Cluster Area II – Early Childhood Transition

**Question**

Are all children eligible for Part B services receiving special education and related services by their third birthday?

**Goals**

1. All children who are referred prior to their third birthday and who are eligible for Part B services will receive special education and related services starting no later than their third birthday.

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No probes identified.</td>
<td>A. LEAs initiate and have appropriate methods of ensuring that students who are referred by Part C and found eligible for Part B special education services have an IEP in effect by the date of their third birthday.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A. LEAs initiate and have appropriate methods of ensuring that students who are referred by Part C and found eligible for Part B special education services have an IEP in effect by the date of their third birthday.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Performance Indicator A</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>A. CPR RESULTS FOR SE17: FY01 – FY04</th>
<th>A. CPR RESULTS FOR SE17: FY01 – FY04</th>
<th>A. CPR RESULTS FOR SE17: FY01 – FY04</th>
</tr>
</thead>
<tbody>
<tr>
<td>SE17: Initiate services at age three and maintain Part C to Part B transition procedures</td>
<td>Improve compliance rates to “systemic compliance” (93% or higher for two years in a row) for SE17 re: Initiate services at age three and maintain Part C to Part B transition procedures.</td>
<td>Data from the Coordinated Program Reviews (CPR) conducted by MASSDE through the Program Quality Assurance unit (PQA) for FY04 indicates that 87% of districts monitored were found “Commendable or Implemented”. This rate of compliance is consistent with the two previous years. MASSDE considers this level of compliance “substantially compliant”. This will remain a focus area until our indicator reaches 93% for two years in a row.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SE 17</th>
<th>FY01</th>
<th>FY02</th>
<th>FY03</th>
<th>FY04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commendable/Implemented</td>
<td>80%</td>
<td>88%</td>
<td>87%</td>
<td>87%</td>
</tr>
<tr>
<td>Partially Implemented/Not Implemented</td>
<td>20%</td>
<td>12%</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td>Total Sites</td>
<td>49</td>
<td>49</td>
<td>31</td>
<td>39</td>
</tr>
</tbody>
</table>

Note: In response to the OSEP FFY2002 APR Letter (11/2004), MASSDE provided additional detail on ensuring compliance with SE17. See Appendix C.1 Response Letter to OSEP Findings on FFY2002 APR (section 3).
MID-CYCLE REVIEW FY 04

Of the 10 LEAs that were found partially or not implemented for SE17 in FY01, all 10 (100%) were found 'Commendable/Implemented' by the following mid-cycle review.

It is important to note that MASSDE is now able to compare cohort groups by reviewing the mid-cycle data as compared to the CPR data. With the first year of Mid-cycle Reviews completed, MASSDE is able to effectively ensure that noncompliance identified during the FY01 CPRs has been corrected. CPR data cohorts will begin comparability as of FY07.

Federal Requirements
34 CFR 300.24(b)(3); 300.121(c); 300.132; 300.342(c)

State Regulations
28.06(7)(b)

SE17= Initiation of services at age three and Part C to Part B transition procedures:

- The school district encourages referrals from the Department of Public Health, other agencies, and individuals for young children when or before the child turns two-and-one-half years old in order to ensure continuity of services and to ensure the development and implementation of an IEP for eligible children by the date of the child's third birthday in accordance with federal requirements.
- The district implements procedures to ensure the effective transition of young children with disabilities from Early Intervention Programs through participation in transition planning conferences arranged by such programs.

Projected Targets, Activities, Timelines, and Resources (2004-5)

Projected Target
Maintain existing target.

Projected Activities, Timelines, and Resources
MASSDE, through Program Quality Assurance (PQA) and Data Collection (DATA) staff time, will continue procedural compliance activity through ongoing Coordinated Program Review (CPR) schedule.

Performance Indicator B

--- | --- | ---

B. CPR RESULTS FOR SE15: FY01 – FY04

SE15: LEA’s have appropriate methods of outreach with other local agencies in order to identify students in need of special education (Child Find)

<table>
<thead>
<tr>
<th>SE 15</th>
<th>FY01</th>
<th>FY02</th>
<th>FY03</th>
<th>FY04</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commendable/ Implemented</td>
<td>84%</td>
<td>84%</td>
<td>82%</td>
<td>82%</td>
</tr>
<tr>
<td>Partially Implemented/ Not Implemented</td>
<td>16%</td>
<td>16%</td>
<td>18%</td>
<td>18%</td>
</tr>
<tr>
<td>Total Sites</td>
<td>56</td>
<td>49</td>
<td>44</td>
<td>51</td>
</tr>
</tbody>
</table>

Improve compliance rates to "systemic compliance" (93% or higher for two years in a row) for SE15: LEA’s have appropriate methods of outreach with other local agencies in order to identify students in need of special education. (Child Find)

B. CPR RESULTS FOR SE15: FY01 – FY04

Data from the Coordinated Program Reviews (CPR) conducted by MASSDE through the Program Quality Assurance unit (PQA) for FY04 indicates that 84% of districts monitored were found “Commendable or Implemented”.

This rate of compliance is consistent with the two previous years. MASSDE considers this level of compliance “substantially compliant”. This will remain a focus area until our indicator reaches 93% for two years in a row.

Note: In response to the OSEP FFY2002 APR Letter (11/2004), MASSDE provided additional detail on ensuring compliance with SE15. See Appendix
**MID-CYCLE REVIEW FY 04**

Of the nine LEAs that were found partially or not implemented for SE15 in FY01, eight (89%) were found ‘Commendable/Implemented’ by the following mid-cycle review.

---

**C.1 Response Letter to OSEP Findings on FFY2002 APR (section 3).**

It is important to note that MASSDE is now able to compare cohort groups by reviewing the mid-cycle data as compared to the CPR data. With the first year of Mid-cycle Reviews completed, MASSDE is able to effectively ensure that noncompliance identified during the FY01 CPRs has been corrected. For the one LEA that remained noncompliant with SE15, MASSDE prescribed corrective action. The LEA must implement this corrective action without delay or face possible loss of funds to the district and/or other enforcement action by MASSDE. CPR data cohorts will begin comparability as of FY07.

**Federal Requirements**

34 CFR 300.125; 300.112

**State Requirements**

SE15= LEA’s have annual or more frequent outreach and continuous liaison with those groups below from which promotion or transfer of students in need of special education may be expected, or which would include students in need of special education:

- Professionals in community
- Private nursery schools
- Day care facilities
- Group homes
- Parent organizations
- Clinical/health care agencies
- Early intervention program
- Other public/private/parochial schools
- Other agencies/organizations
- The school itself, including charter schools
- Agencies serving migrant and/or homeless persons pursuant to the McKinney-Vento Education Act for Homeless Children

---

### Projected Targets, Activities, Timelines, and Resources (2004-05)

**Projected Target**

Maintain existing target.

**Projected Activities, Timelines, and Resources**

MASSDE, through Program Quality Assurance (PQA) and Data Collection (DATA) staff time, will continue procedural compliance activity through ongoing Coordinated Program Review (CPR) schedule.