

PART C OF IDEA - LEAD AGENCY DESIGNATION

On April 13, 2007 the Kansas Coordinating council on Early Childhood Developmental Services voted 13-8 to recommend to Governor Sebelius that she designate SRS as the lead agency for Part C of IDEA. That vote and this supporting document was sent on to the Governor.

BOTH PROPOSALS AGREE ON THE FOLLOWING POINTS

- a) Both pledge to strive to maintain and enhance collaborations among the state partners.
- b) Both anticipate no change in the structure of Part C services at the community level. Local determination of local lead agency will be maintained, as required by statute.
- c) Both expect no changes to the current monitoring system unless OSEP requires it or local partners request it.
- d) Neither calls for additional funds or resources to administer at the state level.
- e) Both understand federal prohibitions on waiting lists for Part C services and assure that it will not occur.
- f) Both addressed services at no cost to families. SRS is strongly committed to Part C services at no cost to families. KSDE is "committed to providing services to all eligible children at no cost." In KSDE programs, all eligible children with disabilities receive appropriate services depending on the program guidelines with no waiting lists or fees.
- g) Both discuss transfer of ALL existing Part C state-level staff to new lead agency. Slight difference in where they would be assigned after the transfer (see next section).
- h) Both cited extensive experience in implementing federal programs and regulations, with examples given (see next section for differences).
- i) Both currently provide funding to the State ICC (KSDE - \$43,000 and SRS - \$8,000).
- j) Both currently provide funding support to the Make A Difference Information Network telephone hotline and operator (KSDE - \$25,000 and SRS - \$6,000). This is considered the Central Directory or single point of contact as required under IDEA.
- k) Both would give serious consideration to any State ICC recommendations when requesting any additional funding or state appropriations to support *tiny-k* networks.
- l) Both have assured that no change in the funding formula for distributing Part C funds is planned for the immediate future.
- m) Both agencies have appropriately defined lines of authority as required under IDEA.
- n) Both agencies plan to access Part C Medicaid funding consistent with past practices.
- o) Both agencies support continuation of the current Part C data system, unless stakeholders request or the federal government requires any changes.
- p) Currently, the Legislature is considering an increase of \$250,000 for Part C training, technical assistance, and state infrastructure. Both agencies agree that funds earmarked for Part C administration remain and be used for that purpose.

AREAS WHERE DIFFERENCES WERE NOTED:

	KSDE	SRS
State staff	<p>All Part C staff and SICC staff will become members of the Student Support Services team. KSDE operates in teams with direct access to agency administration. There are weekly team meetings and the SICC Coordinator will be a part of those meetings, as will all the Part C staff. All team members' issues are important and receive immediate attention from the other members of the team and administration. KSDE is a small organization and this is an advantage in accomplishing team priorities. Team members cooperate with each other to accomplish what is needed. Colleen Riley, the Student Support Team Director, has an open door policy. Colleen and other members of KSDE administration appreciate that we are experts in our areas and support our recommendations. KSDE does not have the administrative barriers that are present in larger organizations.</p>	<p>Part C staff will become members of the section that houses the other Early Childhood/Education Programs and Initiatives in Economic Employment Support (EES) under Alice Wornack, an Assistant Director for EES. An Early Childhood Team composed of Early Childhood and related program staff members meet weekly to discuss issues, design initiatives, and to come up with solutions. The SICC Lead Staff will be included in these weekly meetings. One of the Part C Staff Positions will be co-located in SRS Health Care Policy as a liaison between Medicaid and Part C to ensure that Part C is an active player in upcoming Medicaid waiver discussions. SRS and KHPA work closely together via an interagency agreement and task force composed of members from both agencies to make Medicaid policy decisions and to implement these decisions as SRS field staff provide service delivery for Medicaid. The Part C liaison will be a member of this interagency team. The SICC Coordinator/Lead Staff will become a member of Governmental Services (with Kyle Kessler and Jennifer Crow) housed in the SRS Executive Offices to enhance the visibility for the Council's work and ensure a strong voice in the overall agency, as well as, Part C decision-making.</p>
Enhanced funding	<p>KSDE has been a partner in obtaining additional funding for infant/toddler services for the past 20 years. Categorical Aid funding to the tiny-k networks is currently over \$7 Million each year. Anticipated increases for the current year and each of the next 2 years are expected to be \$1,500 per teacher per year. These yearly increases directly benefit networks. Streamlining will lead to efficiencies at the state level which will be put into technical supports – "priority for advocacy for funding will always be for local service provision by the tiny-k networks" - According to IDEA, the SICC shall advise and assist the lead agency in the performance of their responsibilities, particularly the identification of the sources of fiscal and other support for services for early intervention programs, assignments of the sources of financial responsibility to the</p>	<p>SRS will "rigorously pursue enhanced funding" to address shortages; includes requesting funding enhancements as recommended by Part C staff and the SICC through agency's budget process as was recently done for other childhood services (Child Care Assistance, Early Head Start, and the Infant-Toddler Project) Program recommendations become a part of the annual budget enhancement request to the Governor's Office and if approved by the Governor, become a part of the Governor's Budget Request (GBR) to the Legislature. The GBR becomes the legislative agenda for the Ks School Readiness Coalition, a stakeholder group which actively advocates for legislative approval for early childhood initiatives (ie: current year agenda includes child care subsidy, Early Head Start enhancement, Pre-K expansion, and an Infant-Toddler quality initiative. SRS works closely with this coalition and other advocates to ensure that SRS budget requests become a part of the GBR and the Coalition's agenda.</p>

