

Public Input Notice for PROMISE

OVERVIEW OF PROGRAM

Purpose of Program: Promoting the Readiness of Minors in Supplemental Security Income (PROMISE) is a joint initiative of the U.S. Department of Education (ED), the U.S. Social Security Administration (SSA), the U.S. Department of Health and Human Services (DHHS), and the U.S. Department of Labor (DOL) to fund model demonstration projects (MDPs) in States to promote positive outcomes for children who receive Supplemental Security Income (SSI) and their families. The purpose of this program is to improve the provision and coordination of services and supports for child SSI recipients and their families in order to achieve improved outcomes, such as completing postsecondary education and job training to obtain competitive employment in an integrated setting that may result in long-term reductions in the child recipient's reliance on SSI.

Background:

The Supplemental Security Income (SSI) program for children provides cash payments to low income families that have a child with a severe disability based on SSA disability eligibility criteria and, in most States, entitles the child to Medicaid health care coverage. This means-tested cash payment is a vital source of income for families of children under the age of 18. To qualify for SSI, children and their families must meet

income, asset, and disability eligibility criteria. To meet the SSI disability eligibility criteria, a child must have a medically determinable physical or mental impairment which results in marked and severe functional limitations, and which can be expected to result in death or which has lasted, or can be expected to last, for a continuous period of not less than 12 months (42 U.S.C. 1382(c)). In 2011, SSA paid roughly \$9.4 billion to 1.3 million children with an average monthly payment of \$592 per child. In 2012, the maximum per month payment for a child eligible for SSI was \$698 (GAO 12-497).

As mandated in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, child SSI recipients must have eligibility for SSI re-determined once they reach age 18 using the more stringent adult eligibility criteria¹. Approximately 60 percent of child SSI recipients receive SSI as an adult (Hemmeter et al., 2009). Of those who leave the program at age 18 either because they did not meet the adult SSI disability criteria or for other reasons, about one-fourth return to the program within 4 years (Hemmeter & Gilby, 2009). The probability of remaining on SSI varies substantially by recipient characteristics, but especially by the type and

¹ "Using the adult program rules, eligibility is based on the inability to perform substantial gainful activity". From: Social Security Bulletin, Vol. 69. No 4. 2009 (<http://www.ssa.gov/policy/docs/ssb/v69n4/index.html>).

significance of the impairment experienced by the individual (Hemmeter et al., 2009).

The child SSI recipients who become adult SSI recipients continue to face many challenges. Rangarajan et al., (2009) report the following data (from 2000) for young adults with continuing payments:

- *Low educational attainment rates:* 39 percent did not have a high school diploma and were not currently attending school. By comparison, only 11 percent of all young adults ages 16 to 24 had dropped out of school and had not received a diploma.

- *Low employment rates:* 22 percent were employed in a job, compared with a 69 percent employment rate for all adults ages 20 to 24.

- *Low postsecondary enrollment rates:* 6 percent were enrolled in some form of postsecondary education after graduating from high school, compared with 41 percent of all youth ages 18 to 23.

- *Low enrollment rates in vocational rehabilitation:* Only 13 percent had ever received services from a State vocational rehabilitation agency.

- *High arrests rates:* Approximately one-fifth had been arrested, which is consistent with other reports, (e.g., Quinn,

Rutherford, Leone, Osher, & Poirier, 2005) indicating that 30 to 50 percent of incarcerated youth have disabilities that could qualify them for support services, such as special education.

- *High rates of disconnection overall:* 57 percent were not enrolled in education programs, not receiving vocational rehabilitation (VR) services, and not employed.

Parents and other family members of child SSI recipients also face many challenges and are in need of support services. According to Davies et al., (2009), about one-third of the parents of child SSI recipients have less than a high school education, and almost half of these children live in a household with at least one other person with a disability. There also is clear evidence that child SSI recipients and their families lack information about various work incentives² available to them to help them pursue activities that would increase self-sufficiency (Fraker & Rangarajan, 2009; Loprest & Wittenburg, 2005).

The structure of services to help children with disabilities who are SSI recipients transition from school to postsecondary education and competitive employment may also be a barrier to achieving self-sufficiency and independence. Not all child SSI recipients will receive transition services as an adult because many services, including vocational rehabilitation

² Supplemental Security Income (SSI) programs include a number of employment support provisions commonly referred to as "work incentives." Additional information about SSI work incentives is available at <http://www.socialsecurity.gov/redbook/eng/ssi-only-employment-supports.htm#2>

(VR) and mental health services, are not entitlements (Hemmeter et al., 2009). In addition, there are concerns related to gaps (e.g., differing eligibility requirements and goals) in the coordination of transition services provided by Federal, State, and local governments, as noted in a series of U.S. Government Accountability Office (GAO) reports over the past decade (GAO, 2003, 2008, 2012).

There have been calls to strengthen coordination among agencies to improve postsecondary education and employment outcomes for children with disabilities by (1) developing interagency partnerships that integrate educational and employment services and supports, including blending resources and providing waivers of Federal and State regulations; and (2) providing coordinated individual and family-centered interventions that utilize evidence-based transition services (SSA, 2003). Ideally, and where appropriate, child SSI recipients who are served under Part B of the Individuals with Disabilities Education Act (IDEA) would receive coordinated transition services such as those available through IDEA, the Vocational Rehabilitation State Grants program, SSA's Ticket Program and Work Incentives Program, Medicaid's care coordination services, Job Corps, and other Workforce Investment Act programs.

Unfortunately, there is no strong evidence on the effectiveness of specific services for youth with disabilities who are transitioning from school to post-school activities. More research is needed to identify effective interventions, although there are some suggestive findings.³ In addition, the National Survey of SSI Children and Families (NSCF) found that the probability of remaining on SSI was substantially lower for those who were employed prior to age 18 (Hemmeter et al., 2009). Other correlational studies suggest that better postschool outcomes for children with disabilities may be linked with the following: (1) primary and secondary school activities such as inclusion in general education, exposure to career awareness and community activities, and education on skills such as self-awareness, self-advocacy, and independent living; (2) interagency collaboration; and (3) education and supports for the families, including ways to encourage parental participation in Individualized Education Program (IEP) Team meetings, financial and career planning courses, and transition plans for moving off of SSI (Test, et al., 2009).

To address these concerns about barriers, to encourage new ways of providing support, and to build an evidence base on the effectiveness of promising interventions, the Consolidated

³ A forthcoming review of the rigor and results of research on transition over the last two decades finds that few conclusions about what works can be drawn with confidence (Cobb et al. forthcoming).

Appropriations Act, 2012 (P.L. 112-74) provided funds for activities aimed at improving the outcomes of child SSI recipients and their families. Specifically, the fiscal year (FY) 2012 appropriation for Special Education included \$2 million to support activities needed to plan and initiate implementation of the PROMISE initiative. In addition, the FY 2012 Consolidated Appropriations Act included language that allows the Secretary to use amounts that remain available subsequent to the reallocation of funds to States under the Vocational Rehabilitation State Grants program pursuant to section 110(b) of the Rehabilitation Act of 1973, as amended, for improving the outcomes of child SSI recipients and their families under the PROMISE initiative. These funds, which remain available for Federal obligation until September 30, 2013, will be used to support PROMISE grant awards and related activities.

