



UNITED STATES DEPARTMENT OF EDUCATION
OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES

April 7, 2000

Ms. Nancy Keenan
State Superintendent of Public Instruction
Montana Office of Public Instruction
106 State Capitol
Helena, Montana 59620

Ms. Laurie Ekanger
Director
Department of Public Health and Human Services
P.O. Box 4210
Helena, Montana 59604

Dear Ms. Keenan and Ms. Ekanger:

The U.S. Department of Education's Office of Special Education Programs (OSEP) conducted a review in Montana during the weeks of March 8 and April 12, 1999 for the purpose of assessing compliance in the implementation of the Individuals with Disabilities Education Act (IDEA) and assisting your State in developing strategies to improve results for children with disabilities. The IDEA Amendments of 1997 focus on "access to services" as well as "improving results" for infants, toddlers, children and youth with disabilities. In the same way, OSEP's Continuous Improvement Monitoring Process is designed to focus Federal, State and local resources on improved results for children with disabilities and their families through a working partnership among OSEP, the Montana Office of Public Instruction (OPI), the Montana Department of Public Health and Human Services (DPHHS), and parents and advocates in Montana.

In conducting its review of Montana, OSEP applied the standards set forth in the IDEA 97 statute (20 U. S.C. §1400 *et. seq.*), and in the Part C regulations (34 CFR Part 303) and Part B regulations (34 CFR Part 300), in effect at the time of the OSEP review. The Part C regulations in effect in April 1999 were those published by the Department on July 30, 1993, as revised by the Technical Amendments published on April 14, 1998. The Part B regulations in effect in April 1999 were those published on September 29, 1992. All citations to 34 CFR Parts 303 and 300 in this report are to the regulations, as published on those dates. On March 12, 1999, the Department published new final Part B regulations and conforming changes to the Part C regulations that took effect on May 11, 1999. In planning and implementing improvement strategies to address the findings in this report, OPI and DPHHS should ensure that all improvement strategies are consistent with the new final regulations.

A critical aspect of the Continuous Improvement Monitoring Process is collaboration between the Steering Committee of broad-based constituencies, including representatives from OPI, DPHHS and OSEP. The steering committee assessed the effectiveness of State systems in

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ensuring improved results for children with disabilities and protection of individual rights. In addition, the Steering Committee will be designing and coordinating implementation of concrete steps for improvement. Please see the Introduction to the report for a more detailed description of this process in your State, including representation on the steering committees.

OSEP's review placed a strong emphasis on those areas that are most closely associated with positive results for children with disabilities. In this review, OSEP clustered the Part B (services for children aged 3 through 21) requirements into four major areas: Parent Involvement, Free Appropriate Public Education in the Least Restrictive Environment, Secondary Transition and General Supervision. Part C (services for children aged birth through 2) requirements were clustered into five major areas: Child Find and Public Awareness, Family-Centered Systems of Services, Early Intervention Services in Natural Environments, Early Childhood Transition, and General Supervision. Components were identified by OSEP for each major area as a basis to review the State's performance through examination of State and local indicators.

The enclosed Report addresses strengths noted in the State, areas that require corrective action because they represent noncompliance with the requirements of the IDEA, and areas for additional improvement. Areas for additional improvement include suggested improvements for best practice, and areas of concern for which OSEP did not make findings of noncompliance, but that need further investigation by the State. Enclosed you will find an Executive Summary of the Report, an Introduction including background information, and a description of issues and findings.

OPI and DPHHS have indicated that this Report will be shared with members of the steering committee, the State Interagency Coordinating Council and the IDEA State Advisory Panel. OSEP will work with your steering committee to develop corrective actions and improvement strategies to ensure improved results for children with disabilities.

Thank you for the assistance and cooperation provided by your staffs during our review. Throughout the course of the review, Mr. Robert Runkel and Ms. Jan Spiegle-Stinger were responsive to OSEP's requests for information, and provided access to necessary documentation that enabled OSEP staff to work in partnership with the Steering Committee to better understand the State's systems for implementing the IDEA. An extraordinary effort was made by State staff to arrange the public input process during the Validation Planning week and, as a result of their efforts, OSEP obtained information from a large number of parents (including underrepresented groups), advocates, service providers, school and agency personnel, agency administrators, and special education administrators. OSEP would also like to recognize the efforts that have taken place in Montana to improve results for children with disabilities and the strong commitment of State staff to continue these efforts.

