

# Notice of Intent to Transfer/Transition Child or Pregnant Mother and Records Procedure

## Purpose

This procedure helps create a systematic approach to transfers and transitions by explaining how to fill out the *Notice of Intent to Transfer/Transition Child or Pregnant Mom and Records Form*

## Procedure

A *Release/Exchange of Confidential Information Non-Health Form* must always accompany the *Notice of Intent to Transfer/Transition Child or Pregnant Mom and Records Form* when sending it to a School District or Community Program outside of those sub-contracting with PSESD, and School District or Community Programs who have a current MOU.

## Basic Information:

- **Name of Sending Program/Center:** Write the name of the Program/Center who is sending the information.
- **Name/Title of Sending Staff/Phone number:** Write the name and phone number of the staff person who is sending the information.
- **Name of Receiving Program/Center:** Write the name of the School District or Community Program/Center where the child/pregnant mom and family is transferring/transitioning to.
- **Name of Receiving Staff/Phone number:** Write the name and phone number of the staff person at the receiving Program/Center, who is the intended recipient of this notification.
- **Name of Child/Child's Date of Birth:** If notification is regarding a child, write the name of the transferring/transitioning child, and the child's date of birth.
- **Name of Pregnant mom/Date due/Phone number:** If notification is regarding a pregnant mom, write the name of the transferring/transitioning pregnant mom, the anticipated due date, and phone number.
- **Address of Pregnant mom:** Write the address of the pregnant mom.
- **Name of Parent/Guardian/Phone number:** Write the name and phone number of the transferring/transitioning child's parent/guardian.
- **Address of Parent/Guardian:** Write the address of the parent/guardian of the child.
- **Today's Date/Anticipated Timeline of Transfer/Transition:** Write any known information regarding the timeline of the transition, based on your transition planning conversations with the parent/guardian (e.g. "This family/pregnant mom will be moving to your area in January." or "This child will be starting preschool in the fall in your School District" etc.)
- **Memorandum of Understanding:** Memorandum (MOU) on file: An MOU is an agreement between PSESD and another School District or Community Program. Currently we have MOUs with other School Districts or Community Programs for transitions from Early Head Start to Preschool Early Learning Programs. We do not have MOUs for transitions between Early Head Start to Early Head Start and Preschool Early Learning programs to Preschool Early Learning programs.

## Instructions for Step 1:

Children/pregnant moms moving to or from PSESD Early Learning programs are considered a classroom change for those School Districts or Community Programs with which we have a MOU (*Children's Home Society only at this time*). If the School District or Community Program is listed here, there is a MOU on file at PSESD: Please check the space provided for "MOU on file." If a receiving School District or Community Program requests a copy of the MOU, contact your Regional Senior Coordinator in Family Support to get further instructions.

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Identify the type of program the transferring child/pregnant mom is coming from and where they will be going:

- **Early Head Start Transition/PSESD Classroom Change –EHS** refers to a child or a pregnant mom who is moving from one Early Head Start classroom to another within PSESD Early Learning Programs.
- **Early Head Start Transition/PSESD Classroom Change - Preschool Early Learning** refers to a child who is moving from an Early Head Start classroom to a preschool classroom within PSESD Early Learning Programs.
- **Early Head Start Transfer/Non-PSESD School District** refers to a child who is moving from a PSESD Early Head Start Program to a Preschool Program in a School District outside of PSESD Early Learning programs, or a Community Program with which PSESD Early Learning does not have a MOU.
- **Early Head Start Transfer/ Non-PSESD Community Program** refers to a child who is moving from a PSESD Early Head Start Program to a Preschool Program in a Community Program outside of PSESD Early Learning programs, or a Community Program with which PSESD Early Learning does not have an MOU.
- **Preschool Early Learning Transition/PSESD Classroom Change** refers to a child who is moving from one preschool program classroom to another within PSESD Early Learning Program.
- **Preschool Early Learning Transfer/Non-PSESD School District Program** refers to a child who is moving from a PSESD Preschool Program to a Preschool Program in a School District outside of PSESD Early Learning Program or a School District with which PSESD Early Learning does not have an MOU.
- **Preschool Early Learning Transfer/ Non-PSESD Community-Agency Program** refers to a child who is moving from a PSESD Preschool Program to a Preschool Program in a Community Agency outside of PSESD Early Learning Program or a Community Program with which PSESD Early Learning does not have an MOU.

### Instructions for Step 2:

Identify important information and make sure it is individualized for each transferring/transitioning child/pregnant mom. This information will be given to the receiving School District, Community Program. It will allow them the opportunity to prepare for and communicate with pregnant mom or family entering their Program/Center.

- **An interpreter is requested for the following language:** If the parent/guardian of the child, or the pregnant mom, has expressed the need for an interpreter, check the space and indicate which language.
- **This child has a current IFSP/IEP or diagnosed disability:** If the child has a current IFSP or IEP, check the space provided.
- **This child has had an IFSP/IEP in the past/Date of completion or closure:** If the child does not have a current IFSP/IEP, but has had an IFSP/IEP in the past, check the space, and write the date it was completed or was closed.
- **This child has special health needs and/or requires accommodation:** If the child has special health needs, check any space that corresponds to the child's needs - Physical Health, Mental Health, Nutrition, or Oral Health. Do not provide more health information than requested here.
- **This child currently has one or more Child Health Plans:** If the child currently has one or more Child Health Plans, check the space indicated.
- **Pregnant mom – high risk pregnancy:** If this notification is for a transitioning/transferring pregnant mom who is experiencing a high-risk pregnancy, check the space indicated.

### Related Documents

*Notice of Intent to Transfer/Transition Child or Pregnant Mom and Records Form*

*Authorization to Release Confidential Health Information*

*Release/Exchange of Confidential Information with School District Non-Health*

*Release/Exchange of Confidential Information Non-Health*