Children receiving payments under the SSI program need a continuum of coordinated services and supports to prepare for the transition to postsecondary education and competitive employment and to continue on a path to achieving economic self-sufficiency. Through the PROMISE program, ED intends to implement and evaluate State MDPs that will help to build an evidence base for practices that improve the educational and employment outcomes of child SSI recipients and their families.

Based on our review of the available research, extensive public input, and consultation with experts, ED believes that building effective partnerships will increase the likelihood of success of the PROMISE MDPs by improving the coordination of services and integrating multiple funding sources and other resources at the State and local levels, as well as contributing to their ability to effectively serve these individuals. We also believe that focusing on the needs of families, as well as children, may help further the long-term goal of independence and self-sufficiency for these child SSI recipients. In particular, we are interested in testing whether intervening with the child and family at an earlier age (14 to 16 years of age) will lead to better outcomes.

For this reason, each PROMISE project must have several core features including: (1) strong and effective partnerships with agencies responsible for programs that play a key role in providing services to child SSI recipients and their families; (2) a plan to provide a set of coordinated services and supports, and implement effective practices targeted to the needs of child SSI recipients and their families; and (3) the capacity to achieve results, including the capacity to implement the required project design and adhere to data collection protocols in order to test and rigorously evaluate the results of the project. The first four months of the project period

will be used for planning and finalizing all aspects of the MDP, such as establishing formal partnerships, securing memorandums of understanding (MOUs) with the lead coordinating entity as described in the *Eligibility Requirements*, and collaborating with the national evaluator to plan for participant outreach and recruitment.

In developing their MDPs, ED expects States to draw on their knowledge and experience in working with children and families with similar characteristics (i.e., those living in poverty and those with family members with disabilities) as well as on the relevant literature to identify innovative methods of providing services and supports that show potential to improve the economic self-sufficiency of these children and their families. However, based on the review of literature, input from non-Federal experts, and expertise of the Federal PROMISE partners, we have identified a small subset of services that each project will be required to provide. In addition, we have identified examples of other services and supports that we ask States to consider as they develop their MDPs (see *Services and Supports* under the *Priority* section).

Projects will be required to collaborate with, and provide data and information to, evaluators who will conduct a rigorous national evaluation of PROMISE under a contract administered by SSA. ED and its Federal PROMISE partners intend to use the

findings and results of these projects to inform public policy and to build an evidence base for improving postsecondary education and employment outcomes of child SSI recipients and their families.

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needed for children's benefits (GAO-12-497). Washington,
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Input Provided in Developing the PROMISE Initiative

ED, in collaboration with its Federal PROMISE partners, gathered information through a literature review and obtained public input from January to November of 2012 to inform the development of the PROMISE initiative. Four primary avenues were used to gather public input: focus groups with stakeholders, panel discussions with internal/external experts, consultations with philanthropic foundations, and discussions with disability advocacy groups. ED will continue to gather input prior to publication of the notice inviting applications (NIA). [Note: Additional information on the input ED has received can be found at www.ed.gov/promise.]

Waiver of Proposed Rulemaking:

Under the Administrative Procedure Act (5 U.S.C. 553), ED generally offers interested parties the opportunity to comment on proposed priorities. Section 437(d)(1) of the General

Education Provisions Act (GEPA), however, allows the Secretary to exempt from rulemaking requirements and regulations governing the first grant competition under a new or substantially revised program authority. This is the first grant competition for this initiative, as authorized under the Fiscal Year 2012 Consolidated Appropriations Act, and therefore qualifies for this exemption. Due to the extensive public input received in the development of this priority, and in order to ensure timely grant awards, the Secretary has decided to forego formal public comment on the proposed absolute priority under section 437(d)(1) of GEPA. The Secretary is seeking input on the proposed grant requirements through this public input notice.

Request for input on the Overview of Program section:

ELIGIBILITY REQUIREMENTS

Eligible applicants are the 50 States and the District of Columbia. A consortium of States may also apply in order to meet the eligibility requirement in paragraph (c) below.

An applicant must meet the following requirements to be eligible to compete for funding under this program:

(a) The State or consortium of States must designate a lead coordinating entity, which must be a State agency, and the application must be signed by the State's Governor and the lead coordinating entity. If applying as a consortium, the

application must be signed by the Governors of the States in the consortium as well as the lead coordinating entity.

Request for input:

Should an organization other than a State agency be eligible to apply as the lead coordinating entity as long as the leadership of the organization is appointed by (or is under the authority of) the Governor?

Would a non-State entity have the ability to effectively bring together the necessary partners and coordinate program activities?

(b) The lead coordinating entity must partner with other State agencies and is encouraged to partner with local agencies and organizations that play or have the potential to play a substantial role in the development and implementation of policies and practices affecting child SSI recipients and their families (see related project and application requirements).

(c) The State or consortium of States must have a sufficient number of children between the ages of 14 and 16 who receive SSI to recruit the minimum sample size of 2,000 child SSI recipients into the MDP and provide MDP interventions to half of those recruited. This sample size is necessary to assess the effectiveness of each MDP. Each MDP will be evaluated separately because ED and its Federal PROMISE partners expect grantees to vary in their approaches to implementing PROMISE (see related *Evaluation and Project Assessment Activities*).

PRIORITY

Under an absolute priority, ED plans to fund approximately three to six cooperative agreements for three years with a two-year extension option to establish State MDPs that are designed to improve the education and employment outcomes of child SSI recipients and their families, and eventually lead to increased economic self-sufficiency and a reduction in their dependence on SSI payments. Under this priority projects must--

(a) Develop and implement an MDP that includes interventions for child SSI recipients who are between the ages of 14-16 and their families. The MDP interventions should be based on the best available research evidence or data from State experience relating to coordinating, arranging, and providing services and supports for child SSI recipients and their families.

The MDP interventions should be designed to meet PROMISE's expected goals (for both the children and their families), which include:

- Increased educational attainment;
- Improved rates of employment, wages/earnings, and job retention;
- Increased total household income; and
- Long-term reduction in SSI payments.

Request for input:

Under the draft priority, a child SSI recipient must be between the ages of 14 and 16 at the time the project services are initiated to be eligible to participate in the MDP. This will allow the child and family participants to receive at least two years of project services prior to the child's age 18 SSI redetermination. Should the priority also allow child SSI recipients who are 17 years of age when services are initiated to participate in the MDP? Or do participants need to receive more than one year of project services prior to the age 18 SSI redetermination in order to achieve the desired outcomes of this program?

