

# **Preschool Special Education Working Group**

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## **Introduction**

The Preschool Education Working Group, under *P.A. 19-184 – An Act Concerning the Provision of Special Education*, is comprised of community providers, Birth to Three programs, Local Education Agency's (LEAs), state agencies, and the general public. Over the last several months, the group met to discuss the challenges in transitioning children from Birth to Three to special education services provided by public schools. Through much discussion and research, the group compiled suggestions to support families and educators through the process and create a more responsive system for families and children birth through age five. Throughout the report, there are links to information and additional supplemental reports for further details.

## **Overview of the Individuals with Disabilities Act (IDEA) IDEA**

The Individuals with Disabilities Education Act (IDEA) reauthorized in 2004 provides funding for systems to support infants, toddlers, children, and youth with disabilities and their families. The IDEA statute and regulations also include specific requirements about how those supports and services are managed and monitored.

## **Overview of Birth to Three (Part C)**

Part C of the IDEA (Birth to Three) provides funding to build systems of supports 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 Birth to Three is to assist families and caregivers to enhance children's learning and development through everyday learning opportunities in natural environments. The fundamental principles include: (<https://ectacenter.org/topics/natenv/keyprinckeyprac.asp>)

- 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;
- Individual Family Service Plan (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;
- interventions with young children and family members must be based on explicit principles, and validates practices;
- the best available research;
- and relevant laws and regulations.

In Connecticut, Birth to Three provides support to families who have infants and toddlers who have a diagnosed condition that has a high likelihood of a developmental delay or who are developmentally delayed. Developmental delay is defined under C.G.A. Sec. 17a-248. 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 on-going development.

The Connecticut Birth to Three system was fully implemented in 1993, and in 2016 the Office of Early Childhood (OEC) became the lead agency. In late 2017, the provider payment system 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 19 contracted Early Intervention Service (EIS) programs operated by 18 parent agencies.

***Family Cost Participation (FCP):*** Family cost participation fees were introduced in 2003. Birth to Three programs bill commercial insurance and Medicaid and help the OEC manage the billing and collection.

If a family's annual income is \$45,000 or more, they are responsible for a monthly fee. This monthly fee is in addition to any money insurance, state, and federal monies that 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%.

***Evidence-Based Practices:*** The Birth to Three System in Connecticut implements evidence-based practices, including coaching 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. All families with eligible children are members of the team that develops their Individualize Family Service Plan (IFSP). (<https://www.birth23.org/families/supports/ifsp/>)

## **Overview of Preschool Special Education (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 for providing 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 Connecticut, LEAs provide services to children and youth ages 3-21. When a child is referred, they are protected under IDEA. When a child becomes eligible for special education services, a planning and placement team (PPT) designs an Individual Education Program (IEP) that includes special education and related services that the child requires to access their education. A student's eligibility is determined through a comprehensive re-evaluation at least every three years. The CT State Department of Education (CSDE) is the agency responsible for the implementation of IDEA Part B.

The District has the obligation under Child Find to identify children who have or may be suspected of having a disability from birth. Child Find is also an obligation of the State's Birth to Three System. Under the IDEA, Part C, the Birth to Three System is responsible for identifying, locating, evaluating and providing services to children between birth and age 3 who are eligible to receive such early intervention services due to a developmental delay or a documented physical or mental condition that has a high probability of resulting in a developmental delay. The District will meet Child Find obligations for children between the ages of birth to three when children are referred to the Birth to Three System. When the District is informed of a child between birth to three, the district will either (a) make a referral directly to the Birth to Three System via the statewide toll-free number or website, or (b) provide the parent with the information so that the parent can make the referral themselves.

If a parent of a child under age three opts not to consent to, contact and/or pursue, an early intervention evaluation through the Birth to Three System and requests that such evaluation be conducted by the District, the District will comply by convening a PPT meeting. The PPT meeting is intended to determine if the child will be provided an evaluation in order to further determine if the child is a child with a disability under the law. The District recognizes that it is obligated to provide special education and related services to an eligible child no later than a child's third birthday.

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 of 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 PPT process, to develop an Individual Education Program (IEP) to allow 3-21 year-olds to receive FAPE in the LRE. Under the IDEA, LEAs are required to provide a continuum of services for children and youth. This continuum ranges from full-time placement in a general education classroom with appropriate supports and services to more restrictive settings (e.g., out of district, separate special education classroom). 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 level in Connecticut, and LEAs may choose to develop preschool special education programs and/or provide specialized instruction in community-based preschool special education programs.

