

Early Childhood Early Intervention (ECEI) Referral to Early Childhood Partners

Please use this form to record information about a child aged under seven years with developmental delay or disability who is seeking support through the National Disability Insurance Scheme (NDIS).

What is ECEI?

Early Childhood Early Intervention (ECEI) is funded by the NDIS. ECEI can offer a range of supports for eligible children under seven years.

What is the aim of ECEI?

The aim of ECEI is to provide families and carers with the knowledge, skills and support to optimise their child's development and ability to participate in family, early childhood education and care settings, and in broader community life.

Who can benefit from ECEI?

A child aged who has either:

- under six with developmental delay, including developmental concerns or
- under seven with a disability; and
- lives in Riverina-Murray region of NSW and Loddon, Glouburn and Mallee regions of Victoria.

The Early Childhood Partner's role

- The first contact point for families and carers of children aged under seven years seeking support through the NDIS.
- To determine with families or carers the most appropriate supports that would benefit and achieve outcomes for your child, tailored to their individual needs and circumstances;

The types of supports provided by an Early Childhood Partner may include:

- Information
- Support to connect to mainstream and community services;
- Short term early intervention; or
- Where required, assistance to request access the NDIS.

How to complete and submit this form

This form may be completed by:

- a family or carer, with the assistance of a professional
- a professional working with the family or carer such as a GP, paediatrician

There are three steps to complete and lodge this form:

1. Complete the ECEI referral to Early Childhood Partner form and record parent, carer, guardian or child representative consent.
2. If consent is provided by the parent, carer, guardian, please attach copies of any relevant assessments, reports or letters from health professionals that describe the child's needs in support of this information form where appropriate.
3. Return the completed information form and any attachments to:
 - **Email:** ecei@intereach.com.au
 - **Mail:** PO Box 501, Deniliquin NSW 2710
 - **In person:** Intereach offices are located in Albury, Balranald, Bendigo, Cootamundra, Corowa, Deniliquin, Echuca, Finley, Gisborne, Griffith, Hay, Maryborough, Mildura, Seymour, Shepparton, Swan Hill and Wagga Wagga.

Do you need more information?

- **Online:** Further ECEI information can be found at the NDIS website ([ndis.gov.au](https://www.ndis.gov.au))
- **Phone:** 1300 488 226

ECEI Referral to Early Childhood Partners

Child's details

Child's details required	Please complete all sections below	
Child's full name:		
Date of Birth DD/MM/YYYY:		
Aboriginal or Torres Strait Islander?		
Country of birth:		
Is the child an Australian Citizen?	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
Who does the child live with?		

Family or Carer details

Family or Carer 1 details	Please complete all sections below	
Family or Carer 1 full name:		
Relationship to child?	Parent	<input type="checkbox"/>
	Carer	<input type="checkbox"/>
	Guardian	<input type="checkbox"/>
Home address:		
Contact number:		
Email:		
Preferred contact method:		
Preferred language:		

Family details

Family or Carer 2 details	Please complete all sections below	
Family or Carer 2 full name:		
Relationship to child?	Parent	<input type="checkbox"/>
	Carer	<input type="checkbox"/>
	Guardian	<input type="checkbox"/>
Home address:		
Contact number:		
Email:		
Preferred contact method:		
Preferred language:		

Additional details

Documentation details	Please complete all sections below	
<p>Custody or court orders</p> <p>Is there an existing parenting, custody or guardianship arrangement for the child?</p> <p>If 'yes' please attach them to this form when submitting it.</p>		
<p>Has your child had any assessments or diagnoses?</p> <p>If yes, please provide details or attach reports.</p>		
<p>Is your child undergoing assessment for developmental delay or disability?</p>	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>
<p>Additional information (for example: recent hospitalisation, starting school soon etc.)</p>		

Other services in place or previously accessed

Service 1 details	Please complete all sections below	
Name:		
Profession:		
Contact details (including organisation name):		
Consent: Does the parent, carer or guardian give permission for us, the EC Partner, to contact the above listed professional or service provider and share the child's information to better understand their circumstances?	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>

Service 2 details	Please complete all sections below	
Name:		
Profession:		
Contact details (including organisation name):		
Consent: Does the parent or carer or guardian or give permission for us, the EC Partner, to contact the above listed professional or service provider and share the child's information to better understand their circumstances?	Yes	<input type="checkbox"/>
	No	<input type="checkbox"/>

Current concerns in areas of major life activity

Areas of major life activity	Provide details below or attach any relevant reports.
<p>Self-Care:</p> <p>For example, how they bathe, dress themselves, eat, drink, use the toilet and sleep.</p>	
<p>Receptive and Expressive Language:</p> <p>For example, how they understand words, including through gestures and signs. It's also about how they communicate with you. This could be through facial expressions, gestures or verbal words.</p>	
<p>Cognitive Development:</p> <p>For example, how they understand and remember information, learn new things, practice and use new skills, play with others, develop social and safety skills and problem solve.</p>	
<p>Motor Development:</p> <p>For example, how they move around their home and community such as walking, running and crawling. It could also include information about</p>	

Areas of major life activity	Provide details below or attach any relevant reports.
how they pick up and use their hands to play with different objects.	