Thank you for your continued efforts toward the goal of achieving better results for infants, toddlers, children and youth with disabilities in Montana. Since the enactment of the IDEA and its predecessor, the Education of All Handicapped Children Act, one of the basic goals of the law, ensuring that children with disabilities are not excluded from school, has largely been achieved. Today, families can have a positive vision for their child's future.

While schools and agencies have made great progress, significant challenges remain. The critical issue is to place greater emphasis on attaining better results. To that end, we look forward to working with you in partnership to continue to improve the lives of individuals with disabilities.

Sincerely,

Kenneth R. Warlick
Director
Office of Special Education Programs
Enclosures

Cc: Mr. Robert Runkel
Ms. Jan Spiegle-Stinger

EXECUTIVE SUMMARY

MONTANA MONITORING 1999

The attached report contains the results of the first two steps in the Office of Special Education Program's (OSEP) Continuous Improvement Monitoring of the Individuals with Disabilities Education Act (IDEA), Parts B and C, in the State of Montana during the weeks of March 8 and April 12, 1999. The process is designed to focus resources on improving results for infants, toddlers and children with disabilities and their families through enhanced partnerships between the State agencies, OSEP, parents and advocates. The Validation Planning phase of the monitoring process included the completion and analysis of Self-Assessments, a series of public input meetings with guided discussions around core areas of IDEA, and the organization of Steering Committees that provided further comments on the information. As part of expanding the public input process, OSEP and the State made a special effort to reach the Native American population in Montana. The Validation Data Collection phase included interviews with parents, agency administrators, local program and school administrators, service providers, teachers and service coordinators and reviews of children's records. Information obtained from these data sources was shared in a meeting attended by staff from the Montana Office of Public Instruction and Department of Public Health and Human Services (OPI and DPHHS), parents, advocates, and members of the Steering Committees.

The Report contains a detailed description of the process utilized to collect data, to determine strengths and areas of non-compliance with IDEA, and to make suggestions for improvement in each of the core IDEA areas.

Early Intervention Services for Infants and Toddlers with Disabilities: Part C of IDEA

Strengths

OSEP observed the following strengths:

- Effective interagency collaboration between agencies in Part C system
- Strong State administrative leadership
- Incorporation of monitoring process into State's "Comprehensive Evaluation Process"
- Service coordination/family support specialist certification system that assures quality of service coordinators
- A system that is family-centered and respectful to families
- Coordinated transition training with Part B

Suggestions for Improved Results for Children

OSEP provides the following suggestions for improved results for children with disabilities:

- Collaborative State training across services/systems
- Increase awareness of medical personnel

- Develop culturally appropriate materials and activities for Native Americans
- Share innovative strategies for increasing accessibility of early intervention services
- Better preparing children and families for successful transitions to Part B

Education of Children and Youth with Disabilities **Part B of IDEA**

Strengths

OSEP observed the following strengths:

- OPI's positive working relationship with parents
- Elimination of excessive paperwork for collecting suspension/expulsion data
- A comprehensive staff development project (Montana Behavioral Initiative) to meet the behavioral and social needs of students
- Training for Inclusive Education (TIE) Project that provides training opportunities to assist school districts in inclusive education practices.
- Educational Interpreter Certificate Project that provides the necessary skills for educational interpretation
- Resolving conflicts with parents through the Early Assistance Program
- Responsiveness of Montana's regionalized personnel development system to unique needs

Suggestions for Improved Results

OSEP provides the following suggestions for improved results for children with disabilities:

- Additional training for general education teachers to support the education of children with disabilities in general classrooms
- Culturally sensitive, coordinated transition plans should be individually developed to better meet the needs of the Native American population within the State

Areas of Noncompliance

OSEP observed the following areas of non-compliance:

- Inadequate number of related service personnel to ensure a free appropriate public education to children with disabilities
- Inadequate statements of needed transition services beginning at age 16
- Not ensuring correction of deficiencies as identified by OPI through its monitoring of public agencies
- Not completing due process hearings within 45 days