(b) Establish partnerships and subgrants with State and local agencies and other entities to improve interagency collaboration in carrying out the MDP interventions and in developing innovative methods of providing services and supports through these partnerships that will lead to better outcomes for child SSI recipients and their families. For example, this could include better use of existing services, identification of gaps in services, and sharing resources, data, or other information so long as such sharing of data or information is permitted under any applicable laws or regulations that protect the confidentiality or privacy of personally identifiable information or records;

(c) Participate, and require any subgrantees or partners to participate, in collaboration with the national evaluator, in ongoing data collection and analysis, in a manner consistent with any applicable Federal and State laws or regulations that protect the confidentiality or privacy of personally

identifiable information or records, both to determine the effectiveness of the MDP, including specific interventions, and to allow for mid-course corrections in the project as needed during the demonstration period, including--

(1) cooperate with the national evaluator in the random assignment of eligible child participants and their families either to a group that receives the MDP interventions (treatment group) or to another group that receives services they would ordinarily receive (control group) and in the collection of data for the evaluation as permitted under applicable Federal and State law; and

(2) for ongoing program improvement purposes, design and implement a plan for continually assessing the progress of the MDP intervention.

Fourth and Fifth Years of the Project:

In deciding whether to continue funding the project for the fourth and fifth years, the Secretary will consider the requirements of 34 CFR 75.253(a), and in addition--

(a) The recommendation of a review team consisting of experts selected by the Secretary. This review will be conducted during a one-day intensive meeting in Washington, DC, that will be held during the last half of the second year of the project period. The project must budget for travel expenses associated with this one-day intensive review;

(b) The timeliness and effectiveness with which all requirements of the negotiated cooperative agreement have been or are being met by the project; and

(c) The quality, relevance, and usefulness of the project's activities and products; the degree to which the project's activities and products are aligned with the project's objectives; and the likelihood that current performance and progress will result in the project achieving its proposed outcomes.

Request for input on the *Priority* Section:

To be considered for funding under this absolute priority, applicants must meet the project, application, and administrative requirements contained in this priority.

Project Activities

To meet the requirements of this priority, each project, at a minimum, must conduct the following activities.

Partnerships

(a) Establish a formal partnership with agencies and organizations in the State that play or have the potential to play a substantial role in the development and implementation of policies and practices affecting child SSI recipients and their families and in the provision of services and supports to those children and their families.

(1) At a minimum, partners must include the State agencies or equivalents responsible for administering programs that provide the following services:

- State vocational rehabilitation services under Title I of the Rehabilitation Act;
- Special education and related services under Part B of the IDEA;
- Workforce Development services under Title I of the Workforce Investment Act (WIA), including Youth Services described in WIA (Section 129(c)(2));
- Medicaid services under Title XIX of the Social Security Act;
- Temporary Assistance for Needy Families under the Personal Responsibility and Work Opportunity Reconciliation Act;
- Developmental/intellectual disabilities services; and
- Mental health services.

(2) An applicant may propose a partnership that excludes a required State partner described in (a)(1) of this section if the applicant provides a strong justification for doing so. However, at least three of the required partners, including the lead coordinating entity, must participate in the partnership. A strong justification for excluding a required State partner may be an explanation of how the applicant will provide the

required services and supports (described in *Services and Supports*, paragraph (b)(1)) and other proposed services and supports (described in *Services and Supports*, paragraph (b)(2)) to the child participants and their families without the participation of the required partner(s).

(3) In order to meet the requirements described in (a)(1) or (a)(2) of this section, applicants may propose to include an established State-level interagency entity such as a State Transition Coordinating Council.

(4) The applicant may propose other partners that the project believes would facilitate the success of the project such as Employment Networks under the Ticket to Work Program, employers or employer organizations, community colleges, institutions of higher education, independent living centers, and agencies that administer or carry out adult education programs, career and technical education programs, and maternal and child welfare programs.

(5) Establish procedures governing the exchange between the partners of any information protected by any applicable Federal or State laws or regulations that protect the confidentiality or privacy of personally identifiable information or records. This includes establishing procedures to ensure that personally identifiable information from education records is exchanged among the partners in compliance

with the requirements of the Family Educational Rights and Privacy Act (FERPA⁴ and the IDEA confidentiality of information provisions, which protect the privacy of personally identifiable information in education records and generally require consent for the disclosure of such information to third parties). Other privacy laws should be considered, for example, the Health Insurance Portability and Accountability Act specifies privacy and security rules protecting health information. In addition, under the State Vocational Rehabilitation Services Program, the requirements in 34 CFR §361.38 (protection, use, and release of personal information) would apply to any records of participants in that program.

⁴Applicants must ensure the confidentiality of individual data, consistent with the requirements of FERPA, 20 U.S.C. § 1232g, the confidentiality of information provisions in section 617(c) of the IDEA, and any other applicable Federal or State laws or regulations protecting the privacy or confidentiality of personally identifiable information or records. FERPA generally prohibits school districts and schools that receive federal funds from the U.S. Department of Education from disclosing student information that alone, or in combination with other information, can identify that student, without the prior written consent of a parent or the student (if that student is 18 years of age or older and attends a postsecondary institution). See 20 U.S.C. § 1232g and 34 CFR §99.30. However, certain disclosures may occur without parental consent or the consent of an eligible student 18 years of age or older or who is attending an institution of postsecondary education under one of FERPA's specific exceptions to the prior consent requirement. See 34 CFR §99.31. In general and consistent with FERPA, IDEA's confidentiality of information provisions require prior written consent for disclosures of personally identifiable information contained in education records, unless a specific exception applies 20 U.S.C. 1417(c) and 34 CFR §300.622. Questions about FERPA can be forwarded to the Family Policy Compliance Office (www.ed.gov/fpco) at (202) 260-3887 or FERPA@ed.gov.

Request for input:

Given the administrative structure in your State and the State programs that must be included in the partnership (see (a)(1) under Project Activities), would the partnership requirements in this notice be a significant barrier to implementing a successful project in your State? If so, what are those barriers?

Are there State programs or other entities that should be added or removed from the list of required partners in order to ensure that the project can achieve the goals of the PROMISE program? If so, which ones?

Services and Supports

(a) Develop and implement MDP interventions for child SSI recipients and their families that include a coordinated set of services and supports designed to improve the education and employment outcomes of child SSI recipients and their families. The model should also include innovative methods of providing these services and supports, including coordinating and using resources available through existing programs or funding streams.

As part of its MDP, the applicant should propose an array of services and supports that it considers to have the best potential for improving education and employment outcomes (described in the *Performance Measures* section of this notice) for project participants. In selecting the services and supports to be provided, the applicant should consider the best available information on promising strategies and practices,

including, where available, evidence of the effectiveness of the proposed strategies and practices.

(1) As a subset of the proposed services and supports, all projects must provide or arrange for the following --

(i) *Case management*: Each project must provide case management services for the duration of the project to ensure that services for the participating children and their families are appropriately planned and coordinated and to assist project participants in navigating through the services, supports, and benefits available from the larger service delivery system.