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 kindergarten in some states when the law was drafted. Some children that are in 619 Part B count are in kindergarten 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. Additionally, Part B of the IDEA provides information and guidance regarding specialized instruction and the development and implementation of IEPs.

**Similarities and Differences between Birth to Three and Part B**

	Birth to Three	Part B
	Office of Early Childhood	State Department of Education
Eligibility Determination	<p>For ages birth to three eligibility for early intervention includes children who have a developmental delay or disability. A development delay for eligibility is defined as two standard deviation delays 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.</p>	<p>Children ages 3-5 determined by a PPT to have a disability in one of the following categories listed in the IDEA</p> <ul style="list-style-type: none"> <li>• autism</li> <li>• deaf-blindness</li> <li>• emotional disturbance</li> <li>• hearing impairment</li> <li>• intellectual disability</li> <li>• multiple disabilities</li> <li>• orthopedic impairment other health impairment               <ul style="list-style-type: none"> <li>○ (includes the subcategory of ADD/ADHD)</li> </ul> </li> <li>• specific learning disability               <ul style="list-style-type: none"> <li>○ (includes the subcategory of SLD/Dyslexia)</li> </ul> </li> <li>• speech or language impairment</li> <li>• traumatic brain injury</li> <li>• visual impairment (including blindness)</li> </ul> <p>or</p> <p>Developmental Delay for 3-5 year olds as defined in CT Statute            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.”</p> <p>To be eligible for special education a child must be determined by the PPT to have a disability AND to require specialized instruction.</p>

	Birth to Three	Part B
	Office of Early Childhood	State Department of Education
Services	<p><b>IFSP:</b> 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 will check the IFSP at least every six months or as needed to make sure it still addresses the family's priorities and child's needs. The team comprised of at least two individuals from separate disciplines, one of whom must be the family's service coordinator. 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 the day or routines, the team will be able to identify the areas that may be challenging for the family and child.</p>	<p><b>IEP:</b> Individual Education Program</p> <p>A PPT is required to develop an educational program reasonably calculated to enable a child to make appropriate progress in light of the child's circumstances. A PPT must include the child's parents, a general educator, special educator, an LEA representative that is able to commit district resources and a person that is able to interpret evaluation results. At the discretion of the parent or the District, other individuals who have knowledge or special expertise regarding the student, including related services personnel as appropriate and the Birth to Three service coordinator or their representative are included. The IEP is focused on educational progress.</p>

### Similarities and Differences Between IDEA Parts B and C

One of the differences between Birth to Three (Part C) and Part B is the lead agency. The lead agency for Birth to Three is the CT Office of Early Childhood. For Part B, the lead agency is the CT State Department of Education.

Preschool special education's focus is on the child's education, the same as the rest of the Part B system. Birth to Three, early intervention, is focused on supporting families. The State Systemic Improvement Plan for Birth to Three refers to the state-identified measurable result as "As a result as of Early Intervention families will be better able to talk about their child's abilities and challenges."

There are differences in the eligibility for Birth to Three and Part B, as well as individual plans with differing emphases. The families of infants and toddlers eligible for IDEA Birth to Three services have an IFSP, while children eligible for IDEA Part B services have an 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).

Part B and Birth to Three 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 met.

There are also differences between Part B and Birth to Three 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 Delay, Emotional Disability, Hearing Impairment, Multiple Disabilities, Orthopedic Impairment, Other Health Impairment, Specific Learning Disability, Speech-Language Impairment, Traumatic Brain Injury, or Visual Impairment). Birth to Three is responsible for the creation of an 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 IEP that is a program reasonably designed to provide a child or youth with specialized instruction and related services for them to make adequate educational progress.

