

Preschool Special Education Working Group Report
DRAFT 12/19/19 as of 11:30 a.m.

Introduction

Need verbiage about this report and the working group

Overview of the Individuals with Disabilities Act (IDEA) IDEA

The Individuals with Disabilities Education Act (reauthorized in 2004) provides funding for systems to support infants, toddlers, children and youth with disabilities and their families. There are specific legislative requirements about how IDEA systems are managed and monitored.

Overview of Part B/619

Part B provides funding for children and youth with disabilities ages 3-21 that qualify for special education supports and services. Preschool special education is part of this larger system. School districts (Local Education Agencies/LEAs) are responsible to provide special education and related services for children and youth ages 3-21 who qualify under the IDEA. Preschool is part of a system of special education and LEAs are required to implement supports and services specified under the IDEA.

In CT LEAs provide services to children and youth preK-grade 12 and sometimes through 21 years of age. Once a child with special needs qualifies under the IDEA they receive services that are part of the vertical continuum of services offered by the LEA. Children and youth identified as needing special education are required to have their eligibility redetermined through a comprehensive re-evaluation every three years. The CT State Department of Education (CSDE) is the agency of cognizance for the IDEA Part B.

LEAs apply for IDEA grant funds and special education preschool is one part of the larger IDEA grant. The IDEA is thought of as a large umbrella for all special education services provided by the LEA. Preschool special education is required to follow the same laws as other parts IDEA Part B. LEAs are required to provide a free and appropriate public education (FAPE) in the least restrictive environment (LRE). The LEA is required, through the planning and placement team (PPT) process, to develop an Individual Education Program (IEP) to allow 3-21 year-olds to have FAPE in the LRE. Under the IDEA, LEAs are required to provide a continuum of services for children and youth. This continuum ranges from the most restrictive placements (e.g. out of district, separate special education classroom) to full-time placement in a general education classroom with appropriate supports and services. The PPT is required to always consider placement in a general education setting with appropriate supports and services before considering a more restrictive environment. It should be noted that preschool is not a required grade and LEAs may choose to develop preK programs and/or provide specialized instruction in community-based preK programs if general education is the child's LRE determined by the PPT. IDEA Part b preschool special education is part of the 3-21 special education system and is focused on 3-5 year olds. It should be noted that 5 year olds are included in the preschool part of Part b because 5 year olds were not offered K in some states when the law was drafted. Some children that are in 619 part b (preschool special education) count are in K and occasionally in grade 1. IDEA funds can only go to LEAs for the excess cost of educating students with disabilities. Preschool special education is not a

program, it is a funding source. It is supplementary funds for the implementation of IDEA by the state education agency (CSDE) which in turn funds LEAs.

Overview of Part C

Part C of the IDEA provides funding to build systems of support for families with infants and toddlers aged birth to three with developmental delays and disabilities. As determined by a national task force, the mission of Part C is to assist families and caregivers to enhance children's learning and development through everyday learning opportunities. With fundamental principles which include

- infants and toddlers learn best through daily experience and interactions with familiar people;
- all families, with the necessary supports and resources, can enhance their children's learning and development;
- the primary role of a service provider in early intervention is to work with and support family members and caregivers in their children's lives;
- the early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child's and family members preferences, learning styles and cultural beliefs;
- IFSP outcomes must be functional and based on the family's priorities;
- the family's needs and interest are address most appropriately by a primary provider who represents and receives team and community support;
- interventionists with young children and family members must be based on explicit principles, validates practices;
- best available research;
- and relevant laws and regulations.

In Connecticut early intervention provides supports to families who have infants and toddlers who have a diagnosed condition that has a high likelihood of developmental delay or who are developmentally delayed. Eligibility for development delay is two standard deviation delay in one of five areas of development including cognitive, communication, social /emotional, physical, and adaptive, or one and a half standard deviation delay in two of the five areas. Supports will typically occur in a natural learning environment for the family and child, such as the home or another community setting. This approach bolsters the natural learning that occurs throughout the day and equips the parents with the resources to handle their children's ever-changing development.

Fully implemented in 1993, the system has been administered under three lead agencies and in 2016, the Office of Early Childhood became the lead agency. In late 2017, the provider payment system was changed from a monthly rate per enrolled child to a fee-for-service rate system paid in 15-minute increments. Payments are made by a Central Billing Office as well as from the state Medicaid agency. There are currently 32 contracted Early Intervention Service (EIS) programs operated by 28 parent agencies. All are comprehensive in nature and must provide whatever those children and families need early intervention services.

The Birth to Three program contracts have been re-bid and the composition of the provider network will change effective July 2020. The numbers of infants and young children receiving either EIS continues to grow.

On any given day total autism DHH, cumulative during a FY, birth cohort % of census.

Over the course of the 3 three years for any one "grade" or birth cohort X% of children receive some EIS.