MONTANA MONITORING REPORT
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INTRODUCTION

Montana has a relatively small population of 879,000 spread out over a large area comprising 147,046 square miles. This salient factor affects early intervention and educational services to children, either directly or indirectly, throughout Montana. Because of the vast distances between populated areas there exist many one and two room schools, and some early intervention service providers drive long distances. During the Validation Data Collection visit, OSEP received anecdotal evidence of service providers traveling literally hundreds of miles to provide therapy to one child. Total school enrollment in Montana was approximately 160,000 children during the 1998-99 school year, of which 18,819 were identified as disabled. The total birth through two population was reported as 31,957 in December 1997 with 531 infants and toddlers with disabilities or developmental delays receiving Part C services. This relatively small number of children with disabilities spread over a large geographic area creates situations where a community may have only one child with significant needs hundreds of miles away from a population center with service resources.

Another factor that has an important influence on education is the relatively low level of funding available to provide the necessary resources and services to children with disabilities. During the 1994-95 school year special education expenditures per child amounted to \$3,068, as compared to the United States median of \$5,511. The Montana legislature has appropriated \$33.5 million during the 1999-00 school year for special education. This figure has remained relatively unchanged for the past 10 years, and, as Federal Part B and local funding has increased, has resulted in the State paying for a decreasing percentage of the cost for educating children with disabilities. Currently, 54.7% of the total cost required to fund special education is covered through State funding, as compared to 92% of the cost during the 1989-90 school year. Consequently, local districts have absorbed a majority of the increased costs of special education.

Administrative Structures and Children Served

The Department of Public Health and Human Services (DPHHS) was appointed as the lead agency for the implementation of Part C of IDEA. DPHHS administers the program through contracts with 7 regional providers. The early intervention staff in the lead agency consists of one Part C Coordinator and .25 FTE for administrative support. DPHHS Field Support Specialists assist the coordinator with monitoring.

In 1995, Montana was providing services to 512 children in the Early Intervention program. In 1997, this number had increased to 531 (1.66% of all children 0-2). One hundred and one of these children were under the age of one, 179 were between one and two, and 251 were between two and three years old.

During the 1998-99 school year, there were 346 administrative school units in Montana. Large districts, such as Missoula, Billings, Helena and Butte, employ their own special education personnel. Small districts, such as Fairview, Paradise, East Glacier and Westby, participate in special education cooperatives. There are 21 special education cooperatives in Montana; each employs a special education director. Services vary from cooperative to cooperative but typically

include technical assistance, administrative support and related services, as needed, to the districts that are members of the cooperative.

The Montana Office of Public Instruction (OPI) is the State agency responsible for ensuring that educational programs for children with disabilities administered in the State meet Part B requirements. OPI employs a director of special education, 6 professional staff, 3 clerical and administrative staff, and 7 additional attached personnel, who are responsible for data collection, accounting, due process, and complaints. Each of the six professional staff has specialty areas, provides technical assistance, and conducts monitoring visits. Contract personnel are added to assist with monitoring visits.

State-wide Assessment Program

The Montana Board of Public Education was reviewing State-wide assessment requirements at the time of OSEP's on-site monitoring visit. At that time, all students in grades 4, 8, and 11 were required to be tested by either the Comprehensive Tests of Basic Skills (CTBS), the Iowa Test of Basic Skills (CTBS), or the Stanford Achievement Test (SAT). The expectation is that all students be assessed, unless an IEP team determines that a student with a disability cannot participate. Accommodations for testing are permitted as long as the accommodations will not invalidate the results and are in accordance with a student's IEP team decision. Permissible assessment accommodations include changes in: 1) the way assessment items are presented, 2) the way a student may respond, 3) the timing or scheduling of an assessment, and 4) the setting. Guidelines for participation of children with disabilities in alternative assessments and reporting of results are slated to begin with school year 2000-01. At the time of Validation Data Collection, OPI had provided written guidance and training throughout the State regarding the State-wide assessment requirements.