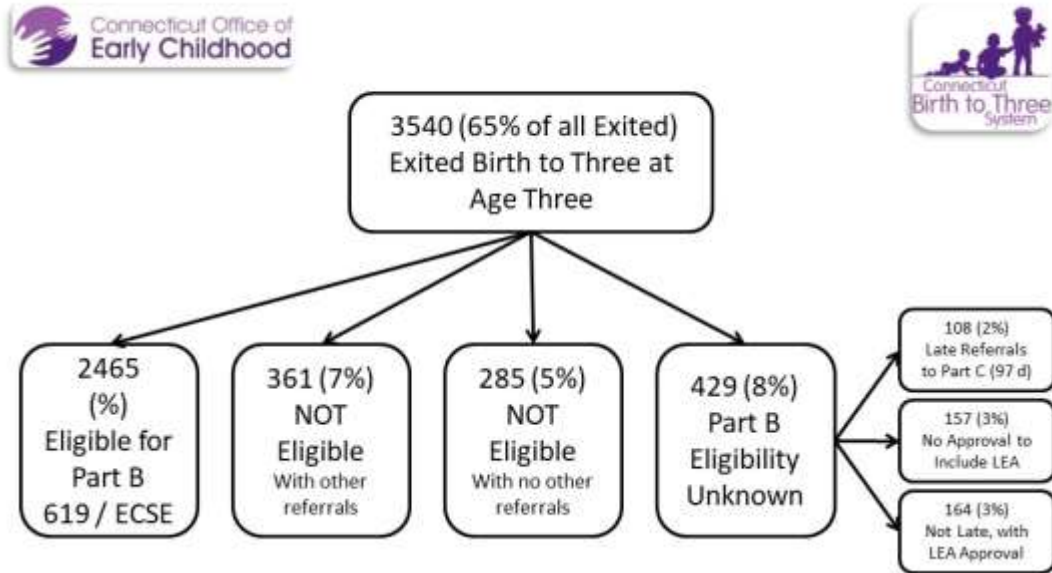
Part B and Birth to Three share responsibilities for the transition of children between the two systems. The transition between the two systems can present a challenge for families as they learn about the differences between the two systems. Birth to Three and Part B have joint policies and procedures to assist with this transition. This includes a transition conference convened by the Birth to Three provider that requires Part B to participate. The transition conference occurs at least 90 days before a child turns age 3. Part B is required to hold both a referral PPT (PPT1) and an eligibility PPT (PPT2). If the child is determined eligible through the PPT process, an IEP is developed and implemented on or before the child's third birthday.

### **Transitions Outcomes**

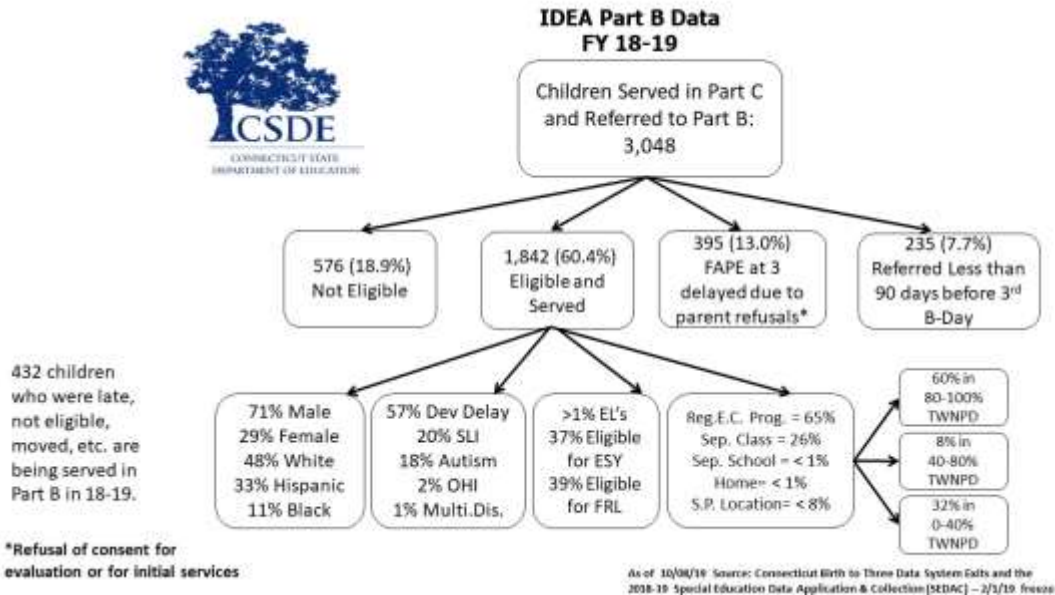
Research indicates that high-quality supports in early intervention (Part C) and preschool special education (Part B) improve outcomes for children and families. The following table provides information on the children transitioning between Birth to Three and Part B.