Case management services must include at a minimum:

(A) identifying, locating, and arranging for needed services and supports for the children and their families;

(B) coordinating services provided directly by the project with other services that are available in the larger service delivery system; and

(C) transition planning to assist the participating children in setting post-school goals and to facilitate the transition of the participants to an appropriate post-school setting, including postsecondary education, training, and employment⁵. Planning must be conducted in coordination with the

⁵ Under the IDEA, if the public agency convenes an IEP Team meeting to consider the child's postsecondary goals and the transition services needed to assist the child in reaching those goals, to the extent appropriate, with the consent of the parents or a child who has reached the age of majority, the public agency must invite a representative of any participating agency

local educational agency and, as appropriate, with similar local partners, such as the vocational rehabilitation agency, the State Medicaid Agency or other public insurance program, and workforce investment agencies;

(ii) *Benefits counseling and financial capability services*, including on-going training for the child participants and their families on SSA work incentives, eligibility requirements of various programs, earnings rules, asset accumulation, and financial literacy and planning. These services must be provided by a certified Community Work Incentives Coordinator⁶;

(iii) *Career and Work-based learning experiences*: At least one paid work experience in an integrated setting must be provided for children participating in the project before leaving high school. In addition, other work experiences must be provided, such as volunteering or participating in internships, community services, and on-the-job training experiences, including experiences designed to improve work place basic skills (sometimes called "soft skills");

that is likely to be responsible for providing or paying for transition services to that meeting. 34 CFR §300.321(b)(3) of the IDEA regulations.

⁶Community Work Incentives Coordinator is the term for an individual under WIPA (Work Incentives Planning and Assistance) who provides benefit counseling and other services to assist individuals who are receiving SSI and/or Social Security Disability Insurance (SSDI) and are working or planning to work. SSA certifies Community Work Incentives Coordinators after they have completed training.

(iv) *Parent training and information:* At a minimum, the project must provide information and training to the family/parents of participating children with respect to:

(A) the parents' role in supporting and advocating for their children's education and employment goals, including the importance of high expectations for their children's participation in education and competitive employment;

(B) resources for improving the economic self-sufficiency of the family, including through --

(I) the acquisition of basic education, literacy, and job readiness skills, and

(II) job training and employment services.

(2) The projects also must provide, or arrange for, such other services and supports that are needed, in combination with the required services, to improve education and employment outcomes of participating children and their families. Examples of other services that were suggested by the Federal agencies collaborating on PROMISE for consideration include:

- Youth development activities: Examples include training in job seeking skills, life skills, independent living skills, self-advocacy, self-determination, and conflict resolution; exposure to personal leadership development and mentoring opportunities; and exposure to post-school supports through

structured arrangements in postsecondary education settings and adult service agencies.

- Career development/preparatory activities: Examples include career assessments to help identify career preferences, interests, and skills; career counseling and exploration, including structured exposure to postsecondary education and other life-long learning opportunities, exposure to career opportunities that ultimately lead to a living wage, and information about educational requirements, entry requirements, and income and benefits potential.

- Extended and experiential learning opportunities in integrated settings.

- Job search and job placement assistance, job development, and post-placement employment supports.

- Activities designed to engage employers in providing work experiences and in employing participants of the project.

- Health and behavioral management and wellness services, including transition to adult services.

- Literacy training.

- Training in the use of technology, assistive technology services and devices, including the use of assistive technology for education, training, and employment purposes.

- Independent living activities such as assistance in locating and obtaining housing, health providers, and personal attendant services; transportation training and subsidies; child care services; and other community supports.

Request for input:

What programs and strategies at the State or local level have shown great potential or have been proven to improve educational, employment, or other key outcomes for child SSI recipients and their families?

Participant Outreach and Recruitment

(c) Plan for and conduct activities to ensure that a minimum of 2,000 child SSI recipients and their families enroll in the MDP. Such activities may include mailings, phone calls, informational meetings at State or local agencies or schools, home visits, and other efforts targeted to this population. To assist each funded project in identifying children, SSA will provide the lead coordinating entity with a list of such children and the available contact information.

As part of the plan for outreach and recruitment, the project must provide, with the national evaluator's assistance, a recruitment packet that includes--

(1) A description of the full scope of the project and the goals and objectives of the project with respect to participant outcomes and evaluation activities, including the use of random assignment to determine who will receive MDP interventions, and

an explanation of what will be expected of the control group members (e.g., surveys at 18 and 60 months after the initiation of the project).

(2) An MDP enrollment form, developed by the national evaluator that will include sufficient information to classify the data into subgroups for further analysis.

(3) A written consent form to participate in the project for the child and family using a form that will be developed jointly by the project and the national evaluator. As part of the consent process, the project requirements must be fully explained to the child and family, and the child, if appropriate, and family must sign the consent form⁷. The consent form has two primary purposes. It must seek to obtain the parent's or child's written consent to participate in the program, explaining all relevant information in understandable language and in the parent's native language or other mode of

⁷Under 34 CFR §99.30 of the FERPA regulations, consent must be obtained from the parent or eligible student over 18 years of age or attending an institution of postsecondary education. This consent must be written, signed and dated, and must specify the records that may be disclosed (e.g., education records); state the purpose(s) of the disclosure(s) (e.g., in order for the PROMISE partners to share the student's records and to permit the disclosure of the student's records to the national evaluator for PROMISE); and identify the party or class of parties to whom the disclosure(s) may be made (e.g., specify the PROMISE partners and the national evaluator). Under 34 CFR §300.622 of the IDEA regulations, this prior consent must be obtained from the parent or, if applicable, the student who has reached the age of majority under State law, if parental rights transfer to the student, consistent with 34 CFR §300.520 of the IDEA regulations.

communication⁸. Consent also must be obtained for the disclosure of personally identifiable information from relevant, privacy-protected records. For example, FERPA and IDEA generally require parental consent prior to the disclosure of personally identifiable information from education records to third parties.

All outreach and recruitment materials and forms must be developed and provided in accessible formats for individuals with disabilities, using jargon-free easily-comprehended language, and provided in the family's primary language or other mode of communication, unless it is clearly not feasible to do so. The national evaluator will assist in the development of these materials and forms.

Request for input on the *Participant Outreach and Recruitment*

section:

Technical Assistance and Training

(d) Provide or arrange for technical assistance, professional development, and training for State and local staff who will carry out project and evaluation activities to ensure that the interventions are implemented in accordance with the State model and the needs of the national evaluation. At a minimum, the project must provide for the following:

⁸ See the IDEA definition of consent in 34 CFR §300.9.