Validation Planning

Validation planning was an opportunity to collect and review Montana's system wide data and identify issues and barriers that were relevant toward improving results for infants, toddlers and children with disabilities. OSEP, OPI, DPHHS, and representatives on the Steering Committees participated in several teleconferences to plan the public input process, clarify the role of the Steering Committees and identify potential statewide issues. In preparation for the Validation Planning visit, OSEP reviewed: the data from the 20th Annual Report to Congress, correspondence from parents, advocates and other interested parties, Part C annual reports, DPHHS's Self-Study, OPI's Self-Assessment, and the previous Montana Part B monitoring report (1994).

During the week of March 8, 1999, OSEP, OPI, DPHHS, and the Steering Committees conducted 9 public meetings for Parts C and B across the State to obtain information about issues and concerns about IDEA service delivery. Meetings, including video uplink locations, consisted of participants from the following locations: Missoula, Kalispell, Helena, Great Falls, Havre, Hardin, Billings, Glasgow, and Miles City. Discussions addressed, for Part C, child find and public awareness, family-centered systems of services, early intervention services in natural

environments, transition from Part C to other appropriate services, and general supervision of Part C by DPHHS. For Part B, discussion centered on parent involvement in special education decision-making, free appropriate public education to children with disabilities from ages 3-21, secondary transition for youth with disabilities from school to post-school activities, and general supervision of special education by OPI.

At the end of the week, information from the public focus groups, along with information from the Part C Self-Study and Part B Self-Assessment, were discussed with the Steering Committees. The Part C Steering Committee was comprised of the State Interagency Coordination Council, which includes interagency representatives, parents, advocates, program administrators, representatives of institutions of higher education and staff from DPHHS. The Part B Steering Committee, which was comprised primarily of members of the State Advisory Panel, included parents, individuals with disabilities, local school administrators, disability advocates, representatives of institutions of higher education, protection and advocacy, and staff from OPI. Two representatives from the Nation Early Childhood Technical Assistance System (NECTAS), which is the OSEP-funded Early Childhood technical assistance provider, assisted with the facilitation of the Part C Steering Committee. A representative from the Mountain Plains Regional Resource Center Network facilitated the Part B Steering Committee. The purpose of these meetings was to discuss the results of the public input process, and to review the self-assessment data to identify specific issues that needed further investigation by OSEP. Recommendations for strategies and suggestions of sites that could be visited during Validation Data Collection were discussed with DPHHS, OPI, representatives from the Steering Committees, and OSEP.

Data Collection

OSEP visited Montana during the week of April 12, 1999, for the purpose of collecting data to validate information provided through the planning process, including new requirements under the IDEA Amendments of 1997 and the Government Performance Results Act. The following sites were visited for Part C: Developmental/Educational Assistance Program (DEAP) in Miles City; Early Childhood Intervention (ECI) and Support and Techniques For Empowering People (STEP) in Billings; and Family Outreach (FO) in Bozeman. Part B sites included: Havre, Rocky Boy, Box Elder, Bear Paw Cooperative, Hardin, Lodgegrass, Miles City, and the Big Country Cooperative. Preliminary observations were presented to the Steering Committees on Friday, April 16. The Part B Steering Committee began discussing the next steps that would begin the process of improvement planning.

As part of the data collection process, OSEP reviewed children's records, including individualized family service plans (IFSPs) and individualized education programs (IEPs), and State and local policies and procedures. OSEP conducted interviews with personnel responsible for the implementation of both Part C and Part B of IDEA, including local service providers, service coordinators, teachers, interagency collaborators, and administrators. Part C also interviewed small groups of parents at each site. General education teachers interviewed were those who serve children with disabilities in their classrooms, and special education teachers were those responsible for developing and/or implementing IEPs. OSEP also interviewed

advocates and personnel from State agencies involved in the provision of services to infants, toddlers, children and youth with disabilities. The individuals interviewed were selected by OSEP, in cooperation and consultation with State and local officials.

Improvement Planning

In response to this report, OPI and DPHHS will develop an action plan addressing areas requiring improvement as identified in the Report. OSEP will work with OPI and DPHHS to finalize the improvement plan and will provide assistance to the Steering Committees in the identification of strategies for implementation, sources of technical assistance, timelines for completing strategies and methods for evaluating the effectiveness of the improvement plan.