## Birth to Three Transition Data - FY19 (7/1/18-6/30/19)

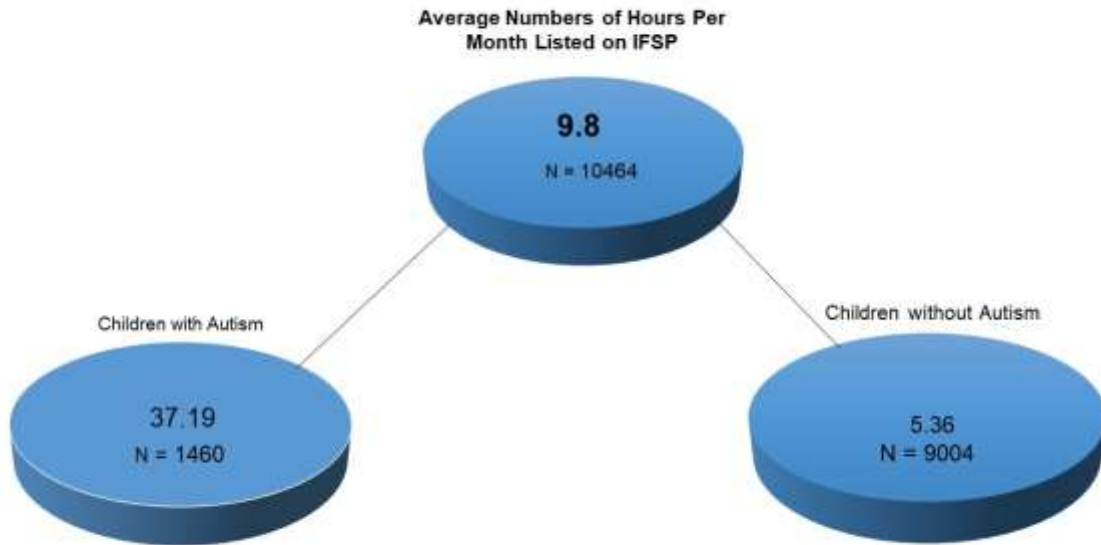


## Part B Transition Data FY18/19 (10/1/18-9/30/19)

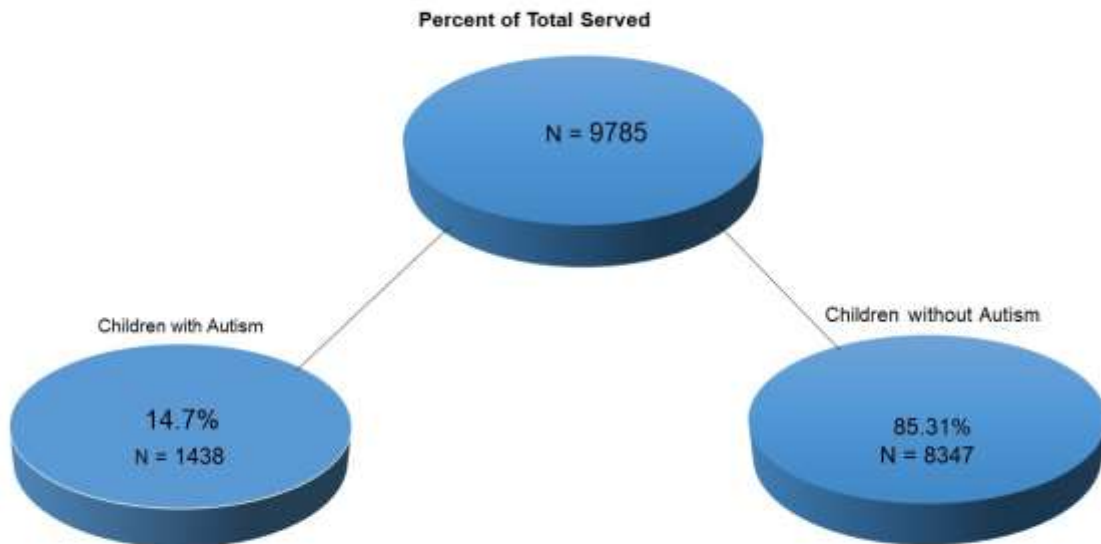


The following charts break out children and families supported broken out by those diagnosed with autism versus those with another developmental delay or disability.

