



New York City Early Intervention Program
Multidisciplinary Evaluation (MDE) Summary Form

Child's Name: EI#: Date of Birth:

SIGNATURE OF PERSON COMPLETING SUMMARY:

I certify that the determination of eligibility and summary of the Multidisciplinary Evaluation are based upon an interview with the above-named child's parent/surrogate parent (or other guardian if there is no available parent), a general assessment of the child's level of functioning in each of the five developmental domains, and an in-depth assessment of the specific domain(s) in which there is a suspected delay.

I further certify that the findings of the MDE team were fully reviewed, integrated and reconciled in the MDE summary written by a member of this MDE team.

Signature Date

Print name, title and license number

Summary of Evaluation

- I. Name, title and disciplines of the persons performing the evaluation
II. The child's health assessment (e.g., recent physical examination report).
- For children eligible based on a diagnosed condition, medical documentation
- Documentation of prescriptions for evaluations, if applicable
- Describe the nature of any delay with obtaining health assessment information from the child's primary care provider, if applicable
III. Summary of Parent Interview and optional Family-directed Assessment
IV. Description of the assessment process and conditions
- If component evaluations are conducted via telehealth, one or more extenuating circumstance is documented, if applicable
V. Measures and/or scores that were used, if any, and an explanation of these
VI. The child's responses and the family's belief about whether the responses were optimal and representative of the child's functioning during daily routines
VII. How informed clinical opinion was used by the evaluation team in assessing the child's developmental status and potential eligibility for the EIP
VIII. The child's developmental status in the five developmental domains, including the unique strengths and needs in each area
IX. A clear statement of whether the child is eligible on delay, eligible on diagnosed condition, or not eligible, with the appropriate ICD-10 code
X. Nature of child and family's transportation needs

If a bilingual evaluation 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  
Multidisciplinary Evaluation (MDE) Summary  
Instructions for Completion**

EIP regulations require that the determination of the developmental domain status and eligibility is based on composite findings of the MDE team and that a member of the team prepares the written summary integrating the results of all evaluations. Any discrepancies between evaluations must be explained. To the extent feasible and within the parent’s preference and consent regarding disclosure to the interpreter, and within confidentiality requirements, this summary should be provided in the dominant language or other mode of communication of the parent. The components of the MDE summary and reports are outlined in 10NYCRR69-4.8(i)(1-4).

**NOTE:** If the evaluation found the child not eligible for Early Intervention services, the evaluation team remains responsible for completing the **MDE Summary**.

- Provide the requested identifying information for the child
- Write the date that the MDE Summary was completed
- *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 a member of the IFSP team.

The Summary of the Multidisciplinary Evaluation is a narrative report containing the following information:

- I. List of the name, title, and discipline of all individuals involved in the evaluation and assessment of the child.
- II. The child’s health assessment, which should include any relevant medical information, such as current health status and medical history, appropriate ICD-10 code for a diagnosed condition with a high probability of resulting in developmental delay, and any other information pertaining to the child’s development. This might include audiological information, vision status, or additional information related to the child’s diagnosed condition. For children who are eligible based on a diagnosed condition, medical documentation **must** be provided. Refer to *Appendix D: Required Documentation for Diagnosed Conditions*.
  - a. Describe the nature of delay with obtaining health assessment information from the child’s primary care provider (if applicable).
  - b. Describe the frequent and persistent attempts made to obtain health assessment information.
  - c. Indicate that prescriptions for PT, OT, nursing and/or clearance for feeding were obtained prior to conducting these evaluations, if applicable.
- III. Summary of Parent Interview and optional Family-directed Assessment:
  - a. Parent Interview: Include information about the family’s resources, priorities and concerns related to the child’s development and developmental progress, including
    - i. How the evaluator determined that the child should have an MDE as

- opposed to a screening
  - ii. How the family’s resources, priorities and concerns shaped the composition of the evaluation team
  - iii. The parent’s perception of the child’s abilities and performance on the date of testing
  - b. If the child is in foster care, the parent interview should include both the biological parent (if rights are not terminated) and foster parent as well as any relevant information from the foster care worker. If there is difficulty reaching the foster care worker, outreach should be made to the education specialist in the foster care agency to obtain the necessary information.
  - c. Optional family-directed assessment:
    - i. Identify formal supports and services available through the EIP or other service delivery systems (e.g., family training, family/parent support groups, services through the Office for People with Developmental Disabilities) that the family may want to access.
    - ii. Identify informal supports and community resources available to the family (e.g., family and friends, playgroups that can assist the family in enhancing their child’s development).
- IV. Description of the assessment process and conditions:
- a. Any other sources of information relevant to the eligibility determination, with parental consent (e.g., medical or educational information, report from relatives or family members, family day care or childcare provider, name of foster care agency).
  - b. How the evaluation team collaborated to determine the child’s developmental level and eligibility status.
  - c. Describe the conditions of the evaluation (required by regulation to ensure the accuracy of the results.) Include the following:
    - i. The style of the evaluation (e.g., arena, individual) and location (in person, telehealth, hybrid).
    - ii. If a telehealth evaluation was conducted, indicate which of the following situations justified it:
      - Parent/family request for telehealth evaluation
      - Child has a complex medical condition, and the family does not want evaluators in their home
      - Family speaks a language for which an in-person bilingual evaluator or interpreter, as appropriate, is not readily available
      - Appropriate evaluators are not available in the region where the evaluation is to be conducted.
        - If component evaluations of the MDE are conducted via telehealth, one or more of the extenuating circumstances must be documented in each evaluation and the summary.
        - Note: Even if the family prefers in-person evaluations but is willing to accept telehealth, this is not a sufficient justification for conducting the evaluation utilizing telehealth. Instead the related evaluation(s) must document one of the acceptable reasons above articulated in the NYS



routines; provide specific individualized information.

- VII. How informed clinical opinion was used by the evaluation team in determining the child’s developmental status, possible diagnosed condition, and potential eligibility for the EIP. *See Appendix C: Informed Clinical Opinion.*
  - a. Ensure that results of procedures and instruments used from all evaluations are integrated to address discrepancies. Describe how discrepancies were resolved and how composite findings accurately reflect the child’s functioning in each developmental domain as well as child’s diagnosis, if applicable.
- VIII. The child’s developmental status in the five developmental domains, including the unique strengths and needs in each area. Developmental domain status must be clearly identified and should correspond to how the data is entered into the EI-Hub.
- IX. A clear statement of the child’s eligibility:

If eligibility criteria are met	If eligibility criteria are not met
<ul style="list-style-type: none"> <li>• A statement documenting that the child is eligible for the EIP based on a diagnosed condition with a high probability of resulting in developmental delay 69-4.1 (j) and associated ICD-10 code; or</li> <li>• A statement of developmental delay consistent with 69-4.1 (i) describing “the child’s developmental status including objective and qualitative criteria in sufficient detail to demonstrate how the child meets the eligibility criteria for the program” and consistent with eligibility criteria in 69-4.23 and associated ICD-10 code for developmental delay</li> </ul>	<p>A statement documenting reasons why the child is not eligible for the EIP. Examples of reasons: the child’s development is within acceptable limits; the child is not experiencing a developmental delay consistent with the NYS DOH’s definition of developmental delay. (NOTE: <i>It is possible for a child to have a developmental delay and not meet the eligibility criteria for the EIP</i>)</p>

- X. Nature of child’s/family’s transportation needs:
  - a. Information includes parents’ ability or inability to provide transportation; the child’s special needs related to transportation; safety issues/ parental concerns related to transportation, etc.