



WV Birth to Three Transition Summary Update

The purpose of this Transition Summary Update is to provide current and accurate information regarding this child’s functional abilities, across all developmental domains, to assist potential receiving agencies in planning for appropriate supports and services in other settings. The Individualized Family Service Plan (IFSP) team members should come prepared to complete this form as part of the face-to-face transition planning meeting activities. The team will complete one form – with copies to be distributed to all those in attendance.

Child Name: Last _____ First _____ Middle _____

DOB _____ (MM/DD/YY) Date Completed _____

Parent(s) Name(s) _____ / _____

Address _____

Telephone Number _____ County _____

Please describe the child’s functional abilities within the following developmental areas, including whether these abilities are present across various activities and settings. Include progress over the past six months as well as any new or emerging skills, and indicate if this is a critical time for skill acquisition:

Communication (Expressive and Receptive) _____

Motor Development _____

Social/Emotional _____

Cognitive _____

Adaptive _____

Department of Health and Human Resources
Bureau for Public Health
Office of Maternal, Child and Family Health
WV BIRTH TO THREE

Does the child currently have vision or hearing concerns? If so, describe.

How does the child respond to new people/settings? What helps him/her be comfortable in new settings?

How does the child communicate his/her needs? _____

Does the child have any specific behaviors that are interfering with his/her learning? _____

Does the child have an established medical diagnosis? If so, please describe how it is affecting his/her development/learning. _____

Has the child experienced any hospitalizations recently, or are hospitalizations scheduled? If the child has been hospitalized, how has that effected his/her development? _____

If the child has had any recent hospitalizations, or otherwise didn't receive services for a period of time, did the child experience a set back in his/her development? _____

Are there any special circumstances at this time that are important to consider as planning occurs for this child's transition from WV Birth to Three? _____

Discuss assistive technology currently provided through WV Birth to Three to determine whether the equipment and/or devices are appropriate for the child's continued use in the home and/or school setting. Provide the family with information about how to return equipment/devices to the WV Birth to Three System when the child has outgrown or no longer needs the equipment, including the address and phone contact for the WV Birth to Three State office.