**Part C Number of Children and Families Supported in FY19 (7/1/18-6/30/19)**



**Part B Children Supported in FY18/19 (10/1/18-9/30/19)**



Both Birth to Three and Part B collect the following data:

- 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;
- 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 licensed child care or early education setting.

The task force recommends that the following additional data be collected.

1. 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 was for the lack of referral/connection (e.g., the family declined, family not available, service not available, no services necessary)
  - d. Whether the child is enrolled in licensed child care or early education setting.

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 in providing FAPE in the LRE for their youngest learners.

### **Children Exiting Birth: Categories Upon Exit**

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

There are four categories at the exit when children reach age 3:

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 programs 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] (<https://portal.ct.gov/SDE/Special-Education/Early-Childhood-Special-Education>)

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

### **Transition Plans for All Children:**

According to IDEA Birth to Three regulations, the IFSP must include the steps and services to be taken to support the smooth transition of the child from Birth to Three services to Part B services. This 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 has been transmitted to the LEA or other relevant agency, including information needed by the LEA to ensure continuity of services from the Birth to Three program to the Part b program, such as a copy of the most recent evaluation of the child and the family and the most recent IFSP developed (with parental 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. A school district may choose to use current evaluation information from the Birth to Three program to determine a child's eligibility, or they may choose to have their personnel evaluate 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 in all areas of suspected disability, as it is the child's PPT that will determine eligibility.

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

Per IDEA, with written consent, the Birth to Three Service Coordinator or another Birth to Three 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 PPT, which includes 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 before 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.

### **Children Determined to be *Not* Eligible for Special Education Services**

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 for Families Whose Children are Exiting Birth to the Three Services and Are Determined to be *Not* Eligible for Special Education Services?**

For those families whose child was determined to be not eligible for special education services, there are currently limited options. (e.g., fee-based private early childhood education programs, Head Start program, in-district preschool programs which often have limited seats available for children that do not have IEPs, and magnet and charter school preschool programs).

There is a lack of consistent or equitable options across the state. Preschool special education services depend on the town where the family resides. Some towns have multiple options, which may include Head Start, state-funded preschool programs (School Readiness, Child Day Care, Smart Start), and private preschools. It should be noted that many of these options require the parent to transport the child to the program, which may pose a significant barrier for some families.

#### **Options for Building Local Resources**

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

Communities eligible for School Readiness funding are required to have a School Readiness Liaison. Communities that do not have School Readiness grant may have an early childhood "liaison," but this is not universal. Responsibilities may include:

- visiting community-based programs to learn about students and their needs;
- supporting and sharing professional learning; and
- sharing resources.

This collaborative role can serve to bridge the transition from community-based programs to the public school, as well as create a collective sense of community that includes the youngest learners.

### **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* (<https://www.birth23.org/providers/provider-resources/b23forms/>), becomes part of a child's early intervention record. This information may have originated from the Birth to Three provider or a provider outside of the Birth to Three system. It 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, to keep the school district's preschool team current with the child's developmental status.

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 5. However, this is an entirely voluntary process. (<https://cdi.211ct.org/program/early-childhood-special-education/>)

When a child is not eligible for special education services, there may be a gap in program availability (e.g. therapies, opportunities for language development and the generalization of skills). 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 the information the parent is willing to share.

### **Local Resource Packets**

Birth the Three providers have indicated that families could benefit from being connected with someone who can provide relevant information about steps they can take if their child begins to struggle after being determined to be not eligible for Part B services 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 playgroups
- ASQ/Sparkler

## Children Who Turn 3 in Late Spring or Summer Months

One additional complication to the transition process includes the process used for children who turn 3 later in the school year (May, June) or over the summer. The Birth to Three system operates 12 months a year. School districts operate during the school year (late August through June), with some children with disabilities qualifying for extended school year services (ESY) in addition to their school year services. This determination is made based on the individual needs of each child. For children who have birthdays within the late spring and early summer, the district first determines eligibility for early childhood special education services, then determines if the child is eligible for ESY services. This can create two potential problems: This scenario may lead to the student experiencing multiple transitions in a short time span. For example, in June a student transitions from Birth to Three to a preschool program where he/she receives specialized instruction, then in July he/she transitions to an extended year special education program and then in August he/she transitions to another program to receive specialized instruction.

The second concern is that often the staff of the ESY program is different from the staff working with children during the school year. Additionally, the location of the program or services that take place over the summer often occur in a different location from the school year programming. These frequent changes set up a myriad of challenges for young children and their families navigating multiple transitions that include changes in staff and locations up to three times in a relatively short time period. Clearly, these scenarios are far from optimal.