Programmatically, the Birth to Three System in Connecticut implements evidence-based practices, including building the capacity in parents using a primary service provider approach to teaming. This means that every family has a full team supporting a natural learning environment but one interventionist functions as the family's primary support. As described by Rush and Shelden (2013), primary service providers include:

- established teams from multiple disciplines
- regular team meetings, the use of coaching as an interaction style with parents,
- supporting parents in their child's learnings by providing adequate community resources,
- and all supports occurring within the natural learning environment for the family.

Natural learning environment practices (NLE): Natural environments are more than places where children live, learn, and play. Natural learning environment practices start with looking at the activities children participate in during their everyday life at home and in the community. These everyday activities provide learning opportunities which, in turn, lead to increased participation and skill development for the child. Researchers in the field of early childhood have identified that children learn best when they are participating in these naturally occurring learning opportunities that are a part of everyday routines and activities within the real life of their families and other children they know. Routine activities that occur in the home include playing with toys, eating, reading, folding laundry, etcetera. Community routines include playing at parks, attending festivals, participating in neighborhood playgroups etcetera.

Coaching: Continuous efforts are made to ensure the workforce in Birth to Three is highly qualified and using evidence-based practices. Evidence-based practices include supporting and coaching families in order to address their priorities as they support their child during everyday activities.

During FY18 major accomplishments include:

- completion of year 5 of a 6 year intensive training program with national experts focusing on coaching and natural learning practices,
- increased number and fidelity of early interventionists trained as family coaches and master coaches,
- national fidelity coach certification underway for lead agency staff person,
- developed and piloted a quality self-assessment where individual staff rate their own strengths and challenges in best practice,
- provided support for staff in expanding their knowledge through a year-long course of study in conjunction with the UConn Center for Excellence in Developmental Disabilities,
- developed mandatory online trainings for all staff new to Birth to Three,
- revised trainings to a blended approach - both in-person and online, to meet the needs of a changing workforce.

Overall, the coaching style of interaction is based on adult learning principles. It is a way of interacting with parents, caregivers, and other team members. The coaching model fosters problem solving and action planning. The role of the Early Intervention coach is to "identify the parent's priorities for their child's development, determine what they already know and are doing in relation to their child's development, share new information and ideas, and then work together to support the child's participation and expression of interest within everyday activity settings to provide opportunities for learning. (Rush & Shelden, 2011). With key elements including capacity building, nondirective, goal oriented, solution focused, reflective, and as hands on as it needs to be.

IFSP: Individual Family Service Plan (IFSP) is an agreement between the caregiver and the Birth to Three program providing early intervention services and supports. The caregiver and the team (at least two individuals from separate disciplines one of whom must be your service coordinator) will check the IFSP at least every six months or as needed to make sure it still fits the family's priorities and child's needs.

The IFSP includes daily activities. Babies, toddlers, and preschoolers learn best through everyday experiences and activities like play, mealtime, bath time, and outings. By talking about the times of day or routines the team will be able to identify the areas that may be hard for the family and child as well as what is working well.

Additionally, the IFSP includes outcomes are the changes the family wants to work toward for their child.

Family Cost Participation (FCP): Family cost participation fees were introduced in 2003. Through this EIS programs with billing commercial insurance and Medicaid and to help the OEC manage the billing and collection of Family Cost Participation (FCP) fees. During 2013 family fees had increased.

If a family's annual income is \$45,000 or more they will be responsible for a monthly fee. This monthly fee is in addition to any money your insurance, state and federal monies may pay for their Birth to Three services. State and federal funds cover the bulk of early intervention services, (approximately 80%). Health insurance and the family fee cover the remaining 20%.

Similarities and Differences Part B and C

Preschool special education's focus is on the child's education, the same as the rest of the part B system. Part C, early intervention, is focused on supporting families. The State Systemic Improvement Plan for Part C refers to the state-identified measurable result as "As a result as result of Early Intervention families will be better able to talk about their child's abilities and challenges". There are differences in the eligibility for Part C and Part B, as well as individual plans with a differing foci. The families of infants and toddlers eligible for IDEA Part C services have an Individual Family Service Plan (IFSP) while children eligible for IDEA Part B services have an Individualized Education Program (IEP) developed for the child or youth. The requirements for an IEP under IDEA are substantially similar from age 3 to age 21 (with some differences in data collection and transition planning for youth).

One of the differences between Part C and Part B is the lead agency. The lead agency for Part C is the CT Office of Early Childhood which administers the CT Birth to Three Early Intervention program for infants and toddlers. For Part B the lead agency is the CT state Department of Education, which administers special education for children and youth ages 3-21. Part B and Part C have similar evaluation procedures as both require parental permission (consent) before an evaluation can take place and both have specific timelines for referral and evaluations that must be adhered to.