(1) Development of all necessary information and materials about the MDP interventions and project assessments, including the roles and responsibilities of all partners and staff at the State and local levels;

(2) Twice-a-year meetings, located either at the location of the lead coordinating entity or at a central location in the State in which local site staff are required to participate and for which their participation is supported with project funds. The types of professional development and training to carry out the MDP interventions will be determined by the lead coordinating entity, its partners, and ED. The professional development will be provided by personnel from those entities or other experts. One or more sessions at the bi-annual meetings will be led by the national evaluator in order to train appropriate State and local staff on the evaluation requirements, including random assignment and data collection consistent with any applicable Federal or State laws or regulations that protect the privacy or confidentiality of any relevant data. The first bi-annual meeting must occur early in the first year of the project; and

(3) Other ongoing technical assistance that the lead coordinating entity and its partners, including the national evaluator, determine is necessary for fidelity of implementation

of the MDP interventions, and the evaluation and project assessment activities.

Request for Input on the *Technical Assistance and Training*

section:

Evaluation and Project Assessment Activities

Each project must be designed to show progress in the key outcome measures to be evaluated under the PROMISE initiative (described in the *Performance Measures* section of this notice), as well as the other outcomes that a project proposes to measure. To meet the requirements of this priority, each project, at a minimum, must conduct and/or participate in the following activities.

Rigorous Program Evaluation

(a) SSA, in collaboration with ED, will conduct a rigorous evaluation of the PROMISE program using randomized controlled trials to obtain evidence of the effectiveness of the MDP interventions carried out under the PROMISE program. Projects and their designated partners at the State and local levels must:

(1) Agree to allow random assignment to determine which half of the at least 2,000 children and their families recruited for the project will receive the MDP interventions (treatment group) and which half of the children and families will receive the services they ordinarily receive (control group);

(2) Ensure that State or local site staff, wherever MDP enrollment forms are being collected, will assist in the random assignment process. This assistance will require staff to provide information from each child's enrollment form (e.g., name, social security number, gender, disability, age) to the evaluator through a secure web-based random assignment system or a secure phone system. Both the web and phone systems will be developed by the national evaluator. After staff provide the data items that are necessary to conduct the random assignment, the results of the random assignment will be immediately available;

(3) Ensure that State or local staff communicate the results of the random assignment to the child SSI recipients and their families;

(4) Provide the MDP interventions only to the children and their families assigned to the treatment group; and

(5) Agree to require State and/or local staff involved in the random assignment process to receive training from the national evaluator at the technical assistance and training meetings (described in *Technical Assistance and Training*, paragraph (d)(2)) arranged by the State.

Formative Evaluation

(b) Develop and implement a plan for conducting a formative evaluation of the project's activities/model, consistent with

the proposed logic model and data collection plan, to assess the project's performance and progress in achieving its goals and inform decision making.

Request for input on the *Evaluation and Project Assessment*

Activities section:

Performance Measures

Each project must be designed to track its progress on the key outcomes to be evaluated under the PROMISE program as well as the other outcomes that a project proposes to measure.

(c) In collaboration with the national evaluator, the performance of the PROMISE program will be assessed on the basis of established key outcome measures for participating child SSI recipients and their families, as reflected in the goals of the program provided in the priority:

(1) Increase educational attainment (high school completion, graduation (diploma or equivalent) and enrollment and persistence in postsecondary education, training, or the military;

(2) Increase the number of individuals earning credentials after high school (e.g., postsecondary degree, technical certification, occupational licensure, or other industry-recognized credential);

(3) Improve employment outcomes (e.g., competitive employment, average earnings, number of hours worked per week, job retention);

(4) Changes in the use of public benefits provided to the individual or family (e.g., cash benefits and other benefits with directly measurable economic value);

(5) Changes in total gross income of all the members of a household who are 15 years old and older. (Included in the total are amounts reported separately for wage or salary income; net self-employment income; interest, dividends, or net rental or royalty income or income from estates and trusts; Social Security or Railroad Retirement income; Supplemental Security Income; public assistance or welfare payments; retirement, survivor, or disability pensions; and all other income.); and

(6) Post-program reduction in SSI payments (e.g., differences between amounts of payments to children and their families who participated in the MDP interventions and the amounts paid to the other group randomly assigned to receive typical services).

(d) In addition to the key program outcome measures described in paragraph (c), each project must develop project measures that assess the project's performance in achieving its goals consistent with the purpose of the priority and the project's logic model.

(1) The set of project measures should include interim measures that assess the progress toward achieving the project's outcomes, including the attainment of milestones and benchmarks consistent with the logic model. For example, the project may consider measures related to school attendance, project attrition, work experiences, enrollment in education or workforce development programs, or the use of partner-provided services for which the child participants and their families are eligible.

(2) The project must report progress and performance on its measures at least quarterly and use this information to inform decision-making consistent with any applicable Federal or State laws or regulations that protect the privacy or confidentiality of any personally identifiable information in such systems.

Request for input on the *Performance Measures* section:

Data Collection

(a) Develop and implement a plan for collecting data and for cooperating with the national evaluator in its efforts to obtain data and other information on the MDP. The plan must be designed to ensure that the project will:

(1) Assist in collecting baseline (pre-program) data using the MDP enrollment form provided by the national evaluator.

(2) Require project partners and staff at the State and local levels to cooperate with the national evaluator's efforts

to obtain descriptive information on project implementation such as through surveys, focus groups, or other methods.

(3) Have the capacity to track and manage project information, such as referrals and service participation, and document the services and supports received by the child participants and their families.

(4) Ensure the State administrative data collected by various State agency PROMISE partners are shared with the national evaluator, subject to obtaining required consent under FERPA and IDEA and any other applicable Federal or State laws or regulations that protect the privacy or confidentiality of personally identifiable information or records so as to permit the disclosure of this administrative data to the national evaluator. These State data may include information related to service provision, interim and long-term outcomes, or progress and performance identified in the priority or by the project. Examples of State administrative data include education records (e.g., transcripts, State assessment data, attendance records, high school completion data, postsecondary enrollment information) maintained by a State educational agency through its statewide longitudinal data system, employment and earnings information obtained through the State Unemployment Insurance system, service data collected by the State Vocational

Rehabilitation system, and health records through the State Medicaid office.

(5) Collect data to evaluate the performance of the PROMISE MDPs on the key outcome measures described in the Priority, and develop and implement a process to identify and collect the data needed to support project measures that assess the project's progress and performance in achieving its goals consistent with the purpose of the priority and the project's logic model, including making data available from its statewide longitudinal data systems.

(6) The evaluation will require unique program identifiers that can be matched to various data systems.

Request for input:

Do States have an existing management information system or system that could be easily adapted for the purpose of managing the MDP? For example, a State may have a system that has the capacity to track referrals and service participation, including documenting the services and supports received by the child and their family.