### Task Force Recommendations:

1. Require an ASQ be completed for students found not eligible for Part B.
2. Encourage all communities to create an early childhood liaison position.
3. Consider additional data collection for monitoring children found not eligible for Part B services.
4. Monitor collaboration between community-based programs and LEAs specifically with regard to referrals of children who had received Birth to Three and found not eligible for Part B services.
5. Allow families who have children turning 3 in the months from May to August to choose to remain in their current Birth to Three programs until the start of the following school year or receive services from the LEA through Part B.

### Cost Considerations

Below are cost considerations for Birth to Three summer extension. Costs are calculated at 75% of services noted in the IFSP. This is the rate of which other states implementing summer extension are providing based on the families' choice to opt-out or lessen services over the summer.

75% of IFSP Supports Provided			
Cost To: All Insurance Types			
Summer	Autism	No Autism	Grand Total
2018	\$ 795,288.44	\$ 387,192.04	\$ 715,266.68

2019	\$ 715,429.16	\$ 416,180.44	\$ 866,250.20
<b>Average</b>	<b>\$ 720,530.71</b>	<b>\$ 367,525.19</b>	<b>\$ 792,943.19</b>
<b>Cost To: Medicaid/DSS</b>			
<b>Summer</b>	<b>Autism</b>	<b>No Autism</b>	<b>Grand Total</b>
2018	\$ 505,306.96	\$ 213,450.19	\$ 398,528.82
2019	\$ 439,691.34	\$ 242,310.48	\$ 546,831.43
<b>Average</b>	<b>\$ 433,477.70</b>	<b>\$ 206,360.22</b>	<b>\$ 463,480.93</b>
		<b>\$ 121,155.24</b>	<b>\$ 273,415.71</b>
<b>Cost To: Commercial Insurance/Unknown/OEC</b>			
<b>Summer</b>	<b>Autism</b>	<b>No Autism</b>	<b>Grand Total</b>
2018	\$ 289,981.48	\$ 173,741.86	\$ 316,737.86
2019	\$ 275,737.82	\$ 173,869.96	\$ 319,418.77
<b>Average</b>	<b>\$ 287,053.01</b>	<b>\$ 161,164.97</b>	<b>\$ 329,462.25</b>

## Recommendations for Additional Exploration:

### Universal Preschool

Connecticut is a state with more than 160 individual school districts. Each has its approach to preschool programming. The majority of communities have a mix of public and private preschool offerings. Many cities and towns strives to support universal access to preschool. However, this goal is not always met. The most recent KIDS COUNT of Connecticut shows slightly less than 80% of children in Connecticut have some kind of preschool experience. However, some districts have 45% of children with preschool experience, and some have 100% of children having access (<https://datacenter.kidscount.org/kids-count-data-book-interactive>).

A path forward to universal preschool: as a result of the complex landscape of funding mechanisms and tight budgets at the federal, state and local levels, any move toward universal preschool will require additional coordination among funding streams and likely, additional funding. The OEC is working on the data to understand the possibility of Universal Preschool in Connecticut.

## Appendix

### 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 pay using an OEC developed sliding scale co-pay for many of these programs, and often towns contribute. Also, the federally funded child care 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. 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 and the State contributes to Head Start through the state Head Start Supplementary Grant Program.

## Local Funding for Preschool

The most common LEA funded preschool programs are classrooms designed to support young children with disabilities (ages 3-5 years). In addition to children with disabilities, these classrooms should typically include a balance of children who are not on IEPs. This varies by district, with some holding to the minimum of a 50/50 ratio between children on IEPs and children not on IEPs. Classrooms with this ratio are considered regular education early childhood environments. However, many do not meet the 50/50 threshold as additional students qualify for services throughout the school year and there may be space and/or budgetary challenges.

Some towns offer public preschool as part of their public school system. These classrooms are funded by the LEA, and may use state-funded preschool slots (e.g. Smart Start and/or School Readiness) to help support these classrooms. The OEC is working on an unduplicated count of children enrolled in funded preschool spaces.