	<p>appropriate agency, and the promotion of interagency agreements. KSDE will work with the SICC to maximize funding for Part C services.</p> <p>– Any funding proposals for tiny-k programs would be made by the SSS-Part C staff and the SICC Coordinator. This would be submitted as part of the SSS budget with a separate funding code. The KSDE budget would become part of the KSBE legislative agenda. This is an advantage of KSDE being a small agency and working as teams with direct access to administration.</p>	
Current support of direct services to families accessed through local community partners	Categorical aid and other supports flowing through Local Education Agencies of approx \$ 7.3 Million (35 out of 36 networks access)	Funding support through local Community Developmental Disabilities Organizations of approx \$1.8 Million (14 out of 36 networks access)
County Mil Levy Issue		NOTE: \$1.3 M of the above amount is County Mil Levy Funds usually accessed in conjunction with local CDDO partners
Early Childhood Outcomes (ECO) developed to satisfy requirements of IDEA	On-going partnership with KDHE to jointly create ECO – currently piloting throughout state. KSDE funded all training, the Outcomes Web System, and will maintain the data base which creates data for the Part C and KSDE State Performance Plans.	
Generic Child Outcomes Measures	<p>Early Learning Guidelines (which are closely aligned with K-12 standards) were developed jointly with SRS and other stakeholders</p> <p>KSDE is working with the Beach Center on the correlation of parent survey data information to quality of life indicator data and to child outcome data. This research will have state and national significance/implications.</p>	<p>SRS and KSDE partnered to lead the workgroup that developed the Early Learning Guidelines, which are closely aligned with K-12 standards. Kansas Early Head Start, an SRS funded program uses research-based uniform outcome measurements developed jointly by KEHS and SRS staff. Data measured includes child development (social-emotional, and cognitive) health, mental health, parenting skills, and family functioning. Under a contract with KU, Juniper Gardens Children’s Project, KEHS Programs implemented the Early Communications Indicator (ECI) to track language development in the 0-3 population. Another major outcome SRS is now tracking is the overall agency goal that “children will thrive” which will monitor outcomes related to children in all settings.</p>

	KSDE	SRS
State Performance Plan (SPP)	Submitted Part B SPP with no revisions. Collaboration between Part B and Part C on two of the SPP indicators: Early Childhood Outcomes & Transitions. Attended Part B and Part C training provided by the US Dept. of Education. Part B and Part C accessed technical assistance through Mountain Plains Regional Resource Center and National Early Childhood Technical Assistance Center (NECTAC) on SPP collaborative projects. Kansas OSEP verification visit was planned jointly by Part B and Part C staff. MOU between KDHE and KSDE for data sharing for transition indicator for SPP and Annual Performance Report.	Will continue work done by KDHE – provided feedback at ICC table when sought
Public Awareness	KSDE will support public awareness activities in place and work with networks to strengthen these activities, particularly in areas outlined in IDEA: the homeless, children exposed to prenatal, substances, and other sub-populations	SRS will strengthen public awareness by reaching out to the medical community using existing relationships with KACCRRRA and the KU Med Center, informing Kansas child care providers, and by training SRS staff who interact with a large number of young families
Eligibility criteria NOTE: Currently, children turning 3 years in the summer can receive Part B services delivered by Part C providers through the summer after their third birthday. Part B can serve Two year-olds if the third birthday occurs within the school year. Extended School Year Services through Part B are not necessary for summer services to continue during the transition from Part C to Part B for children with third birthdays in the summer.	“KSDE supports retention of the current eligibility criteria...”	SRS might propose change. Based upon stakeholder input. SRS has heard from stakeholders that summer services for Part C children turning three are not available in all communities and would like to see this gap closed if it exists by services being continually available throughout the summer statewide.(Example: Early Head Start eligibility criteria were changed to include children ages four to ensure no loss of services when children transition from EHS (0-3) to Head Start. This was a gap in services identified by stakeholders that has now been eliminated.)
Related programs – listed	SSS, Part B – Section 619, Teacher Licensing, Parents As Teachers, Four Year Old At-Risk, Migrant/Even Start, Reading First, Nutrition Services, Family and Consumer Sciences, School Readiness Project, Early Learning Guidelines, Ks Project for	Child Care Development Fund, Child Care for Children with Special Needs, KACCRRRA, TEACH, Infant-Toddler Project, Early Childhood Apprenticeship, Early Head Start, Head Start Collaboration Office, Early Learning Guidelines, Parent Education

