Child's Name:	Date of Birth:
Local Program:	Local ID#:

Office of Child Development and Early Learning



Infant / Toddler Tracking Plan – with Annotations

Meetings for the Tracking Plan					
Purpose Of Meeting(s) (Ex.: Initial Tracking Plan, Other Update)					

Demographics

Child Information		
Child's Name:	Gender:	
Date of Birth:	Age:	
EIX00 #:		
Referral Date:		
Referral Source:		
Child's Address:		
City/State/Zip:		
Phone #:		
Primary Language: If the family identifies a primary language other the	an English, you must offer an interpreter.	
School District of Residence:		
County of Residence:		

Child's Name:	Date of Birth:	
Local Program:	Local ID#:	
Measurable Posult/Outcome/Goal		

Activity/behavior/skill in everyday life, identified by the family and the Tracking team, that they would like to see happen. Includes information on the routine/activity of the family, community, or early childhood setting where the behavior/skills will be incorporated. Should address the child's needs identified in the evaluation and the priorities of the family. Be functional and measurable to provide a framework for ongoing progress monitoring. Goal should be developed in accordance with the PA Early Learning Standards and enable the child to be involved in and make progress in the general curriculum.

Outcome/Goal:	# Da	te outcome/goal developed:	Date outcome/goal completed:
Outcome/Goal St	atement: This should reflect th	e overall goal of tracking a child's develop	ment, providing regular developmental screenings and supporting a child's overall
		he family and informing them of appropria	
What will occur to	o reach the outcome/goal?	This should include the team's individualiz	zed plan for tracking the child's development, including the frequency with which the
Service Coordinator	contacts the family, method of	screening (home visit, mail, phone call) and	<mark>d the screening tool to be used</mark> .

After reviewing the outcome/goal and progress monitoring data, we, the team, have decided:

This should include screening tool used, results, any actions taken based on the results, and any next steps. This section can also be used to indicate the date a screening tool was sent to a family if it was not returned.

Date of Review:

Early intervention Services									
Early Intervention Service ¹	Location ²	Start Date³	Delivered Date Needed	Actual Delivered Date	Service End Date	Frequency up to a Maximum	Session Duration ⁴	Unit Cost⁵	Estimated Total Cost ⁵
Service Coordination (Home/Comm)									
Contact Person & Pho	ne Number:				Agency:				
Service Comments:									

Early Intervention Services

Date of Birth:

Local ID#:

Child's Name:

Local Program:

Information on this page will pre-populate on the printed Tracking Plan from the service page in PELICAN EI.

¹All services will be on an individual basis unless otherwise indicated within the plan here and/or in the service page.

² If early intervention services/supports are not being provided in a natural environment or an inclusive environment, complete the sections titled "Participation with Typically Developing Children".

³ If an early intervention service is projected to start later than 14 calendar days after the Start Date, a justification of the later date must be documented in the Service Comments section.

⁴A unit is equal to 15 minutes.

⁵Only completed by Infant/Toddler Programs: This child's Infant/Toddler early intervention services may be funded through state, Medical Assistance or Infant/Toddler and Family Waiver funds.

Revisions to the Tracking Plan					
Date of Revision(s)	Tracking Plan Section(s) Amended	Reasons For Revision			

Date of Birth:

Local ID#:

Child's Name:

Local Program:

Child's Name:	Date of Birth:				
Local Program:	Local ID#:				
Transition Plan					
	This plan should be written in conjunction with the family and should be used to support the child's transition will only have a meeting with a Preschool Early Intervention Program if specifically requested by the family and				
an activity, behavior or skill that is identified by the family and team. Th	e/goal based on the individual child and family needs for transition out of Early Intervention. It should describe transition outcome will include the routines, activities and unique needs of the child and the priorities of the end of the community, or in an early learning setting. What type of programs or experiences are the family dineighbors participate?				
Transition Document Dates					
Date transition notification Sent (MM/DD/YYYY):	Transition plan initially developed on (MM/DD/YYYY):				
Transition meeting held on (MM/DD/YYYY):	Transition plan updated on (MM/DD/YYYY):				
What is happening now?					
What information and child and family considerations should be s	shared with the team in order to better prepare for transition?				
childhood educator/early learning practitioner's routines and/or activiti	f current status of the child's development and how it impacts on the child/family/caregiver/early ies. In what community programs, activities or early childhood programs does the child currently is there any challenges? How can the child's continued development be supported in the				

Activities/Services Designed to Ensure a Smooth Transition In Early Intervention The plan should include at least the following: Discussions with the parent regarding future support and other matters related to transition; Steps to prepare the toddler/young child for changes based on developmental needs, including activities to help the adjustment to and participation in new settings; Steps to ensure a smooth transition, including sharing of information, and convening a meeting with the family, preschool El program and/or community provider, or school district at least 90 days and up to 9 months prior to the child's 3rd birthday (infant/toddler) or by February 28 of the current program year for preschool El.	Person Responsible	Date To be Completed	Actual Completion Date
Include both the steps to exit the Early Intervention program, as well as the supports identified as needed. Steps to exit the Program can include: Transmission of additional information to another program, if applicable, such as the most recent screening information, evaluation, or assessments. (with parental consent) Gathering child progress measurement information, and reviewing with family			