I. PART C: GENERAL SUPERVISION

The State lead agency, DPHSS, is responsible for developing and maintaining a Statewide, comprehensive, coordinated, multidisciplinary, interagency early intervention system. Administration, supervision and monitoring of the early intervention system are essential to ensure that each eligible child and family receives the services needed to enhance the development of infants and toddlers with disabilities and to minimize their potential for developmental delay. Early intervention services are provided by a wide variety of public and private entities. Through supervision and monitoring, the State ensures that all agencies and individuals providing early intervention services meet the requirements of IDEA, whether or not they receive funds under Part C.

While each State must meet its general supervision and administration responsibilities, the State may determine how that will be accomplished. Mechanisms such as interagency agreements and/or contracts with other State-level or private agencies can serve as the vehicle for the lead agency's implementation of its monitoring responsibilities. The State's role in supervision and monitoring includes: (1) identifying areas in which implementation does not comply with Federal requirements; (2) providing assistance in correcting identified problems; and (3) as needed, using enforcement mechanisms to ensure correction of identified problems.

Validation Planning and Data Collection

The Montana Self-Study identified a few recommendations related to the State's oversight of the provision of early intervention services. These recommendations included: increase training across services/systems; improve "payor of last resort" issues with other agencies; and add information on income guidelines and Medicaid to the Family Support Specialist¹ training. At each of the public meetings that OSEP conducted during the Validation Planning visit, the following question was asked: "Does the State effectively supervise the implementation of the early intervention system?" In response, strengths, priorities and concerns related to the State's general supervision of early intervention services emerged. Participants identified the Part C Coordinator's leadership as a strength because of the depth and clarity of information and guidance that she provides. They also described monitoring as a strength because DPHSS utilizes a monitoring tool developed in a partnership between the State, providers and parents. The Part C Steering Committee agreed that the following priorities and concerns should receive further investigation during Validation Data Collection: 1) provision of training by DPHSS across service/systems; 2) funding for Family Support Specialist training; and 3) the need to study the amount of paperwork required of Family Support Specialists to determine if it can be decreased.

To investigate the priorities and concerns identified during the Validation Planning process, OSEP collected information from the review of children's records and State and local policies and procedures. OSEP interviewed parents, service providers, family support specialists, local program administrators, interagency collaborators and State monitoring personnel.

¹ Montana uses the term Family Support Specialist in place of Service Coordinator.

OSEP reviewed and analyzed the data and identified the following strengths and suggestions for improving results for infants and toddlers with disabilities.

A. STRENGTHS

1. Interagency collaboration

The overall interagency coordination and collaboration in Montana results in a Part C system that effectively utilizes limited resources to deliver early intervention services to infants and toddlers with disabilities and their families. Interagency agreements and networks result in new projects and creative, collaborative partnerships that lead to innovative service delivery models and high quality, family-centered services. When asked why collaboration is working so well, a group of interagency providers in one site responded: “we need each other – individuals who did the initial planning and development of Part C in Montana knew early on that we need collaboration – the focus is always on families and kids – we identify what needs to be done and just do it.”

2. Administrative Leadership

In all four of the sites that OSEP visited, there was an effective partnership between DPHHS and the local contractors. The local administrators identified communication as a mechanism that promoted the partnership. All of the contractors stated that they could contact DPHHS to discuss and resolve any concerns and felt that problem-solving often led to positive outcomes for all involved. They described feedback as timely and very helpful. Contractors also described quarterly meetings between DPHHS and the contractors as “great,” because they help maintain consistency across the State and provide the basis for successful change efforts.

3. Joint monitoring process

The DPHHS monitoring process for Part C is incorporated into the State’s Family Education and Support Services Comprehensive Evaluation Process. It is a means of both quality assurance and of monitoring compliance with Federal, State and contract requirements, without creating duplicative monitoring systems for separate programs. Field Service Specialists, who are DPHHS employees, complete the comprehensive evaluation process, which includes home visits with families, and inclusion of Family Support Services Advisory Council family representatives, in addition to reviewing complaint information, files, certification information and an onsite visit. This multifaceted monitoring evaluates IDEA requirements, and provides a system of checks and balances; therefore, any concerns identified in file review are checked during interviews with providers and home-visits to families. The Field Service Specialists describe the process as “continuous monitoring” and reported that issues of compliance are communicated in a compliance monitoring report to the local contractor, and to Montana’s Part C Coordinator. Local contractors must submit a “Part C Enhancement Plan” that addresses corrective action of compliance issues. OSEP’s review of the monitoring reports and enhancement plans for the sites visited reveals timely correction of compliance issues.