	Deaf-Blind, Vision Impaired InService in America (VIISA), Inclusive Network of Kansas, Integrated Data Management and Support System Priority, Summer Institute, Family Support Project with the Beach Center	Project with KU Medical Developmental Disabilities, Therapeutic Preschool Services, SED Waiver Services, EPSDT
	KSDE	SRS
Comprehensive System of Personnel Development (CSPD)	<p>KSDE provides funding for pre-service through Early Childhood Higher Education Options (ECHO) – Part C uses the KSDE Ks Educational Employment (bulletin) Board for recruitment of staff – Ks InService Training System provides in-service training to professionals B-5</p> <p>KSDE provides CSPD plan and services for Part C. KSDE provides teacher licensure.</p> <p>KSDE funds specific training projects for Part C through the State Improvement Grant.</p> <p>Training is provided on Early Childhood Outcomes and transition throughout the state.</p> <p>Collaborative training with Head Start is facilitated by the Kansas Inservice Training System.</p> <p>Training on writing IEPs and IFSPs is provided through Project SPOT and Kansas Inservice Training System. Summer Institute is sponsored in conjunction with IHEs and KITS for Part C and Part B.</p> <p>Inclusive Networks of Kansas provides individual child assistance through field based consultants for birth through 21. Vision screening training is provided to birth through 5 through the deaf/blind grant at KSDE.</p>	<p>SRS assures training of agency staff, early childhood providers, and Early Head Start staff via grant funding to several agencies. Training includes: early intervention training for child care providers statewide. SRS provides funding to the Kansas Head Start Association to provide training, conferences, and to maintain a training web site for Head Start and other Early Childhood professionals in a wide variety of topics. SRS funded Home Visitation Training Initiative which resulted in availability of home visitor training for all programs in Kansas using home visitors for service delivery, including Part C.</p> <p>SRS funds in-service training for Foster Care contractors and is partnering to provide training to community mental health providers regarding Early Childhood Mental Health. SRS also co-sponsors/assists in funding the Parent Advocacy Event held in partnership with the SICC.</p>
Child find	KSDE has statutory responsibility for child find according to federal law. Child Find is more than just screening at the local level.	SRS staff participate in child find activities at local level; EHS programs are primary referral source for Part C; CAPTA requires assessment of foster care children
Dispute Resolution	KSDE staff (including attorneys specializing in education and special education law) and contracts in place to provide complaint investigation, mediation, and due process under IDEA	SRS has experience with dispute resolution and mediation with various contractors and service providers and their consumers, including programs covered by IDEA.
IDEA experiences	Extensive experience -specific to IDEA law, regulations, and	Extensive experience specific to IDEA law and regulations

	Education Department and General Administration Regulations (EDGAR)	
--	---	--

	KSDE	SRS
Other federal experience	<p>KSDE has multiple programs and projects that require working with and implementing federal regulations besides IDEA. Some examples of these programs are Title I Part A, Title I, Part B Reading First, Title I, Part C Migrant Education, Title I, Part D Neglected and Delinquent, Title I, Part E Comprehensive School Reform, Title II, Part A Teacher Quality, Title II, Part B Mathematics and Science Partnerships, Title II, Part D Education Technology, Title III, English Language Acquisition, Title IVA Safe and Drug Free Schools and Communities, Title IVB 21st Century Community Learning Centers, Title V Innovative Programs, Title VI Rural Education Achievement Program including Small Rural Schools and Rural Low-Income Schools, and McKinney Vento Homeless Education. General federal experiences as it relates to early childhood include administration of the Migrant/Even Start Program, Reading First Program, Child and Adult Care Food Program; Kansas Project for Deaf-Blind for children birth through 21 years of age, and Infant/Toddler Vision Impaired Inservice in America (VIISA) Training.</p>	<p>SRS has extensive experience in working with federal programs that affect the lives of children with disabilities. Including: the Federal Rehabilitation Act, EPSDT, the ADA, as well as the Kansas Developmental Disabilities Reform Act. SRS also works with on a continuous basis with federal partners regarding services provided through the Home & Community Based Services, food Stamps, Temporary Assistance to Needy Families, Child Care Development Fund, Low Income Energy Assistance, Social Services block Grant, Good Start/Grow Start (NCLB) and others.</p>