Other Project Requirements. To meet the requirements of this priority, each project, at a minimum, must conduct the following activities:

(a) Maintain ongoing telephone and e-mail communication with the OSEP Project Officer and other PROMISE projects funded under this priority;

(b) Maintain detailed documentation sufficient for model replication purposes, should the model be successful, including

the sources of support for services to participants (other than direct project funds) such as services provided through existing State and local programs;

(c) Communicate and collaborate on an ongoing basis with other federally-funded projects to share information on successful strategies and implementation challenges regarding the coordination of services and supports for child SSI recipients and their families in achieving improved outcomes. ED will encourage ED-funded projects to cooperate with, and provide technical assistance to, PROMISE MDPs when appropriate. Examples of federally-funded technical assistance centers and projects to consider in sharing information include the National Dropout Prevention Center for Students with Disabilities (<http://www.ndpc-sd.org>), National Secondary Transition Technical Assistance Center (<http://www.nsttac.org>), State Implementation and Scaling-up of Evidence-based Practices Center (<http://www.sisep.fpg.unc.edu>), Postsecondary Education Programs Network (<http://www.pepnet.org>), IDEA Partnership (<http://www.ideapartnership.org>), National and Regional Parent TA Centers (<http://www.parentcenternetwork.org>), Parent Training and Information Centers, Community Parent Resource Centers, Independent Living Research and Utilization Project (<http://www.ilru.org>), National Collaborative on Workforce and Disability for Youth (<http://www.ncwd-youth.info>),

Rehabilitation Research and Training Centers, The National Technical Assistance Center for Children's Mental Health (<http://gucchdtacenter.georgetown.edu>), The Solutions Desk on Helping Youth Transition (<http://www.syvsd.ou.edu>), Healthy & Ready to Work National Resource Center (<http://www.syntiro.org/hrtw>), TA Partnership for Child and Family Mental Health (<http://www.tapartnership.org>), and the National Center for Mental Health Promotion and Youth Violence Prevention (<http://www.promoteprevent.org>).

(d) The project must maintain a Web site that includes relevant information about the MDP in a format that meets government or industry recognized standards for accessibility.

(e) Maintain contact with the national evaluator.

Request for input on the *Other Project Requirements* section:

APPLICATION REQUIREMENTS. To be considered for funding under this absolute priority, an applicant must include in its application--

(a) A description of the proposed project, including the applicant's plan for implementing the project. The description must include--

(1) A cohesive articulated model of partnership and coordination among the agencies and organizations;

(2) A logic model that depicts, at a minimum, the goals, activities, outputs, and outcomes of the proposed project. The

logic model must distinguish the contributions of each partner to the activities, outputs, and outcomes of the proposed project. A logic model communicates how a project will achieve its outcomes and provides a framework for the formative evaluation of the project; and

Note: The following Web sites provide more information on logic models:

www.researchutilization.org/matrix/logicmodel_resource3c.html

and www.tadnet.org/model_and_performance.

(3) Timeline for implementing the model and achieving project milestones and outcomes consistent with the logic model and the requirements of this priority.

(b) A description of the coordinated set of required and other services and supports that the project proposes to provide to the children and their families participating in the project, in order to meet the project's objectives. The description must describe how the services and supports will be provided, including whether the project will provide the services directly or will arrange for the services through its partners or other entities (see *Project Requirements* related to the development and implementation of project services and interventions).

(c) A detailed description of any evidence that the services and supports proposed by the applicant have been implemented previously with the targeted population(s) of child

SSI recipients and their families, or similar population, albeit on a limited scale or in a limited setting, has yielded promising results that suggest that more formal and systematic study is warranted. An applicant must provide a rationale for the coordinated set of services or supports that is based on research findings or reasonable hypotheses, including related research or theories in education and other sectors.

(d) A detailed description of the project's proposed partners (see *Project Requirements* related to establishing a partnership) that will play a key role in coordinating services and implementing the interventions in the proposed model, including a description of--

(1) The proposed partners' roles and responsibilities under the project;

(2) The proposed partners' commitment to the project and their responsibilities under the project, including letters of intent from the proposed partners to enter into an MOU with the lead coordinating entity as described in the *Eligibility Requirements*;

(3) The plan to coordinate services among partner agencies and other entities to ensure that project resources are used efficiently; and

(4) The justification to exclude a required State partner, if applicable (described in *Project Activities*, paragraph (a)(3)).

(e) A description of the proposed outreach and recruitment plan, including --

(1) The methods and criteria for ensuring that the project will enroll at least 2,000 child SSI recipients and their families (described in *Eligibility Requirements*, paragraph (c)), including an assurance that the applicant will enroll a minimum of 2,000 child SSI recipients and their families in the project.

(2) An assurance that the applicant will secure a signed written consent to participate in the project from the family and child, if applicable, that the consent form will be provided to the child and family in an accessible format, and that, as part of the consent process, participant requirements will be fully explained to the child and family and that participation in the program is voluntary on the part of the family, or child, if applicable. The consent form must also obtain any necessary written consent for the disclosure of personally identifiable information from relevant records, consistent with FERPA and the IDEA, and any other applicable Federal or State laws or regulations that protect the privacy or confidentiality of personally identifiable information or records.

(f) A description of the applicant's commitment to work with ED and SSA, and with a national evaluator for PROMISE to ensure that random assignment and data collection are completed in a manner that supports ED's and SSA's efforts to conduct a rigorous national evaluation of the PROMISE program and the specific interventions and strategies implemented by individual grantees. The application must include an assurance that--

(1) through MOUs with partners and other appropriate entities, project staff will assist with the random assignment of recruited children and their families; that the national evaluator and ED and SSA will be provided access to relevant program and project data sources (e.g., administrative data and program and project indicator data), and that, if requested, ED and SSA will be provided data on a quarterly basis.

(g) An assurance that the applicant will provide or arrange for technical assistance and training to ensure consistency in the implementation and evaluation of the MDP, including the fidelity of implementation of the MDP interventions.

(h) A description of the performance measures (and performance targets), including interim measures, the project will use to assess its performance and progress toward achieving its outcomes and goals, consistent with the logic model and the formative evaluation plan.

(i) A description of the data collection plan that--

(1) outlines how reliable and valid baseline data for program participants will be identified and collected;

(2) outlines the process for assessing, collecting, and sharing participant data and other information outlined in the project data collection requirements in paragraph (b) among the collaborating agencies, in a manner consistent with any Federal or State laws or regulations that protect the confidentiality or privacy of personally identifiable information or records, to support the implementation and evaluation of the model; and

(3) identifies the systems or tools that will be used for storing, managing, analyzing, and reporting data, including a description of the applicant's capacity to track and manage project information, such as referrals and service participation, and document the services and supports received by the children and their families, and for communicating among the collaborating agencies to implement the model's services, processes, and data plan.

(j) A description of the applicant's plan, consistent with the proposed logic model and data collection plan, for conducting a formative evaluation of the proposed project's activities/model, including--

(1) how formative participant and system data will be periodically collected, as appropriate, including data related to the fidelity of implementation, stakeholder acceptability, and descriptions of the site context;

(2) how these data will be reviewed by the project, when they will be reviewed (consistent with the timeline required in paragraph (a)(3) under Application Requirements), and how they will be used during the course of the project to adjust the model or its implementation to increase the model's usefulness, generalizability, and potential for sustainability; and

(3) how the formative evaluation will use clear performance objectives to ensure continuous improvement in the operation of the proposed project, including objective measures of progress in implementing the project and ensuring the quality of products and services.