There are also differences between Part B and Part C eligibility criteria. For Part B a child or youth must be identified in one of the 13 federally recognized disability categories (Autism Spectrum Disorder, Cognitive Disability, Deaf-Blindness, Developmental Delay¹, Emotional Disability, Hearing Impairment, Multiple Disabilities, Orthopedic Impairment, Other Health Impairment, Specific Learning Disability, Speech-Language Impairment, Traumatic Brain Injury, or Visual Impairment. Additionally, Part C is responsible for the creation of an Individual Family Service Plan (IFSP) focused on the supports a family needs to help them enhance the development of their child. Part B is responsible for the creation of an

Individualized Education Program (IEP) that is a program reasonably designed to provide a child or youth with specialized instruction and related services in order for them to make effective educational progress. Part B and Part C share responsibilities for the transition of children between the two systems. The transition between the two systems can present a challenge for families as they learn about the differences between the two systems. Part C and Part B have joint policies and procedures to assist with this transition. This includes a transition conference convened by the Part C provider that Part B is required to be a participant. The transition conference occurs at least 90 days prior to a child turning three. Part B is required to hold both a referral PPT (PPT1) and an eligibility PPT (PPT2). If the child is determined, through the PPT process using the results of a comprehensive evaluation, to have a disability and to require specialized instruction an IEP is developed and implemented on or before the child's third birthday.

Currently children must exit Part C at age three. The average length of enrollment 11 months and the average age of referral is 18 months. **What other data should we include?**

Exit DATA Part C and B

Part C 7/1/18-6/30/19 (equity and outcomes)

Part B 10/1/17-9/30/18

Transitions Outcomes

As a foundational matter, the workgroup observes that early educational supports can make a lifetime of difference for children. Experts have found that when properly executed, early educational intervention “can work a miracle, [allowing an estimated] 75-80% of the disabled children [to enter kindergarten] alongside every other ... five-year-old—without needing further supplemental special education.”¹ **Footnotes, references?** These positive outcomes substantially advance the [Individual with Disabilities Education Act]’s primary goal: ‘to ensure that all children with disabilities have available to them a free appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment, and independent living.’²

To assist with continuity of service delivery for children exiting Birth to Three and to ensure that children receive the educational and developmental services to which they may be legally entitled, the workgroup recommends that the state expand its outcome tracking to include data regarding transition outcomes for children. Such tracking could include collection and analysis of data, disaggregated by district, Birth to Three catchment area, race, gender and ethnicity regarding:

1. The number and percentage of children transitioning from Birth to Three services who are found eligible for special education services and for such children:
 - a. The duration, frequency and nature (special education/regular education) of services provided;
 - b. The provision of related services, inclusive of parental training;
 - c. The location of service delivery, e.g., in a district-run or privately-run educational/child care center or other;
 - d. Percentage of service delivery time that the child will be receiving services with non-disabled peers;
 - e. The primary disability identified by the Planning and Placement Team for educational service delivery purposes;

¹ DL v. District of Columbia, 845 F. Supp. 2d 1, 5 (D.D.C. 2011) (internal quotations omitted).

² Id. citing 20 U.S.C. § 1400(d)(1)(A) (holding the District of Columbia responsible for identifying and providing appropriate special education services to preschool age children with disabilities and developmental delays).

- f. Whether the child is found eligible for Extended School Year Services, if applicable, and the frequency and duration of such ESY services.
 - g. Whether the child is otherwise enrolled in a licensed child care or early education setting.
2. The number and percentage of children transitioning from Birth to Three services who are found not eligible by the Planning and Placement Team for special education services and for such children:
 - a. What other services the child and family were referred to;
 - b. Whether connection to another service for the child and family was made and if so, to what service;
 - c. If no referrals or connections were made, what the reason for was for the lack of referral/connection (e.g., family declined, family not available, service not available)
 - d. Whether the child is enrolled in a licensed child care or early education setting.

Anything about payer/Medicaid eligibility? Do we want data disaggregated by this as well?

Anything about developmental screening info at discharge: OEC has this already. How many, percentage of children at discharge who remained more than 1, more than 2 standard deviations away from the mean in a core area of development within 3 months of discharge/transition?

The Workgroup finds that such data collection is essential to assist with identifying areas of unmet needs for children and to identify and assist school districts that may struggle to build capacity to support children with varying disabilities.

Children Exiting Birth to Three *Not Eligible* for an Individualized Education Plan in a Pre-K setting:

General Information on the process for children exiting Birth to Three who are *not* eligible for an Individualized Education Plan (IEP) is derived from the Connecticut Birth to Three Guidelines. The sections included below are relevant to the child who is found *not* eligible:

Connecticut Guidelines indicate the following:

There are four categories at exit when children reach age three:

1. Part B eligible [the Local Education Agency (LEA) determined that the child was eligible]
2. Not eligible for Part B, exit to other programs [the LEA determined that the child was not eligible AND the Birth to Three program has referred the family to another preschool program or service.]
3. Not eligible for Part B, exit with no referral [the LEA determined that the child was not eligible AND the Birth to Three program has not formally referred the family to any other preschool program or service.]
4. Part B eligibility not determined [the child reached age 3 without the LEA determining eligibility for any reason including those times when the family elected not to include the LEA in transition planning]

There are children who exit their Birth to Three program before the age of 3, as these are voluntary services. If a parent is interested in learning more about their district's early childhood special education and related services, they may choose to contact their district directly or they may choose to have their service coordinator release information to their district (LEA).

