

EI Hub Cheat Sheet:

Entering Transition Section:

Transition is an ongoing process with a child and their parent/guardian. There is a transition section in each IFSP which should be completed as necessary. This Cheat Sheet will discuss the specific transition tab in the child's chart which should be completed as applicable and should be completed in its entirety before closing the child's case.

Note that any consent dates needed should match the date on the paperwork that the Parent/Guardian signed. No verbal consents should be used.

1. Choose User Profile (ISC/OSC NY, or EIOD NY)

2. On your Home Page under the Tab Utilize the

Search Bar to find your child

a. Select

3. Select Tab across the top of the child's chart

a. Tab, complete each section as applicable

i. Check box: Transition Planning Begins

ii. Enter Date of Transition Conference

iii. Choose from drop down if all required participants were present at the meeting to meet EI criteria

iv. Check box: Was an EI transition conference held?

v. Check Box: Was the EI Transition conference combined with the CPSE meeting?

vi. Check Box: Was the transition conference late?

vii. Choose from the drop down why the conference was late

viii. Check Box: Was the EI transition conference combined with the IFSP meeting?

ix. Select

b.

i. There is nothing to complete on this tab however this is the 4410 calculator with important dates. Reference this when needed.

c. Tab, complete each section as applicable

i. *Is the child potentially eligible for Part B services? : **Yes**

ii. Potentially Eligible Date will auto populate

iii. Check Box: Was an initial CPSE meeting held?

iv. Initial CPSE Meeting Date: **Input Date of meeting**

1. Can enter date and info from 2nd meeting if applicable

- v. Was the child determined eligible by the CPSE? : **Yes or No**
 - vi. If Yes, planned start date for the start of 4410 services: **Enter start date for CPSE services**
 - vii. Enter the Date that EI Services will end for this child: **Enter end date of EI services**
 - viii. Services authorized through the CPSE process: **Enter what services child is deemed eligible for**
- d. Tab, complete each section as applicable
- i. Notification Date: **Enter date that the invitation for the transition conference was sent/received**
 - ii. Conference Location: **Select Location of conference**
 - iii. Scheduled Transition Conference Date: **Enter the date originally scheduled for the transition conference**
 - iv. Time: **Enter time of transition conference**
- e. Tab, complete each section as applicable
- i. This tab indicates all those who are taking part in the Transition Plan for this child. You will be able to auto-populate based on the family members added under the Family Tab and Therapists entered either in the Teams Tab or Service Authorizations. **As far as I am aware this section is not mandatory.**
 - ii. Select
 - 1. Utilize the drop down for Family Member Search, or Therapist Search
 - a. Family members previously added to the case via the Family Tab will populate here. Choose one and the rest will fill in for you.
 - b. Therapists (including Service Coordinators & EIO/D) will auto populate here if they were added via the services tab or teams tab. Choose one and the rest will fill in for you.
 - 2. If not utilizing Search
 - a. Enter Member Name, Transition Role (parent/therapist), Member Phone and Member Email
 - 3. Check box Invited: **If invited to Transition Conference**
 - 4. Check box Attended: **If attended Transition Conference**
- f. Tab, **completed if Child is being discharged without CPSE services but may have been referred to other services**
- i. Last Date of EI Services: **Enter last date child will receive services**
 - ii. Date Parent Informed of Last Date for EI Services: **Date you discussed this with the Parent/Guardian**
 - iii. Check Box: Transition Plan discussed with parent
 - iv. If yes, date discussed: **Date you discussed transition plan with parent**
 - v. Post-Transition Programs & Support Services Decision: **Early Childhood Programs and Support Services needed after Transition OR No Formal Referral/Discharge Discussed**

1. If there is no formal referral or discharge discussed this page is complete
2. If there was an indication for Early Childhood Programs and Support Services, please complete the rest of the page indicating with services were needed if the referral was made or if the parents was provided information on how to make the referral.

vi. Select

g. Tab, complete each section as applicable

i. Check the box applicable for parent's decision (remember that a parent must opt-out in writing):

1. P/G chooses to waive the 30-calendar day opt-out period
2. P/G understands if they don't contact the Service Coordinator within 30 days of today, notification will be sent to the CPSE of their local school district
3. P/G chooses to opt out of written notification being sent to the CPSE of their local school district

ii. Check the box if applicable:

1. Was notification of child's potential eligibility sent to the school district?
 - a. Date Notification Sent Completed

iii. Check box if applicable:

1. Family Modified Decision
 - a. Complete Date Family Modified Decision

iv. Check box if applicable:

1. Revocation of Written Notification (Family took back their consent or denial of written notification which would require another written notification with the opposite indication)
 - a. Date of Revocation

v. Select

h. Tab, complete each section as applicable

i. Option 1: Check Box: **Parent/ Guardian gives consent to a referral being sent to the CPSE**

1. Check Box: P/G requests for EI Service Coordinator to be invited to the initial meeting with CPSE (if applicable)
2. Check Box: Was the referral made to the school district
 - a. Date of CPSE Referral
 - b. If no, why?
3. Check Box (if needed): Revocation of consent for Referral
 - a. Date of Revocation

ii. Option 2: Check Box: **Parent/Guardian does NOT give consent for a referral being sent to the CPSE**

1. Date of Parent's Decision

iii.

i. Tab, complete each section as applicable

i. Option 1: Check Box: **Parent gives consent to transmit EIP records & reports to the CPSE**

1. *Date Transmitted: **enter date records were sent**

ii. Option 2: Check Box: **Parent/Guardian gives consent to transmit the following EIP reports and records to the CPSE**

1. *Forms to be transmitted: **Enter all forms consented to transmit**

2. *Date Transmitted: **enter date above records were sent**

iii. Option 3: Check Box: **Parent/Guardian does NOT give consent to transmit EIP records and reports to the CPSE**

iv. Check Box: Revocation of Consent... only needs to be completed if the parent/guardian revoked their decision to send the records.

1. Consent for Transmittal of EIP Evaluations and Records to CPSE Date of Revocation: **Enter date of revocation**

v. Select

j. Tab, complete each section as applicable

i. Option 1: Check Box: Parent/Guardian gave consent to arrange a transition conference

1. *Date of Parent's Decision: **Enter date P/G consented**

ii. Option 2: Check Box: Parent/Guardian did NOT give consent to arrange a transition conference

1. *Reason for Declining Transition Conference: **Write in why P/G declined**

2. *Date of Parent's decision: **Enter date P/G consented**

iii. Select

k. Tab **Not Mandatory**

i. Coincides with Form A Part 1b from State Transition Tool Kit which we do not use currently

l. Tab, **Not Mandatory**

i. Coincides with Family Outcomes Form A from State Transition Tool Kit which we do not use currently

m. Tab, **Not Mandatory**

i. Coincides with Form B Part 1b from State Transition Tool Kit which we do not use currently

n.

Tab, **Not Mandatory**

- i. Coincides with Family Outcomes Worksheet Form B from State Transition Tool Kit which we do not use currently