Request for input on the *Application Requirements* section:

WAIVERS

In order to maximize the effectiveness of the MDPs, applicants may propose waivers of existing authorities. Waivers may apply to States, agencies, programs, children, or families. The projects should propose any waivers thought to be necessary for the successful implementation of the project. However, whether waivers will be allowed will be at the sole discretion of the relevant Federal or State agency, consistent with

applicable Federal laws and regulations. For example, waivers of SSA program rules will be approved or denied by SSA. Waiver requests not currently allowed by existing law will require Congressional authorization.

Request for input:

What waivers should be available to the PROMISE MDPs? Of particular interest are the waiver authorities of programs administered by the U.S. Departments of Education, Labor, and Health and Human Services, and the Social Security Administration.

What are the legislative, regulatory, or other barriers that impede a community's ability to implement the most cost-effective strategies to assist children who receive SSI and their families?

Type of Award: Cooperative agreement.

Estimated Range of Awards: \$4,500,000 to \$10,000,000.

Maximum Awards: We will reject any application that proposes a budget exceeding \$10,000,000 for a single budget period of 12 months. The Acting Assistant Secretary for Special Education and Rehabilitative Services may change the maximum amount through a notice published in the Federal Register.

Estimated Number of Awards: 3-6.

Note: The Department is not bound by any estimates in this notice.

Request for input on the Awards section:

Invitational Priority:

Under this competition we are particularly interested in applications that address the following priority. For FY 2013 and any subsequent year in which we make awards from the list of unfunded applicants from this competition, this priority is an invitational priority. Under 34 CFR 75.105(c)(1) we do not give an application that meets this invitational priority a competitive or absolute preference over other applications.

This priority is Outcome-Based Payments.

The Secretary is especially interested in applicants that propose to incorporate into their PROMISE MDP an Outcome-based Payment (OBP) model that ties payments to providers based on the achievement of outcomes or established milestones.

The OBP model has been used in the health-care arena to offer financial rewards to providers who achieve, improve, or exceed their performance on specified quality, cost, and other benchmarks. Under an OBP arrangement, providers are rewarded for meeting pre-established targets for delivery of services thus creating an incentive to meet performance objectives. This arrangement is a fundamental change from the fee-for-service payment model. However, for OBP arrangements to be effective, all the factors that affect performance must be considered including: motivation, skills, an understanding of the goals, and the ability to measure progress. For example, one type of OBP model is performance-based contracting. Performance-based

contracts use appropriate techniques, which may include but are not limited to, consequences and/or incentives to ensure that agreed upon value is received. Listed below are key characteristics of performance-based contracts:

- Emphasize results related to output, quality, and outcomes rather than how the work is performed;
- Specify deliverables, performance standards, and/or an outcomes orientation and clearly defined objectives and timeframes;
- Use quality assurance plans, measurable performance standards, and/or outcomes;
- Provide performance incentives and/or consequences for nonperformance; and
- Tie payment to deliverables, performance measures and/or outcomes.

In inviting OBP models, ED is interested in demonstrating how this payment model can help achieve positive outcomes for children and their families participating in the project, consistent with those identified in this priority. ED's objectives in establishing this OBP invitational priority are to:

- Test a model that limits at least part of the risk of government funding for unachieved outcomes by clearly defining

performance-based consequences (rewards or sanctions) for service providers.

- Learn whether the OBP concept is feasible in this arena given the complexity of needs and number of agencies involved in serving child SSI recipients and their families.
- Determine whether paying only for specific outcomes achieved at predetermined milestones within the grant period creates an incentive structure that promotes the achievement of PROMISE's goals.

ED acknowledges that incorporating an OBP model into an applicant's proposed PROMISE project may be challenging, particularly for recruiting providers, measuring outcomes, and specifying contractual arrangements. Applicants that address this invitational priority should include a plan for implementing the OBP model during the project. The applicant must clarify the payment arrangement between the applicant and the provider, to be triggered by the verified achievement of the proposed outcome(s) and any milestones within the grant period. The plan must describe a validation methodology and a payment plan that is derived from quantifiable data, and measures against outcome targets for the target population relative to a well-defined comparison population. This plan must include a timeline describing each payment point that the project partners have agreed to and the corresponding outcome targets.

For more information, see the following Web sites:

<http://www.massmed.org/AM/Template.cfm?Section=Home6&TEMPLATE=/CM/ContentDisplay.cfm&CONTENTID=30254>

http://www.ofm.wa.gov/contracts/resources/performance_based/

Request for input:

Is it feasible to use the OBP model for this grant? The OBP model is currently being pursued under existing authority by the Departments of Labor and Justice. What are the challenges and benefits?

DEFINITIONS:

Background:

The following definitions are provided to ensure that applicants have a clear understanding of how we are using these terms in the proposed priority. We may apply one or more of these definitions in any year in which this program is in effect. These definitions are based on definitions that the Department uses or relies on in other contexts.

Competitive Employment: *Competitive employment* means work in the competitive labor market that is performed on a full-time or part-time basis, in an integrated setting, and for which an individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by the employer for the same or similar work performed by individuals who are not disabled. Competitive employment may include self-employment. The source for this definition: <http://ssa->

custhelp.ssa.gov/app/answers/detail/a_id/410/~definition-of-earned-income-for-ssi-purposes.

Extended and Experiential Learning Opportunities:

Extended learning opportunities (ELOs) provide safe, structured learning environments for students outside the traditional school day. ELOs include afterschool and summer learning programs as well as before-school, evening, and weekend programs. ELOs come in many forms and can include tutoring, volunteering, academic support, community service, organized sports, home-work help, and art and music programs.

The source for this definition:

[http://www.ccsso.org/Documents/2009/The Quality Imperative a 2009.pdf](http://www.ccsso.org/Documents/2009/The_Quality_Imperative_a_2009.pdf).

Experiential Learning is learning through experience. The individual is encouraged to directly involve him or herself in the experience, and then reflect on the experiences using analytic skills, in order to gain a better understanding of the new knowledge and retain the information. The source for this definition: <http://www.infed.org/biblio/b-explrn.htm>.

Fidelity of Implementation means the delivery of the intervention in the way in which it was designed to be delivered: accurately and consistently. The source for this definition:

http://www.nrclld.org/rti_manual/pages/RTIManualSection4.pdf

Families: The definition of *family member* covers a wide range of relationships, including spouse; parents; parents-in-law; children; brothers; sisters; grandparents; grandchildren; step parents; step children; foster parents; foster children; guardianship relationships; same sex and opposite sex domestic partners; and spouses or domestic partners of the aforementioned, as applicable. The source for this definition: www.opm.gov/oca/leave/html/FamilyDefs.asp.