Transition Plans for all children:

According to IDEA Part C regulations, the IFSP must include the steps and services to be taken to support the smooth transition of the child from part C services, to early childhood special education under Part B of the IDEA, to the extent that those services are appropriate or other appropriate services. This section must include:

- Discussions with, and training of, parents, as appropriate, regarding future placements and other matters related to the child's transition;
- Procedures to prepare the child for changes in service delivery, including steps to help the child adjust to, and function in, a new setting;
- Confirmation that Child Find information about the child has been transmitted to the LEA or other relevant agency, including information needed by the LEA to ensure continuity of services from the Part C program to the Part B program, such as a copy of the most recent evaluation and assessments of the child and the family and the most recent IFSP developed (with written parent permission);
- Identification of transition services and other activities that the IFSP Team determines are necessary to support the transition of the child.

In Connecticut, the statewide IFSP form includes a section to record a transition plan. This section explores the many possible outcomes that could be important for a family.

Eligibility Determination for Special Education and Related Services

The school district must complete a comprehensive evaluation of the child in the developmental area(s) of concern. To do this, a school district may choose to use current information from the Birth to Three

program to determine a child's eligibility, or they may choose to have their own personnel evaluate and assess the child to determine eligibility, or they may do a combination of these options. Ultimately, it is the responsibility of the district public school staff to gather the necessary information, as it is the child's Planning and Placement Team that will make the determination of the child's eligibility.

Role of the Service Coordinator or Provider at the Planning and Placement Team Meeting

Per IDEA, with parent permission, the Birth to Three Service Coordinator or other staff member must be invited to attend the Planning and Placement Team meeting. The eligibility decision and the development and implementation of the IEP belong to the Planning and Placement Team (PPT) with participation of the child's parents. IDEA requires the PPT to consider the child's IFSP when developing the IEP, but it does not require that the IFSP be mirrored in the IEP.

The role of the service coordinator prior to and during the meeting, should be to support the competence in the parent's ability to describe their child's abilities and challenges, as well as potential strategies to support their learning.

The following sections relate to questions posed by the Birth to Three Legislative Workgroup and information is derived from various RESC Birth to Three Providers as well as reviewing research:

What is Currently Available to Families whose children are exiting Birth to the Three services and are *not* eligible for special education services?

For those families whose child was not found eligible for special education services, there are currently few community-based options. Towns may have private nursery schools that are fee based, a Headstart program, In-district Pre-K programs (which often have limited seats available), and Magnet school pre-k programs.

There are not consistent or equitable options across the state, as the decision for pre k services depends on the town where the family resides. For towns, there are numerous factors that impact the decision of what is offered, including whether or not the town is eligible for school readiness funds. Some towns will have multiple options including Headstart and private nursery schools; however, both of these options require the parent to transport the child to the program.

For many families, even if a program exists, there is not transportation available and this remains a barrier to access the program.

In Connecticut, the statewide IFSP form includes a section to record a transition plan. This section explores the many possible outcomes that could be important for a family, including the family's transition out of Birth to Three. Every initial and annual IFSP must contain at least one family outcome that addresses a plan for transitioning when Birth to Three supports end. Family outcomes can include a variety of experiences or concerns that affect the whole family. (For instance, learning how to explain their child's diagnosis, exploring food or housing assistance, finding childcare, moving to another town or state...)"

Options for Building Local Resource Capacity

The current systems that support children's transition from Birth to Three vary by town.

There are districts who have created Pre-school liaisons in order to support the bridge from pre-school programs to the public school. The Liaison role varies in towns and is not a universal support, but responsibilities shared include: Visiting the community-based programs to learn about students and their needs, supporting and sharing professional learning, sharing resources, liaising with families. This collaborative role has served to bridge the transition from community based programs to the public school, as well as create a collective sense of community which includes our youngest learners.

Through work supported by the State Department of Education at a statewide conference this year, there are currently only 7 districts across the State who have created this type of liaison in their community.

In collecting information for this report, we heard of one district who developed a Scientific Research Based Intervention model for how to help the B-3 child transition to public school that included a menu of interventions, and a system to monitor the impact of the interventions.

For students found *not* eligible, how could these children be monitored?

Any information received by a Birth to Three program, using the Authorization to Obtain Information Form 3-2, becomes part of a child's early intervention record. This information may have originated from Birth to Three provider or a provider outside of the Birth to Three system and may only be released with the parent's written permission. Future written updates of the child's progress or IFSP should be sent to the school district with parent permission (using Form 3-3) to keep the school district's preschool team current with the child's developmental status.

Based on the current guidelines, the parent is the determinant if information is shared with the pre-school team prior to the child enrolling or during the child's programming. The IFSP that is developed for that child, is only part of the transition process if the parent gives permission to share that their child had an IFSP. By not providing this information, the community based program may start at a deficit with regard to understanding the needs of the child.

The transition plan, as documented in the IFSP, should include connecting the family with resources outside of the Birth to Three System and an offer to connect the family with the Ages and Stages Questionnaire (ASQ) process available through the Child Development Infoline (CDI) for children up to age five. However, this is an entirely voluntary process.