DPHHS Field Support Specialists also write suggestions for best practice into reports and ask providers to respond. A recent example was a suggestion that parent rights information be provided on a regular basis and not just at the times specified in the requirements. One of the

Field Service Specialists reported that he considers staff training as part of his monitoring responsibilities, and in one site he has observed improvement in written objectives as a result of his input. The Field Support Specialists reported that monitoring establishes best practice and sets standards to be met.

B. SUGGESTION FOR IMPROVED RESULTS FOR INFANTS, TODDLERS AND THEIR FAMILIES

State training across services/system.

Service providers, parents and interagency collaborators requested collaborative training with an emphasis on training related to Medicaid requirements and eligibility. Another suggestion was training for childcare providers. DPHHS may want to conduct a training needs survey across agencies, specific to Part C, and then develop an interagency training plan to make the best use of resources.

II. PART C: CHILD FIND AND PUBLIC AWARENESS

The needs of infants and toddlers with disabilities and their families are generally met through a variety of agencies. However, prior to the enactment of Part C of IDEA, there was little coordination or collaboration for service provision, and many families had difficulty locating and obtaining needed services. Searching for resources placed a great strain on families.

With the passage of Part C in 1986, Congress sought to ensure that all children needing services would be identified, evaluated, and served, especially those children who are typically underrepresented, (e.g., minority, low-income, inner-city, American Indian and rural populations) through an interagency, coordinated, multidisciplinary system of early intervention services.

Each State's early intervention system must include child find and public awareness activities that are coordinated and collaborated with all other child find efforts in the State. Part C recognizes the need for early referral and short timelines for evaluation because development occurs at a more rapid rate during the first three years of life than at any other age. Research in early brain development has demonstrated what early interventionists have known for years: that children begin to learn and develop from the moment of birth. Therefore, the facilitation of early learning and the provision of timely early intervention services to infants and toddlers with disabilities are critical.

Validation Planning and Data Collection

The Montana Self-Study identified several strengths, priorities and concerns in the area of Child Find and Public Awareness. Identified strengths included efforts toward Newborn Hearing Screening, the new Birth Defects Registry, family-to-family awareness, and strong relationships with schools. According to the Self Study, State policy currently results in effective public awareness activities, and in order to improve child find efforts, DPHHS has plans to increase collaboration with managed care, other early childhood service agencies, and other State and local agencies. Additional identified priorities include continuing to use multifaceted public awareness methods and targeting locations for public awareness.

One of the focus questions asked during public input meetings was, "Are all infants and toddlers with developmental delays or disabilities identified, evaluated and referred for services?" Participants identified a need for physicians to receive increased information about Part C to encourage earlier referrals. They also recommended that childcare providers could benefit from more awareness of Part C. The expressed need for increased public awareness activities seemed to be higher in rural and remote areas. In addition, participants suggested that some families may need more than written information and professionals may need to visit several times in order to build trust before beginning the evaluation and assessment process.

The Steering Committee agreed that they would like to focus on the following priorities: 1) developing stronger working relationships with pediatricians, other doctors and medical students and 2) redesigning public awareness materials.

SUGGESTIONS FOR IMPROVED RESULTS FOR INFANTS, TODDLERS AND THEIR FAMILIES

1. Physician awareness

Several suggestions regarding increasing referrals from medical personnel came from three pediatricians who participated in interviews in two different sites. Local Part C staff could visit physician offices on a regular basis as an important strategy in building teamwork and keeping the physicians involved. The ease of referral is critical to physicians; clear procedures will encourage and may increase early referrals to Part C. With parent consent, physicians can be given feedback on the child's status, both verbally and in writing. Timely and appropriate services, that are provided by qualified personnel, are one of the best motivators for physicians to refer children into the system at early ages. If physicians can receive reports that describe the impact of early intervention on the developmental progress of an infant or toddler they will be more likely to recognize the value of early intervention and refer more infants and toddlers when developmental concerns arise.

