in bold, in CAPS, and underlined must be included)**

- If AEPS was used in the evaluation, enter scores into ecWeb

**DATE OF EVALUATION**

**CHILD INFORMATION**

**COMMUNICATION SKILLS EVALUATED** - Check all appropriate boxes regarding what was evaluated (Articulation, Language, Fluency and Speech/Language Sample - these boxes will insert specific formats in the report, **if the boxes are not checked the formats will not be available**).

**BACKGROUND INFORMATION** (all sections)

- List **who provided information** about the child. There may be more than one source (parent, preschool teacher, doctor, etc.)
  - Developmental concerns – summarize the **referral concerns** including parental concerns, the **results of the ASQ** and/or other screenings, and **concerns of child care, preschool, and Head Start programs**, if appropriate. **INFORMATION ABOUT THE FAMILY** (living with both parents, # of siblings, important facts relevant to family) should be included in this section.
  - Medical/Health History – include **how information was obtained** (checklist, medical records) and **date of checklist or records**. Include **diagnosis** if appropriate, and any specific **details (eating, sleeping, hospitalizations, significant illnesses, falls, allergies, asthma, seizures, etc)**. Also include any **private therapies** the child/family is involved with, including LifeWorks or Morrison Center. \*
  - Hearing – include **tool used** to obtain information ((checklist, screening, exam), date completed, and **results**. Include specific **details if concerns in this area**. \*
    - Hearing screening (OAE or pure tone), completed by EI/ECSE or other source, is required if the child is experiencing delays in communication.
    - Hearing screening (OAE or pure tone) **must be complete when CD eligibility is being considered**.
    - OAE or pure tone screening should be attempted. If child will not participate or there is a machine malfunction, follow-up hearing screening should be recommended and completed if child is eligible.
  - Vision – include **tool used** to obtain information (checklist, screening, and exam), **date tool completed**, and results. Include specific **details, if concerns noted**. \*
- \* Information can be transferred, when information entered into the report or the development page.**
- Language and cultural considerations – include **language spoken by child**, and language spoken by **family members and child care providers**. Other relevant cultural information provided by the family also can be included.

- **OTHER INFORMATION**

**EVALUATION PLANNING** (include this heading in this section)

- Include **what information was reviewed** to determine need for ECSE evaluation and **who reviewed** the information
- Include the **tools the team determined would be used** to complete the evaluation, and **who** all would participated in the evaluation.
- If the team **changes** evaluation plans during the course of the evaluation, explanation of what and why changes were made also should be stated here.

**Screening Results (do not use this section – make sure box not checked)**

**Do not use this section. This information is covered in the evaluation planning above.**

**NORM-REFERENCED TEST RESULTS AND SUPPORTING MEASURES**

- Check all tests used. For each tool, **include all scores**.
- The templates for recording speech/language sample, and explaining the articulation, fluency, and language testing are included in the skills and recommendations (boxes above must be checked).
- If a tool used in the evaluation is **not included** in the list, click on “additional measures” at the bottom and complete.
- Insert **appropriate statement** in the pull-down box (typical, below typical but does not support eligibility, 1.5 SD below, or 2 SD below) for each version of the test used. Leave this blank if the options do not apply (e.g., score is just above 1.5 SD and the team will use that score to support eligibility).
- Optional comments for each test - this is optional, but in many instances information about **how the test was given** (e.g., direct testing and parent report, primarily parent report), any **accommodations** made for vision or orthopedic impairments, **how interpreter** was used to complete testing, etc. should be included. Information about the **child’s engagement levels or strengths** specific to the test also can be included.
- The speech-language sample **only allows for intelligibility based on words** (not phrases). If additional analysis is required, include in the optional comments. The entire sample also should be included in optional comments.

**Criterion-Referenced Test Results**

- Check box if **AEPS was completed** during evaluation
  - If an AEPS was completed during this evaluation, enter the **scores in ecWeb** – Assessments, the percentages will then appear in the report.

\*an AEPS is at a minimum started at each EI and ECSE initial evaluation, but may not be completed.

## Hearing Screening

This section is **optional**. To include information, check box and enter information. If prefer not to include information, make sure the box is not checked.

## Oral Motor Examination

This section is **optional**. To include information, check box and enter information. If prefer not to include information, make sure the box is not checked.

## OBSERVATION

- **ALL REPORTS MUST INCLUDE A SEPARATE DETAILED OBSERVATION.** Observations **should not be embedded** in each assessment domain as suggested.
  - **In-direct** (child-directed, play, free-choice time) and **direct observations** (testing or adult-directed) should be noted.
  - **Include information about** - attention, engagement, cooperation, transitions between activities, the child's play (type of toys used, type of play, duration, how child linked play), the child's interacts with you and family members, and what the child said and did.
  - If **another language** was used, describe how the interpreter was used. Include critical information regarding the child's understanding and speaking in the other language as well as English.
- According to... - this is always a good question to ask but it will not appear in the report if it is left blank. This is optional.

## SKILLS AND RECOMMENDATIONS

- In this report, **separate sections are offered for articulation, fluency, and language** assessment information. In addition, a format for reviewing the **speech/language sample can be included**, if the box is checked at the top. Complete each section as offered and use the additional information box to offer specific details.
- For language, Include **skills** (IFSP – “**Present Levels of Development**”), **comments** (optional), **summary** (pull down menu, choose one) and **suggested goals** (IFSP “**Needs to Learn**”) for areas showing delays.

**Note: “Present Levels of Developmental” should be included in the IFSP development page for all areas of development. That information can be obtained from the ASQ, observations, general parent report**

- Transfer information to and from development page once information is entered in either the report or the development page. **Buttons will not appear until information is inserted in the report or the development page.** This information can be added to what is currently included (append) or the information can be replaced. Remember to add present levels for those areas not tested.



## **STRENGTHS AND INTERESTS**

Describe the child's **strengths and interests** as child indicates, from parent report, and what was observed during evaluation. Information should be included in this section. Information can be transferred between report and development page.

## **SUMMARY**

- Check all appropriate boxes
- Optional Additional Comments

**FOLLOW-UP INFORMATION MUST BE INCLUDED IN THIS AREA.** At a minimum include information about the following needs:

### **FOLLOW-UP NEEDED**

**Pending Regional Referral**

**Hearing Re-screen**

**Potential Categorical Eligibility**

- Include **summary statement** about eligibility determination specific to the type of evaluation completed and when eligibility will be considered. The summary also should include information about other recommendations (e.g., follow-up evaluation if progress not seen, consult child's physician) referrals (e.g., Morrison Center, Public Health, Head Start) and resources offered (e.g., Strategies to Support Communication Development).

## **EVALUATORS**

- Service coordinator notifies team that form is ready for review and electronic signatures
- Each team member reviews report for content and accuracy, adds his/herself to the evaluators and enters name in the signature box
- Service coordinator lists who else will receive report

**Archive** the final report when complete and everyone has signed.

- When archiving, add the date of the evaluation, the type of evaluation, and EI/ECSE eligibility determination in the notes box.

## **Distribute report**

- Print, include hand-written signatures for all team members, and follow site distribution procedure.
- Please, continue to send a copy of the Test Results Handout to the parents when sending the report (O drive/Early Intervention/Eval Results Form and HO/Test Results (English and Spanish)).