For transition teams that meet and determine a child is not eligible for special education services; there is often a gap in services. This appears to be caused by multiple factors as information does not seem to consistently follow the child after this process has occurred, as it often is reliant on what information the parent shares.

ECE Provider Screening:

In reviewing the current assessments utilized, there appears to be variability in how the standard scores are viewed with regard to eligibility. In some instances, the district standards are very strict and a child is found not eligible because one score is too high, even if the child would meet criteria if the child was one month younger. Variability exists as there is not consistency in looking at results. Some districts take developmental and chronological age into consideration, as well as the level of service provided to date when determining eligibility and others are strict and only determine eligibility based the actual score. Therefore, a review of the eligibility process may warrant further review.

There are currently districts offering a period of trial (i.e. 8 weeks) in district pre-k program as part of an assessment to aid in determining if a child requires the special education services. There are benefits and challenges to this model. For those students who do qualify, the child seamlessly continues to receive supports; however, for those students who do not qualify the child may then have to transition out of the district program.

Local Resource Packets

In reviewing with current Birth the Three providers, there was a strong message that families need a service coordinator who can provide very clear information to families about what steps they should take if their child begins to struggle after being found not eligible and how to re-refer their child to special education. This information should include the specific contact in the district and articulate the process in multiple languages.

Currently, Birth to Three providers have several resources that they share with parents and include the following:

- Positive Parenting Group run by DCF
- Nutritional Resources
- Outpatient Therapy Providers: Speech, PT, OT
- Community Mental Health Agencies
- Public Library programs
- Family resource centers with play groups

Policy and Practice Considerations:

One consideration would be for students not found eligible that it is a requirement that ASQ is completed for children who are found not eligible for special education.

It may be warranted that the districts who have developed Birth to Three Liaison positions share more about this role and the impact this is having on children transitions from Birth to Three as well as the logistics and supports necessary for the success and challenges.

Currently school Districts look at the B-3 child as initial referral when considering them for eligibility under the Free and Appropriate Public Education (FAPE) standard. As the Birth to Three services, outlined by the IFSP, are driven by outcomes and progress is being monitored, districts could view Birth the Three services as part of the referral to special education process and therefore have reason to monitor students in a pre-referral process. There are specific timelines related to the provision of FAPE and assessment for special education that would need to be adjusted to allow this process to occur over a longer period of time. If Birth to Three was considered part of formal pre-referral process, the required documentation for this process (IFSP/Transition Plan) would have the requirement of the record being maintained and follow the student.

Children may receive Birth to Three services on-site in a community child care program, but when they transition to public pre-school without special education services, they are not eligible for these types of specialized supports. This may result in a child experiencing a very different level of support. It would require more monitoring of these students to determine the outcome with regard to these students being referred to special education after being found initially in-eligible. Therefore, it may require an analysis of what is currently in place to monitor these students to determine how this shift in services impacts the need for specialized instruction for each child. Based on this analysis, recommendations could be made.

Children who remain in a community child care program may have more monitoring of level(s) of service. It warrants a review of systems in such programs to determine how these services are monitored and how this continued provision of support may impact the need to re-refer a child to special education or to understand how these services are determined to be necessary.

Lastly, there are children who are not eligible after Birth to Three who may not be able to be maintained in the community program because prior services were supporting the student and now those services are not available to the student and the child needs to be re-referred to special education.

Children Exiting Birth to Three with an IEP Who Turn 3 in Late Spring or Summer Months

General Information on the Transition process

Families of children who are eligible for Birth to Three services can remain enrolled until the age of three or until their child reaches age appropriate milestones. As families leave the Birth to Three system, they participate in a series of activities designed to plan for their transition. Each family enrolled in the Birth to Three system is assigned a service coordinator. One of the roles of the service coordinator is to assist the family with navigating the transition process. Each family enrolled in the Birth to Three system has an Individualized Family Service Plan (IFSP). This plan includes the steps and services needed to support a smooth transition. This process starts six months prior to the child turning three. Children who are enrolled in the Birth to Three system after the age of 2 ½ are considered to be potentially eligible for early childhood special education. As part of the transition, a referral is made to the Local Education Agency (LEA or school district) to determine if the child is eligible for early childhood special education and related services no later than their third birthday. The parent (s) must agree to refer the child to the school district to determine eligibility for early childhood special education.

Children in the Birth to Three system fall into one of the following four categories upon their third birthday:

- 1) The LEA has determined the child is eligible for early childhood special education services. An Individualized Education Program (IEP) is developed and implemented on or before the child's third birthday.
- 2) The LEA has determined the child is not eligible for early childhood special education services according to state and federal eligibility criteria. The Birth to Three program has referred the family to another preschool program or service.
- 3) The LEA has determined the child is not eligible for early childhood special education services according to state and federal eligibility criteria. The family is not formally referred to any other preschool program or service.
- 4) The LEA did not determine the child was eligible for early childhood special education services because the family elected not to provide permission for a referral for an evaluation to determine eligibility for early childhood special education.