## Transition from Birth to Three to Public School Presentation



### Natural Learning Environments Are:

- Natural learning opportunities for all children
- Supportive environments

### Children Learn through Interactions with Peers and Adults

- The amount of quality time spent with young children matters
- Positive interactions with young children are more important than the amount of time spent
- Quality of interactions matters more than quantity
- Quality of interactions matters more than quantity



### How do families feel?

### COACHING

- Style of interaction, build family's confidence
- Supports parents during their every day activities
- Parents in using strategies with their child during with
- Build on parents' ideas: Sharing information/ modeling

### Referrals to Special Education

Yes, anyone!!!

Note: parent must give permission for the evaluation

### Who does what???

Role	Yes	No
General Manager of Information System	0	0
Executive Director (ED)	0	0
Assistant to Executive Director (AED)	0	0
Business Manager (BM)	0	0
Director of HR	0	0
Director of IT	0	0
Director of Finance	0	0
Director of Operations	0	0

### Primary service provider approach to learning

- Every child, every family has a solution
- This approach focuses on the primary support the children
- Parents provide and family provide support from other team members as part of the solution
- Strengthens parents confidence and competence in providing child learning and development

### What Happens When a Child is About to Turn Three?

- Referrals are sent to LEA at age 2.5 through SEDAC
- Service coordinators include LEA in transition planning (with parent consent)
- Free Appropriate Public Education (FAPE) at Three is required

### LEA Referral, Evaluation, Eligibility, IEP

### SEDAC

- Accessed by Directors and Data Managers
- Reports should be shared District CC Transition Coordinator regularly

### SEDAC Choices

### Reports and "Child Find"

- Districts will report by required to include LEA
- LEA will report by required to include LEA
- Referrals of Children from Age 2 through 30 months
- Referrals include LEA
- Districts will report by required to include LEA
- LEA will report by required to include LEA

### Part C SSIP / SiMR?

- State Systemic Improvement Plan
- State-identified Measurable Result

As a result of Early Intervention families will be better able to talk about their child's abilities and challenges.

### B23 and PPTs

- PPTs use LEA meetings and separate from the transition conference
- B23 should always be linked to the PPT (with parent permission)
- B23 is there to support the family to describe their child's abilities and challenges
- B23 is NOT there as an advocate for the family's child

### Guidance from CSDE

- A child under the age of two and a half with no release (from 2y) or approval to include (from 2y) is NOT a referral, NOT a Child Find responsibility - just receipt of notification for future planning
- If a family requests the inclusion to include the LEA - LEA will have Child Find responsibility - reach out to the family

### Guidance from CSDE

- Child Find responsibilities can include any kind of general child find information reached out to parents with young children
- Best practice - reach out to families individually to let them know the LEA is available to accept a referral

### How can you use this process as an opportunity to build positive relationships?

### Transition It all up

### Transition Conference

It's all about relationships!

## Glossary

**Connecticut State Department of Education (CSDE):** The lead agency for Part B.

**Early Intervention Services (EIS):** How Part C / Birth to Three supports are referred to in the IDEA and in Connecticut's Medicaid State Plan Amendment.

**Free Appropriate Public Education (FAPE):** IDEA requires an LEA to provide a "free appropriate public education" (FAPE) to each qualified person with a disability who is in the school district's jurisdiction, regardless of the nature or severity of the person's disability.

The **Individuals with Disabilities Education Act (IDEA):** is a law that makes available a free appropriate public **education** to eligible children with disabilities throughout the nation and ensures **special education** and related services to those children.

**Local Education Agency (LEA):** a public board of education or other public authority legally constituted within a State for either administrative control or direction of, or to perform a service function for, public elementary schools or secondary schools in a city, county, township, school district, or other political subdivision of a State, or for a combination of school districts or counties as are recognized in a State as an administrative agency for its public elementary schools or secondary schools.

**Least Restrictive Environment (LRE):** The least restrictive environment means that a student who has a disability should have the opportunity to be educated with non-disabled peers, to the greatest extent appropriate. They should have access to the general education curriculum, or any other program that non-disabled peers would be able to access.

**Office of Early Childhood (OEC):** The lead agency for Birth to Three (Part C).

**Part B:** The section of the IDEA that governs special education and related services are provide to students aged 3-21 with disabilities.

**Part C:** The section of the IDEA that provides early intervention for children who are developmentally delayed or at risk for a developmental delay from birth to age 3.

**Planning and Placement Team (PPT):** A planning and placement team. The PPT is required to develop an educational program reasonably calculated to enable a child to make appropriate progress in light of the child's circumstances.