Referrer details

Note: Please only complete this section if the referrer is an organisation.

If you are a parent, carer or guardian of the child, please go to [Parent or Carer](#) consent section on the next page.

Referrer details	Please complete all sections below
Date DD/MM/YYYY:	
Organisation making referral:	
Contact Person:	
Phone Number:	
Email Address:	
Office Address:	

Note: The EC Partner may need to contact the professional listed above to better understand the child's circumstances and to ensure that the child is connected to the supports that best meets their needs.

Consent to contact the professional referrer is provided	
Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

Parent or Carer consent

By signing this form	
<ul style="list-style-type: none"> I have read and understood the General Information and the Important Privacy Information provided with this information form. 	<input type="checkbox"/>
<ul style="list-style-type: none"> I understand how my child's personal information will be collected, used and disclosed for the purposes of the NDIS, which is set out below in Privacy Policy. 	<input type="checkbox"/>
<ul style="list-style-type: none"> I have carefully read all of the information provided in the referral form and confirm that it is accurate, complete and up to date. 	<input type="checkbox"/>
<ul style="list-style-type: none"> I consent to Intereach collecting, using and disclosing personal and sensitive information about my child in accordance with the General Information and Important Privacy Information sections in this document. 	<input type="checkbox"/>
<ul style="list-style-type: none"> I understand that I may withdraw consent to receive support from an Early Childhood Partner at any time. 	<input type="checkbox"/>
<ul style="list-style-type: none"> I give permission to contact the professional completing or assisting with this information form (if any). 	<input type="checkbox"/>

Please complete your details on the next page.

Parent or Carer's details		
Signature:		
Name:		
Please tick your relationship to the child:	Parent	<input type="checkbox"/>
	Carer	<input type="checkbox"/>
	Guardian	<input type="checkbox"/>
	Professional referring child If so, please confirm that you have received verbal consent from the child's parent, carer or guardian to make this referral	<input type="checkbox"/> Consent: <input type="checkbox"/>
Date: DD/MM/YYYY		

Privacy Policy

Collection and use of personal information

Intereach primarily collects information about the people we work with for the purpose of conducting our usual activities and operations, including developing and delivering services, evaluating outcomes and conducting research.

We understand that personal and sensitive information must be collected:

With the prior knowledge and consent of the person (or their legal representative);

- In a fair, non-intrusive and lawful way;
- Only if necessary for the function of the service or organisation;
- Without intrusion into areas of a person's life that are irrelevant to the services provided;
- Directly from the person, where practical and appropriate, rather than a third party;
- After informing the person why the information is being collected and how it will be used; and
- In an environment where confidentiality can be maintained.

We may collect information about you in a number of circumstances, including when you:

- Consent to engage with us in a service, activity or event;
- Consent for another organisation or individual to send us information about yourself;
- Provide feedback or request information from us;
- Send us an email or complete an online form on our website;
- Apply for a job or volunteer position;
- Make a donation; or
- Join a mailing or contact list.

The personal information we collect will never be used for marketing purposes or to send unsolicited email, unless you have given express permission for this at time of collection.

When interacting with us, you can choose to be anonymous or use a pseudonym except where this is impracticable in the delivery of service or where identification is required by law.

Disclosure of personal information

We disclose personal information with third parties, for example government agencies and other service providers, only with the consent of the person (or their legal representative) and where necessary for the effective provision of service and/or as required by regulation, contract or legislation.

We will always try to obtain consent before disclosing information to a third party but we are permitted to share information with government agencies and non-government organisations without your consent if:

There are concerns about the safety, welfare and wellbeing of children and young people including allegations against an employee, volunteer or Family Day Care educator of sexual offence or misconduct to, or in the presence of, a child; or

It is essential to lessen or prevent a serious threat to the life, health or safety of any person, or to public health or safety, or to take appropriate action in relation to suspected unlawful activity or serious misconduct.

We will seek consent before we take photographs and recordings of individuals using or participating in our services, programs or facilities and before publishing information that identifies an individual in any printed, electronic, video or audio publication.

In order to ensure that any third party agencies who have access to your personal information abide by the Australian Privacy Principles, your personal information will not be shared directly or indirectly by us with any agency based outside of Australia.

Accessing and correcting your information

You have the right to access the information we hold about yourself and we will take all reasonable steps to correct personal information if it is found to be inaccurate, incomplete, misleading or not current. You can do this by contacting the Quality team using the details below and providing identification.

Personal information will only be withheld by us in exceptional circumstances, for example if we are authorised to refuse access under state or federal law or if access would undermine the privacy of another person.

Keeping your information secure

Your personal information is kept in a manner that reasonably protects it from misuse and loss and from unauthorised access, modification or disclosure. This includes keeping hard copy information in locked cabinets with restricted access and using security controls for electronic information that include authorised access, user authentication, email filtering, encryption, firewalls, virus protection and regular data back-up.