The transition process can be a very stressful one for families of young children. Some of the challenges identified by families and service providers include:

- Differences in eligibility criteria for the Birth to Three System and early childhood special education;
- Concerns by families to have their young child identified by the school district early in their educational career;
- Difficulty for some families, particularly non-English speaking families, in understanding the system and educational jargon;
- The overwhelming nature of the Planning and Placement Team (PPT) process which at times may include large teams of educational specialists;
- Concerns by families over the change in the focus of service delivery upon age three from a focus on the family and child to a focus solely on the child's educational needs;
- Concerns by families over having a young child receive services in the school setting rather than in the home or familiar early childhood setting;
- Concerns by families over having a young child transported by the school district from home to school; and
- Potential disruption in current early childhood program arrangements (childcare) to accommodate a school schedule for part of the day.

Children who Turn Three in Late Spring or Summer Months

One additional complication to the transition process includes the process used for children who turn three later in the school year (May, June) or over the summer. The Birth to Three system operates twelve months a year. School district services occur during the school year, with some children with disabilities qualifying for additional extended school year services (ESY) which may occur over the summer. This determination is made on a case-by-case basis by the PPT and based on the individualized needs of the child. For children who have birthdays within this period, the district first determines eligibility for early childhood special education services and then determines if the child is eligible for ESY services. This creates two potential problems. The first is the child may start in a school program in May or June. The school year will end and the child will attend an ESY program that may run for 4-6 weeks over the summer. There typically is a break between the end of the school year and the start of the ESY program. Then, there is another break in service at the end of the ESY program prior to the start of the new school year. Therefore, there may be little continuity of service from May to late August.

The second problem is that often the staff of the ESY program is different from the staff working with children during the school year. In addition, the location of the program or services that take place over the summer often occur in a different location in the district. This sets up a myriad of challenges for young children and their families navigating multiple transitions.

Policy and Practice Considerations

One potential solution to this problem is to allow families who have children turning three in the months from May to August to remain in their current Birth to Three program until the start of the following school year. This would provide uninterrupted services for the child and family. For children who are eligible for early childhood special education, this would allow for one transition into the school program at the beginning of the school year. For children who are not eligible for early childhood special education, this would provide some continuity of services throughout the summer, when more options for early childhood programs within or outside of the district may be available at the start of the new school year. The goal would be to eliminate multiple unnecessary transitions over such a short period and provide continuity of services for all children. Worth noting is that school districts currently have the option of paying the current Birth to Three program to continue to provide services during the late school year or summer months once the child turns three. However, this is not a requirement and an option that is only occasionally used.

Policy Considerations for Committee:

This is written to apply to both children eligible for early childhood special education, and those not eligible for early childhood special education as discussed at our committee meeting.

We need to determine if this recommendation is for:

- 1) Children eligible for early childhood special education and extended school year services;
- 2) All children eligible for early childhood special education even if not eligible for extended school year services; or
- 3) All children enrolled in Birth to Three regardless of eligibility for early childhood special education because many general early childhood programs will not have openings until fall.

Additional policy considerations:

We need to decide if the recommendation is a parent choice, or we determine it happens for all children with late spring/summer birthdays.

We need to determine if we can require districts to pay for staying in Birth to Three if the child is eligible for early childhood special education and extended school year services (since they are responsible for FAPE at 3).

We need to determine the impact this has for children who currently have parent fees attached. We cannot charge parents for services after the age of three.

Cost Considerations –Alice reworking with increased # of children in B23

Birth to Five Early Childhood Intervention System

**Information provided in kind from CT School Finance Project in August of 2019.
Now known as the School and State Finance Project (<http://schoolstatefinance.org/>)**

Proposed Concept:

Connecticut Birth to Three Expansion to Birth - 5

Preliminary Analysis

The purpose of this document is to provide a preliminary analysis of the contemplated expansion of Connecticut's Birth to Three program to children in preschool. Please note that this document is introductory in nature and is intended for discussion purposes only. Per the discussion with stakeholders on July 8, this document contains three sections, each detailed below.

1. **Cost Analysis of a Connecticut Birth to Three Expansion:** The purpose of this section is to describe the data items necessary to conduct a cost analysis of a proposed expansion of Connecticut's Birth to Three program to children five years of age.
2. **Currently Available Data on IDEA Preschools:** The purpose of this section is to provide initial findings of the currently available data on IDEA preschool in Connecticut.
3. **Maryland's Extended Individual Family Service Plan Option (Birth to 5):** The purpose of this section is to provide an overview of a comparison state's (Maryland) birth to 5-expansion program, the Extended Individual Family Service Plan Option.

1. Cost Analysis of the Connecticut Birth to Three Expansion

The purpose of this section is to describe the data items necessary to conduct a cost analysis of a proposed expansion of Connecticut's Birth to Three program to children five years of age.

Context: Birth to Three Funding Sources

In Connecticut, the Birth to Three program is currently funded through federal funding, state funding, family fees, private insurance, and Medicaid.¹ The bulk of the funding comes from the State of Connecticut and Medicaid.¹ Connecticut Office of Early Childhood. (2017).

