



NON DELIVERY OF EI SERVICES

DATE SC NOTIFIED: _____

TO: _____
Name of Ongoing Service Coordinator

FROM: _____/Up Wee Grow
Provider

CHILD'S NAME: _____ EI Number: _____
Type of Service: _____

Late Start Date: Services must begin within 14 days of the service authorization start date. If services have not started within 14 days, this must be faxed to UWG services department .

This is to notify you of the following gap in services:

- Service did not begin; therapist cannot schedule with family
 Service which began more than 14 days after the authorization date

Anticipated Start Date: _____

Reason for Delay: _____

Scheduled Absence: Provider must notify family and SC of anticipated absences at least 5 days prior to the cancelled session. This notification must be faxed to UWG services department. Parents cannot await therapist return for absences of longer than 3 weeks)

Scheduled Absence Dates: _____

Date Parent Notified: _____ Date Service will resume: _____

Parent wishes to:

- Await Therapist Return (makeups can be provided within 14 days of missed session)
 Have a replacement (agency will attempt to assign a replacement

Notifications of Non Delivery of Services

- Gap in service of more than 14 days
 Three or more consecutive absences

The above named child has missed services from: _____ to _____.

Reason:

- child sick child sleeping
 child vacation family not responding to calls
 therapist sick/vacation waiting for RX
 OTHER: (specify)