Family Support Specialists in two sites report that there is a high turnover rate of physicians on the Native American reservations, so increased awareness efforts are necessary to keep them informed. They said it is important that an orientation to Part C is developed and provided to all new medical students and physicians that work on the reservations.

2. Culturally appropriate materials and activities

Two of the sites visited provide early intervention services to Native Americans and utilize effective strategies to interact within the Native American culture. Methods need to be developed to share the effective strategies and creative ideas with all service providers that serve Native American children. All early intervention professionals could benefit from ongoing training specific to the different tribal cultures. DPHHS can look to the Native Americans on the Steering Committee and reach out to the tribes to develop materials and design training activities.

III. PART C: EARLY INTERVENTION SERVICES IN NATURAL ENVIRONMENTS

In creating the Part C legislation, Congress recognized the urgent need to ensure that all infants and toddlers with disabilities and their families receive early intervention services according to their individual needs. Three of the principles on which Part C was enacted include: (1) enhancing the child's developmental potential, (2) enhancing the capacity of families to meet the needs of their infant or toddler with disabilities, and (3) improving and expanding existing early intervention services being provided to children with disabilities and their families.

To assist families in this process, Congress also requires that each family be provided with a service coordinator, to act as a single point of contact for the family. The service coordinator's responsibilities include assisting families in understanding and exercising their rights under Part C, arranging for assessments and IFSP meetings, and facilitating the provision of needed services. The service coordinator coordinates required early intervention services, as well as medical and other services the child and the child's family may need. With a single point of contact, families are relieved of the burden of searching for essential services, negotiating with multiple agencies and trying to coordinate their own service needs.

Part C requires the development and implementation of an IFSP for each eligible child. The evaluation, assessment, and IFSP process is designed to ensure that appropriate evaluation and assessments of the unique needs of the child and of the family, related to the enhancing the development of their child, are conducted in a timely manner. Parents are active members of the IFSP multidisciplinary team. The team must take into consideration all the information gleaned from the evaluation and child and family assessments, in determining the appropriate services to meet the child's needs.

The IFSP must also include a statement of the natural environments in which early intervention services will be provided for the child. Children with disabilities should receive services in community settings and places where normally developing children would be found, so that they will not be denied opportunities that all children have - to be included in all aspects of our society. Since 1991, IDEA has required that infants and toddlers with disabilities receive early intervention services in natural environments. This requirement was further reinforced by the addition of a new requirement in 1997 that early intervention can occur in a setting other than a natural environment only when early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment. In the event that early intervention cannot be satisfactorily achieved in a natural environment, the IFSP must include a justification of the extent, if any, to which the services will not be provided in a natural environment.

Validation Planning and Data Collection

Based on Montana's Self-Study and the public input process, the Steering Committee recommended that OSEP investigate the following: 1) adequacy of numbers of personnel and services; 2) the need to create resources and services when and where there are none; and 3) early intervention services in natural environments other than the home.

A. STRENGTH*Service Coordination/Family Support Specialist Certification*

Along with the commitment to provide quality early intervention services comes the responsibility to ensure that all professionals providing direct services to children are competent and meet the State's highest standard for certification. The certification process for the Family Support Specialists is multidimensional and consists of a three-tiered process that involves initial certification, a competency-based Comprehensive Certification, and a cyclical renewal certification. In interviews throughout the State, participants told OSEP about Family Support Specialists who are providing effective service coordination. The certification process ensures that Family Support Specialists maintain basic competencies and develop advanced competencies through submission of a portfolio that exemplifies mastery of the Ten Basic Family Support Specialist Competencies. After a Certification Panel reviews the portfolio, the Certification Panel interviews each candidate. This multidimensional certification process results in high quality, effective service coordination for infants and toddlers with disabilities and their families.

During initial contacts with the family, the Family Support Specialists help families understand the benefit of services and take the time to see what they need. Parents and service providers described Family Support Specialists as unobtrusive, informative, encouraging, and responsive. They include parents in goal setting and make sure questions are answered. They are present during therapy visits and can assist the family in implementing therapy activities on their own. Parents reported that the Family Support Specialists are advocates for them and know how to access community resources to get help for families. A parent reported that being involved in Early Intervention has given her the confidence to go out and get what she needs for her child and family. Family Support Specialists recognize the need to help families access other services and assist with funding requirements and applications.