Connecticut Birth to Three System – FY 17 Annual Data Report. Retrieved from:
<https://www.birth23.org/wp-content/uploads/AboutB23/FY17-Annual-FINAL.pdf>
² Zero to Three. (2017). Maryland's Extended IFSP Option. Retrieved from:
<https://www.zerotothree.org/resources/828-maryland-s-extended-ifsp-option>

Cost Analysis

Below is a preliminary list of data items needed to calculate the aggregate cost of expanding Connecticut's Birth to Three program to include children up to age five or until they start kindergarten. The overall goal of the cost analysis is to calculate a per-child cost of services provided and use that figure to estimate how much an expansion of the program would cost based on the number children receiving preschool special education services. Evidence from Maryland indicates that not every family will choose to pursue the Extended Individual Family Service Plan (IFSP) until kindergarten and instead switch to an Individualized Education Program (IEP).²

Please note that the initial cost analysis does not consider specific factors that influence the cost of providing services to an individual child.

Data Items: Ideally, 5 years of data would be available to examine changes in cost and child participation.

1. Number of children participating in Birth to Three by service provider.

2. Number of children age zero to three in Connecticut.
3. Number of children receiving preschool special education services by provider.
4. Number of children age three to five in Connecticut.
5. Total cost of Birth to Three services provided in Connecticut by provider.
6. Total cost of preschool special education services provided in Connecticut.

Initial Resources

The Birth to Three Annual Reports contains data on program participation by provider and by town. The report also contains total expenditure figures for the entire program.

Report Link: <https://www.birth23.org/wp-content/uploads/AboutB23/FY17-Annual-FINAL.pdf>.

2. Currently Available Data on IDEA Preschools

The purpose of this section is to provide initial findings of the currently available data on IDEA preschool in Connecticut.

Available Data

The Connecticut State Department of Education (CSDE) maintains an annual Grant Payment Report that tracks all grant payments made to Local Education Agencies (LEAs) and service providers. The report contains payments made under IDEA Part B sections 611 and 619.3 Additionally, the CSDE maintains a database that shows how much each LEA is spending on special education.⁴

The data is from 2017-18 and collected using the Education Financial System. ³ Connecticut State Department of Education. (2019). Grant Payment Report. Retrieved from:

<https://www.csde.state.ct.us/public/dgm/grantreports1/paydetlMain.aspx>

⁴ Connecticut State Department of Education. (2019).

Analysis of Special Education and Public Transportation as a Percentage of Total Current Expenditures.

Retrieved from: <https://www.csde.state.ct.us/public/dgm/grantreports1/SpTrExpViewRpt.aspx#>

⁵ Individuals with Disabilities Education Act. (2019). IDEA. Retrieved from:

<https://sites.ed.gov/idea/data/> ⁶ Ibid. ⁷ U.S. Department of Education. (2019). IDEA Section 618 Data Products: Static Tables.

Retrieved from: <https://www2.ed.gov/programs/osepidea/618-data/static-tables/index.html> Federal data is available for total grant amounts distributed to Connecticut under IDEA Part B and C.⁵

There is also federal data on the number of children receiving services under IDEA Part B and C by age group, gender, race/ethnicity, and state.⁶

The federal government collects data on the following categories for IDEA Part B: Assessment, Child Count and Educational Environment, Discipline, Dispute Resolution, Exiting, Personnel, and Maintenance of Effort Reduction and Coordinated Early Intervening Services.⁷

CSDE Internal Systems

It is unclear if CSDE knows exactly how preschool special education funds are spent. The Education Financial System (EFS) roughly shows how much money was spent on special education, but it is not clear if the outputted data will show how much money was spent on certain preschool special education programs (please note that the EFS datasets have not yet been made publicly available). The Grant Payment Report shows what funds were disbursed to which LEA, but it does not contain cost or spending data. Further research and potentially reaching out to CSDE is needed to better understand and acquire this information.

3. Maryland's Extended Individual Family Service Plan Option (Birth to 5)

The purpose of this section is to provide an introductory overview of a comparison state's (Maryland) birth to 5 expansion program, the Extended Individual Family Service Plan Option.

Federal Context

IDEA Part C allows but does not mandate states to offer an extension of Part C services beyond the age of three, until the child enters or is eligible to enter kindergarten, for children receiving Part C services and are eligible for preschool services under IDEA Section 619.8 The state may choose to implement this extension for children up until the beginning of the school year following their third, fourth, or fifth birthday (The age extension is superseded by the kindergarten requirement).^{9 8} American Speech-Language-Hearing Association. (2019).

IDEA Part C Issue Brief: Transitions (Including Part C to Part B/Exiting Part C). Retrieved from:

<https://www.asha.org/Advocacy/federal/idea/IDEA-Part-C--Issue-Brief-Transitions/>.

9 Ibid.

10 Zero to Three. (2017). Maryland's Extended IFSP Option. Retrieved from:

<https://www.zerotothree.org/resources/828-maryland-s-extended-ifsp-option>.

11 Maryland State Department of Education. (2019). Maryland's Extended IFSP Option. Retrieved from:

<http://www.marylandpublicschools.org/programs/Pages/Special-Education/MITP/index.aspx>.

