

New York City Early Intervention Program Screening Summary Form

Child's N	ame:Date of Screening:
EI#:	Date of Birth:
SIGNATI	JRE OF PERSON COMPLETING SUMMARY:
parent/sur area(s) of	hat the summary of the screening is based upon my interview with the above-named child's trogate parent (or other guardian if there is no available parent) and my assessment of their concern (if any). I further certify that, to the best of my knowledge, I employed agete instruments, clinical observations and informed clinical opinion.
Signature	Date
Print nan	ne, title and license number
	Summary of Screening
I.	Name, title and discipline of the person performing the screening
II	Description of the assessment process and conditions

- Screening instrument that was used and an explanation of this measure or score III.
- IV. The child's responses and the family's belief about whether the responses were
- How informed clinical opinion was used in assessing whether the child passed or V. failed the screening
- VI. A clear statement of the child's screening results and next steps

If a bilingual screening is conducted, this summary should also be provided in the parent's dominant or preferred language or other mode of communication of the parent, if feasible.



New York City Early Intervention Program Screening Summary Form Instructions for Completion

The person writing the summary must sign and date the attestation, printing his/her name, title and license number (if appropriate) below the signature.

Note: The person completing the summary must be the person who conducted the developmental screening.

- I. List the name, title, and discipline of the individual involved in the screening of the child
- II. Description of the assessment process and conditions
 - a. How was it determined that the child should have a general developmental screening (such as with a special instructor) or a screening with a domain-specific qualified personnel (such as a PT or SLP)?
 - i. What are the family's concerns about their child's development, if any?
 - b. How was it determined that a bilingual screening was indicated?
 - i. What is the native or dominant language of the child/family?
 - ii. What are the language(s) to which the child is exposed, if applicable?
 - iii. How was an interpreter used? (name and relationship to the family, if any)
 - c. Location of the screening in-person or telehealth. If by telehealth, document the reason and the physical location of both the child and the evaluator.
- III. Screening instrument that was used and an explanation of this measure or score
 - a. Identify the instrument used and provide an explanation of the results obtained, including relevance to the child's level of functioning.
 - b. The instrument used must be from the NYS Department of Health preferred list of instruments and must be the most current version of the instrument.
- IV. The child's responses and the family's belief about whether the responses were optimal
- V. How informed clinical opinion was used in assessing whether the child passed or failed the screening
- a. Describe any qualitative factors impacting the child's functioning during the screening.
- VI. A clear statement of the child's screening result