



## Referral Guidelines for Early Intervention Program

### How to Refer?

Contact: Beverley Davis, Intake Coordinator

- Phone: 416-935-0200 x 246
- Email: [bdavis@cicc.on.ca](mailto:bdavis@cicc.on.ca)
- Fax: 416-935-0300 – referral forms can be faxed

### Who Can Refer?

- Parents/caregivers, health care providers, or those working with young children who have developmental concerns
- Parents must give consent if others refer on their behalf

### What Area Do We Serve?

- North York, Etobicoke, East York, Scarborough and downtown Toronto

### What is the Age Range?

- Birth to five years

### Who is Eligible? *Child must exhibit delay in 2 or more areas of development related to:*

**Established risk** such as:

- Genetic and chromosomal syndromes ( e.g. Down syndrome)
- Neurological disorders ( e.g. seizures disorder, cerebral palsy)
- Metabolic disorders (e.g. PKU)
- Congenital malformation (e.g. microcephaly, hydrocephalus)
- Children who have early developmental delays without a medical diagnosis

**Biological Risk** such as a history of prenatal, perinatal, or early developmental events which increase the probability of developmental problems, such as:

- Pre or perinatal complications (e.g. small for gestational age, birth hypoxia)
- Prematurity
- Early developmental delays
- Sensory impairments such as blindness or deafness in association with other developmental delays
- Substance use during pregnancy (Mothercraft or a similar agency should also be involved if the baby is living with the birth mother)
- Asphyxia, Seizures, Intra Ventricular Hemorrhage

**Please note: If a child is in another program such as daycare or school, then he/she is not eligible for service**