12 Zero to Three. (2017). Maryland's Extended IFSP Option. Retrieved from:

<https://www.zerotothree.org/resources/828-maryland-s-extended-ifsp-option>.

13 Ibid. 14 Ibid.

15 Maryland State Department of Education. (2019). Maryland's Extended IFSP Option. Retrieved from:

<http://www.marylandpublicschools.org/programs/Pages/Special-Education/MITP/index.aspx>.

16 Zero to Three. (2017). Maryland's Extended IFSP Option. Retrieved from:

<https://www.zerotothree.org/resources/828-maryland-s-extended-ifsp-option>.

Summary of Maryland's Extended Family Service Plan Option

In 2009 the Maryland State Department of Education (MSDE) received a \$14.4 million grant from the U.S. Department of Education, which the MSDE used to implement an extended Individual Family Service Plan (IFSP) option.¹⁰ The extended IFSP gives families with IFSPs the option to remain in their current service plan beyond the child's fourth birthday or until the child reaches kindergarten.¹¹ The extended IFSP option is a combination of the services provided to families under typical, "Birth to Three" programs that are funded by IDEA Part C, and special instruction services designed to promote educational outcomes after the age of three.¹² These additional educational services include pre-literacy, language, and numeracy skills.¹³ Families are eligible for the extended IFSP option if the child currently has an IFSP plan and is eligible for preschool special education services. ¹⁴

Once the child reaches age three, the family has the choice of continuing the IFSP until the child reaches kindergarten or initiate special education preschool services through an individualized education plan (IEP).¹⁵ The MSDE emphasizes that families are made aware of the benefits of both options prior to the child's third birthday. Since the implementation of the Extended IFSP Option in 2010, approximately 67% of families with eligible children chose to participate in an Extended IFSP.¹⁶

Resources

Maryland State Department of Education. (2019). Maryland's Infants and Toddlers Program. Retrieved from: <http://marylandpublicschools.org/programs/Pages/Special-Education/MITP/index.aspx>.

Maryland State Department of Education. (2018). Maryland Infants & Toddlers Program. Individualized Family Service Plan (IFSP) Process & Document Guide. Retrieved from:
<http://marylandpublicschools.org/programs/Documents/Special-Ed/IFSP/IFSPPProcessGuide.pdf>.

State option to make services under this part available to children ages three and older, 34 C.F.R. § 303.211 (2014). <https://www.govinfo.gov/content/pkg/CFR-2014-title34-vol2/pdf/CFR-2014-title34-vol2-part303.pdf>.

Universal Preschool

Connecticut is a state with more than 160 individual school districts. Each has its own approach to preschool programming. The vast majority of communities have a mix of public and private prekindergarten offerings. Each town strives to encourage and support universal access to preschool, but it is rarely a realized goal in any district. The most recent Kids Count of Connecticut shows slightly less than 80% of children in CT have some kind of preschool experience. However, some districts have 45% of children with preschool experience, and some have 100% of children having access.

Preschool Funded by the State of Connecticut and Federal Programs

The State of Connecticut funds preschool in several ways. The Office of Early Childhood funds preschool spaces focused on helping families living below 75% of the state median income. These spaces account for about 11,000 subsidized preschool spaces (funded at about 50% of the full cost of quality). The programs are known as: School Readiness, Child Development Centers, and Smart Start Classrooms. Parents also have a sliding scale co-pay for these programs, and often towns contribute. In addition, that federally funded childcare subsidy program (Care 4 Kids) contributes to the cost of these state funded slots. The Care 4 Kids subsidy program is also used by families to pay for preschool spaces independent of the state funded spaces as well. These funds are targeted at families earning below 50% of the State Median Income.

Additionally, the federal government funds Head Start preschool classrooms in Connecticut (5,000).

Local Funding for Preschool

The most common locally funded preschool programs are classrooms designed to support young children with disabilities (ages 3-5 years). In addition to children with disabilities, these classrooms are supposed to include a balance of peer models. This varies by district, with some holding to a minimum 50/50 split. However many do not meet the 50/50 threshold as additional students qualify for services throughout the school year.

Some towns offer public preschool as part of their public school system. These classrooms are sometimes funded by the school, using state funded preschool slots to help support them financially. OEC is working on an unduplicated count of students enrolled in funded preschool spaces to tease out the details of how children are funded.

A Path Forward Towards Universal Preschool

Because of the complex landscape of funding mechanisms and tight budgets federally, at the state level and the local level, any move toward universal preschool will require additional coordination among funding streams and likely additional funds from all of these streams. OEC is working on the data to understand the possibility of UPK in CT.

ⁱ CT General Statutes Section 10-76 (a) (6) “Developmental delay means a significant delay in one or more of the following areas: (a) physical development, (b) communication development, (c) cognition development, (d) social emotional development, and/or (e) adaptive development as measured by appropriate diagnostic instruments and procedures and as demonstrated by scores obtained on an appropriate norm-referenced standardized diagnostic instrument.”