Integrated Setting: The definition of *integrated setting* as used in the context of employment outcomes means a setting typically found in the community in which individuals with disabilities interact with non-disabled individuals, other than non-disabled individuals who are providing services to such individuals, to the same extent that non-disabled individuals in comparable positions interact with other persons. The source for this definition: State Rehabilitation Services Program, 34 CFR 361.5(b)(33)(ii).

Logic model means a well-specified conceptual framework that identifies key components of the proposed practice, strategy, or intervention (i.e., the active "ingredients" that are hypothesized to be critical to achieving the relevant outcomes) and describes the relationships among the key components and outcomes, theoretically and operationally.

Parent: The term *parent* means:

(a) a natural, adoptive, or foster parent of a child (unless a foster parent is prohibited by State law from serving as a parent);

(b) a guardian (but not the State if the child is a ward of the State); and

(c) an individual acting in the place of a natural or adoptive parent (including a grandparent, stepparent, or other relative) with whom the child lives, or an individual who is legally responsible for the child's welfare.

(d) except as used in sections 615(b)(2) and 639(a)(5), an individual assigned under either of those sections to be a surrogate parent.

The source for this definition: IDEA, 20 U.S.C. 1401(23).

Personally Identifiable Information: The term *Personally Identifiable Information* includes, but is not limited to—

(a) The student's name;

(b) The name of the student's parent or other family members;

(c) The address of the student or student's family;

(d) A personal identifier, such as the student's social security number, student number, or biometric record;

(e) Other indirect identifiers, such as the student's date of birth, place of birth, and mother's maiden name;

(f) Other information that, alone or in combination, is linked or linkable to a specific student that would allow a reasonable

person in the school community, who does not have personal knowledge of the relevant circumstances, to identify the student with reasonable certainty; or

(g) Information requested by a person who the educational agency or institution reasonably believes knows the identity of the student to whom the education record relates.

The source for this definition: 34 CFR §99.3 of the FERPA regulations; see also 34 CFR §300.32 of the IDEA regulations.

Transition Services: The term *transition services* means a coordinated set of activities for a child with a disability that:

- Is designed to be within a results-oriented process, that is focused on improving the academic and functional achievement of the child with a disability to facilitate the child's movement from school to post-school activities, including postsecondary education, vocational education, integrated employment (including supported employment); continuing and adult education, adult services, independent living, or community participation;

- Is based on the individual child's needs, taking into account the child's strengths, preferences, and interests; and

- Includes instruction, related services, community experiences, the development of employment and other post-school

adult living objectives, and, if appropriate, acquisition of daily living skills and functional vocational evaluation.

The source for this definition: IDEA, 20 U.S.C. 1401(34).

Request for Input on the Definitions section:

Selection Criteria: The selection criteria for this competition are from 34 CFR 75.210 and additional selection criteria appropriate for PROMISE. They are:

(a) Quality of project design (30 points).

(1) The extent to which the MDP identifies and plans to address gaps and weaknesses in current State service systems for child SSI recipients and their families.

(2) The extent to which the MDP's interventions are likely to meet the needs of child SSI recipients and their families, achieve desired outcomes, and provide a coordinated and coherent array of services and supports.

(3) The extent to which the applicant documents that proposed services and supports are based on the best available evidence including, where available, research that has demonstrated statistically significant positive effects on relevant indicators.

(4) The extent to which the budget is adequate to support the proposed MDP. The extent to which the costs are reasonable in relation to the objectives, design, and potential significance of the proposed project.

(5) The extent to which the MDP has clearly articulated a model of partnership, coordination, and service delivery that includes:

(i) an explicit and comprehensive strategy, with actions that are (A) aligned with the priority the applicant is seeking to meet; and (B) expected to result in achieving the goals, objectives, and outcomes of the proposed project; and

(ii) measurable and attainable goals and their benchmarks that are supported by quantitative projections of the accomplishments to be achieved for each activity and the number of activities to be accomplished and a chronological order of approach with target dates.

(6) Quality of the logic model and project implementation plan, and timeline, including the extent to which there is a conceptual framework underlying the demonstration activities and the quality of that framework.

(b) Quality of management plan and personnel (35 points).

(1) The adequacy of the management plan to achieve the objectives of the proposed project on time and within budget.

(2) The adequacy of partnerships, including:

(i) an overall management plan for the partnerships, including mechanisms for coordinating across agencies and organizations. The plan should also describe how the partnership will be organized to carry out the project,

including clearly defined roles and responsibilities for each partner;

(ii) the extent to which the services to be provided by the proposed project involve the collaboration of appropriate partners, including at least three of the required partners, to maximize the impact of the MDP;

(iii) the relevance and demonstrated commitment of each partner in the proposed project to the implementation and success of the project. Commitment of the partners should be demonstrated in the form of MOUs, substantive non-form letters of intent, or other documents that show strategic relationships are preferably already in place, that the partners have prior experience collaborating to serve low-income children with disabilities, that each partner understands its roles and responsibilities, and that the leadership of each partner entity supports the proposed activities; and

(iv) a system for holding partners accountable for performance in accordance with the MOU, letters of intent, or other commitments among the partners.

(3) The capacity of the project to execute necessary data collection protocols and requirements in a high-quality manner, including:

(i) implementing a process to collect the data needed to track the outcome measures required in this notice, project

specific measures, and other necessary information over time and across participating agencies;

(ii) adequately documenting project activities, referrals, services and supports received by each child and his or her family, and any resulting State systems change; and

(iii) cooperating with the national evaluator on all aspects necessary to undertake rigorous evaluation and measurement of the project.

(4) The quality of key personnel, including:

(i) A qualified and sufficient staffing pattern to accomplish the goals of the project, including techniques to ensure that well-qualified staff are enlisted in a timely manner;

(ii) The extent to which there is evidence that key project staff, by virtue of their training or professional experience, have the requisite knowledge to design, implement, and manage projects of the size and scope of the proposed project; and

(iii) The extent to which the identified key personnel have the necessary program authority to commit their agency and its resources to the implementation of the project.

C. Significance (25 points)

(1) The extent to which the proposed project will result in systems change and improvement.

(2) The potential contribution of the proposed project to the development and advancement of knowledge, and practices in the field.

(3) The extent to which the project will raise the expectations held by, and about, participating child SSI recipients regarding their education and employment outcomes.

(4) The importance or magnitude of the results or outcomes likely to be attained by the proposed project.

D. Capacity for Continuous Feedback and Improvement (10 points)

(1) The adequacy of plans and procedures for ensuring continuous feedback and improvement in the implementation of the proposed project.

(2) The capacity for incorporating child and family feedback, including:

(i) The extent to which the proposed project seeks, encourages, and includes parental involvement and feedback; and

(ii) The extent to which the proposed project seeks, encourages, and includes feedback from participating child SSI recipients and encourages their self-determination.

Request for input on the Selection Criteria section:

Other comments on the PROMISE initiative: