



## Early Childhood Division- Pre-K

### Standard Operating Procedure

1. ***Area of Focus – REFERRAL PROCESS for STUDENTS with SUSPECTED COGNITIVE DISABILITIES***

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2. ***Scope***

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Provide a referral process for children who have been identified, through screening and additional relevant information, as needing academic and/or developmental support services

3. ***Prerequisites***

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Early Childhood teaching teams implement the curriculum, sound early childhood classroom management, and child guidance practices with fidelity

4. ***Responsibilities***

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Teacher  
Instructional Advisor  
Family Engagement Specialist  
Health Services Advisor  
Education Director  
Center Director/Manager  
ERSEA Manager  
Behavior Specialist  
Health Services Advisor

5. ***Procedure***

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***Developmental Referrals***

- A. These procedures apply to all M-SCS Early Childhood Division classrooms except Early Childhood Special Education (Exceptional Children) classrooms when a child already has an Individualized Education Plan (IEP). This includes all center-based, school-based and community partner classrooms.
- B. All children receive developmental screening within 45 days after they first attend the program, using the *BRIGANCE Screen*. The results are analyzed and compared by the teaching teams and health services compliance advisor to determine if a child is likely to have developmental or academic delays.



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- C. Review the child's score from the assessment with the score for the appropriate age range. If a child scores below the at-risk cutoff score, begin the documentation using *Anecdotal Notes* along with evidence of student performance for 30 days.
- D. Teacher notifies their assigned instructional advisor (IA) or education specialist (ES) and supervisor (principal, site manager or center director) to request an observation and coaching. Intervention strategies should be implemented. In **school-based sites**, the guidance counselor should also be notified. The family service worker and/or the teacher will contact the parent to discuss the concerns and to schedule a meeting.
- E. The teacher, family service worker and parent meet to discuss the concern(s). The assigned IA or ES are made aware and are invited. In this meeting, the team should define the concern (i.e., the child is struggling with letter naming) and discuss strategies to implement. \* **School-based sites:** The school counselor should be invited as well. A decision is made at this meeting about whether to move forward with the S-Team process. The meeting will be documented using the *Support Team Minutes* form.
- F. Continue documentation using *Anecdotal Record Notecards*.
- G. Provide small group instruction. Document using the *Small Group Individualization Plan*.
- H. The IA and ES monitor progress and the FSW checks in weekly with parents.
- I. Interventions will be utilized for up to 45 days. At the end of the 45-day period, a meeting should be held to discuss progress and/or consider referral to Colonial Hearing, Speech and Vision Center (Step 5).

The FSW schedules a parent meeting to discuss the child's progress and to make a determination about whether to continue with the intervention strategies or to refer for further evaluation. Supporting documentation should be presented at this meeting, including progress reports and all Pre-K assessment data (*Brigance Inventory*). The *teacher, parent, family service worker, instructional advisor/education specialist, health specialist, and the health services compliance advisor* should attend this meeting. \* School-based sites: The school counselor should also attend.

- Option 1: The child is making adequate progress. Continue with intervention strategies and monitor bi-weekly. Follow-up meetings should be scheduled every 45 days.
  - Option 2: The child is not making adequate progress. Complete referral packet for referral to Colonial/Local Education Agency for additional testing.
- J. Refer to Colonial/Local Education Agency
    - School-based sites: Children in school-based sites are referred to Colonial through school-based processes, coordinated by *the health services compliance advisor*, along with the school counselor and school psychologist.
    - Center-based sites: The *FES* and the *health specialist* compile the final referral packet items for referral to Colonial or other LEA, from the center-based sites. The packet is to be given to the speech pathologist for the first five (5) students.



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The speech pathologist will advise of next steps. If there are more than 5 total referrals at the site, the health specialist will deliver the referral packet to Colonial or the LEA.

K. The following items must be included in the referral packet:

- Head Start Referral List (center-based)
- Copy of vision screening results (must state “Passed/Failed” status)
- Copy of hearing screening results (must state “Passed/Failed” status)
- Copy of speech screening results (must include the *Fluharty II Screening Test* or *PLS-5 Spanish*)
- Head Start Teacher Input Form
- Copy of any evaluations from outside agencies
- The LEA may require additional documents.

### ***Speech Referrals***

L. The family engagement specialist (FES) will give the referrals for the first five (5) students who failed the Head Start screening to the SCS speech language pathologist (SLP) assigned to the site or school. If there are more than five (5) total referrals at the site, the FES will contact a health specialist (HS) so that the staff at Colonial Hearing, Speech, and Vision Center (CHSVC) can process the remainder of the referrals. The referral packet must contain the following forms initially.

- Head Start Speech Referral List
- A copy of the Head Start Speech and Hearing Screening Form for each child on the list
- A copy of the Fluharty II Screening Test or the PLS-5 Spanish for children whose first language is Spanish
- Head Start Teacher Input Form
- Speech/Language Parent Questionnaire
- A copy of any evaluations from outside agencies

M. The SLP and FES/HS will sign and date the *Head Start Referral List*. A copy should also be forwarded to the health services compliance advisor.

### ***Child Enrolls with an Individual Education Plan (IEP)***

N. The IEPs for all children who enroll in Head Start are referred immediately to the M-SCS health services compliance advisor for review. The advisor, along with the LEA advisor, speech pathologist (center-based sites) and school psychologist (school-based sites), reviews the IEPs and make the appropriate placement recommendation for each child to either a school- or center-based classroom, the least restrictive environment, or to an early childhood special education classroom.



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### 6. *References*

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- Head Start Performance Standards Subpart C- Education and Child Development Program Services 1302.33
- Memphis-Shelby County Schools Board of Education Policy 5002 Programs for Students with Disabilities under IDEA
- TN Department of Education Standards for School Administered Childcare Programs 0520-12-01-.14
- Behavior Health Referral Packet
- Brigance Screener
- Brigance Inventory
- Social and Emotional Screener
- Individualized Lesson Plans

### 7. *Definitions*

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