## Family Service Coordination Reference and Training 34 CFR § 303.34

Part C services under IDEA: including activities carried out by the Primary Service Provider to assist/enable a family to receive rights, procedural safeguards, and services within EI/ILP and across agency lines. FSC is an active, ongoing process that involves assisting parents of eligible children in gaining access to early intervention services, other services, situations and sharing information that supports and benefits the development of each child being served. Providers are expected to complete FSC at least one time per month for every child regardless of insurance type, however, PIC submits charges to Medicaid one time per month, per child at a set reimbursement rate for one unit of services minimum. A chart of approved family service coordination activities has been provided to help you complete your documentation.

## **FSC Long term Goal:**

Child and family will receive family service coordination to support his/her overall development and to facilitate communication between family, medical providers, and community providers and to obtain necessary services.

## **Short Term Goal #1:**

Child and family will have access to needed and requested services, coordination and referrals among various resources, including childcare, pediatrician, and community providers, in alignment with their specific needs and preferences

Referral and Service Coord Example of Activity Docume	entation Note
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Assisting in obtaining access to needed early intervention services and other services, or resources identified in the IFSP, including making referrals and scheduling appointments.

The provider connects a child/family to other agencies or providers for services that might benefit the child's development such as consulting PIC providers, community therapists and other medical subspecialities (ie, neuro, ENT, AuD, Vision services),

Assisted parent-guardian in obtaining access to needed services that were identified and requested by the parent-guardian and,

Completed referral(s) to:

Scheduled appts with:

Interpreter

Requested info from:

Order Part C items for/from

Supported client due to primary on leave

Contacted:

		Eligibility: Diaper Pantry:
Facilitating, attending and supporting during a visit with a PIC secondary, community provider, agency, subspecialty, or physician.	A provider arranges for PIC or community therapist or other and accompanies family in this visit provide support to family and provider to help meet the IFSP goals. Provider attends this visit.	Supported family in visits and activities with the following providers to identify needs and access the care needed:  Specialties/activities/Agencies
Coordinating funding sources for services required under Part C of IDEA.	A provider helps a family navigate through funding options available for their child's needs: mini-grant application, Medicaid application, interpreter, Part C funding requests.	Assisted the family in completing the necessary documentation and applications for relevant funding, providing step-by-step guidance throughout the process for:  Mini-grant Application for STAR grant
		Part C Request Medicaid

Short Term Goal #2: Child and family will have services coordinated for evaluations and assessments

Eval Assess Trans Coord Example of Activity Documentation Note

Eval, Assess, Trans Coord	Example of Activity	Documentation Note
Coordinating evaluations	Primary service provider	Coordinated the scheduling
and assessments	sets up assessments,	and arrangement of
	evaluators for annual	assessments with relevant
	evaluation.	evaluators to ensure a
		comprehensive evaluation
		covering all necessary
		developmental domains.

Reviewed medical records	Reviewed and assessed all available medical records, including previous diagnoses, treatments, medications, and any relevant medical reports, to develop a comprehensive overview of the child's	PIC evaluators: ASD evaluators: Other: Provider examined and assessed all available medical records, including previous diagnoses, treatments, medications, and any relevant medical reports, to identify of relevant developmental
	medical history.	information and any specific medical considerations that may require special attention in screening and evaluation including:

**Short-Term Goal** #3: Child and family will have up-to-date information, IFSP goals, and experience a smooth transition to ASD or other community services at age 3.

**Support and Planning** 

**Example of Activity** 

**Documentation Note** 

	development, review, and evaluation of IFSPs.	secondary and the family to develop an Individualized Family Service Plan (IFSP) outlining the specific goals and services needed for a child's early intervention program.	discussion about specific and measurable goals that align with the child's developmental needs and the family's priorities.
check in that results in discussion regarding child progress.  evolving needs, and progress on goals.  Facilitated discussion and check-in with the family about the family's priorities.	initiated a check-in regarding family and/or child progress, services, and concerns.	initiates a check-in during a home visit to discuss the child's updates on progress, current treatments, address any concerns, and make adjustments to the intervention plan as needed.  Family or provider initiate a check in that results in discussion regarding child progress.	implementation of necessary adjustments to the intervention plan, incorporating insights and recommendations from the family and the service providers to ensure that the plan remains relevant and effective in meeting the child's evolving needs, and progress on goals.  Facilitated discussion and check-in with the family about the family's priorities.
Conducted follow-up and activities to determine that  Check-in with family/providers to find out which services are in place			Followed up today to discuss

appropriate services are being provided.	if services have been initiated. Set up appts to discuss which services are in place.	and being provided with:  People contacted: [Comment] Services confirmed [Comment] Services recommended [Comment] Other [Comment]
TRANSITION: Facilitated the development of a transition plan to appropriate services, and completed associated activities.	Facilitating the development of a transition plan to preschool or other services as appropriate. Follow-up with activities related to transition.	Provider completed the following activity this day to support a smooth shift to preschool or other appropriate services:  Discussed opt out Offered and reviewed Steps Ahead booklet Discussed settings including: HS, ASD, Comm preschools, Community therapist Completed and sent ASD packet Scheduled briefing with ASD evaluators Attended briefing with ASD evaluators Coordinated 90 Day, calendared, sent tela invite, called my ASD Attended Elig/IEP, supported discussion with ASD evaluators Other