The Family Support Specialist certification process and its ongoing training and follow-up components result in extremely effective service coordination. Family Support Specialists are enthusiastic about the service coordination they do with families and attribute their success to the training, support and guidance they receive from local program administrators and the State Part C Coordinator.

B. SUGGESTION FOR IMPROVED RESULTS FOR INFANTS, TODDLERS AND THEIR FAMILIES*Frequency and location of services.*

Montana's large geographic area and rural environment present special challenges to early intervention service providers. Parents, service providers and administrators report that therapy services are not always available in natural environments and that special services like vision and nutrition are difficult to access. Another challenge they report is finding an integrated group

experience for some children. DPHHS may want to complete a needs assessment across all seven contractors to identify service delivery needs that are difficult to meet and establish a work group to create potential solutions. Service providers and administrators in all four locations reported that being able to provide the needed amounts of early intervention services is a more difficult issue in rural and remote areas. DPHHS needs to continually evaluate whether it has adequate numbers of qualified service providers. Sharing information about innovative strategies across the State will increase the accessibility of early intervention services. In one site, because Part C now contracts with the local school district for speech therapy services, a parent reported that she no longer has to transport her child to a clinic for therapy because he can receive therapy at home.

IV. PART C: FAMILY CENTERED SERVICES

Research has shown that improved outcomes for young children are most likely to occur when services are based on the premise that parents or primary caregivers are the most important factors influencing a child's development. Family-centered practices are those in which families are involved in all aspects of the decision-making, families' culture and values are respected, and families are provided with accurate and sufficient information to be able to make informed decisions. A family-centered approach keeps the focus on the developmental needs of the child, while including family concerns and needs in the decision-making process. Family-centered practices include establishing trust and rapport with families, and helping families develop skills to best meet their child's needs.

Parents and other family members are recognized as the linchpins of Part C. As such, States must include parents as an integral part of decision-making and service provision, from assessments through development of the IFSP, to transition activities before their child turns three. Parents bring a wealth of knowledge about their own child's and family's abilities and dreams for their future, as well as an understanding of the community in which they live.

In 1986, Part C of the IDEA was recognized as the first piece of Federal legislation to specifically focus attention on the needs of the family related to enhancing the development of children with disabilities. In enacting Part C, Congress acknowledged the need to support families and enhance their capacity to meet the needs of their infants and toddlers with disabilities. On the cutting edge of education legislation, Part C challenged systems of care to focus on the family as the unit of services, rather than the child. Viewing the child in the context of her/his family and the family in the context of their community, Congress created certain challenges for States as they designed and implemented a family-centered system of services.

Validation Planning and Data Collection

The Montana Self-Study stated that State policies support families and that parents play an important role in all aspects of the services their children receive. According to the self-study, parents are involved in policymaking and the system benefits from their input. After public input, the Steering Committee recommended that OSEP gather more information on these priorities and concerns: 1) paperwork requirements for Family Support Specialists; 2) ease of access to information; 3) cultural competency; and 4) involvement of biological and foster families.

STRENGTH

Respect for Families

In all four sites that OSEP visited, the message was very clear that early intervention services in Montana are family-centered. This philosophy is embedded in policies and procedures and reflected in day to day interactions with families. The commitment to families was evident when OSEP interviewed Family Support Specialists, service providers, interagency collaborators and

administrators. Providers are responsive, and consider the family's daily routines and schedules when planning for, and delivering, services. Families reported that they are active participants in the IFSP process and often take the lead. IFSPs reflect respect for family values and priorities, and early intervention services are based on the identified family needs. Families feel safe expressing their need for support across State systems rather than being cautious when interacting with different agencies.

V. PART C: TRANSITION

Congress included provisions to ensure that preschool or other appropriate services would be provided to eligible children leaving early intervention at age three. Transition is a multifaceted process to prepare the child and the child's family to leave early intervention services. Congress recognized the importance of coordination and cooperation between the educational agency and the early intervention system by requiring that a specific set of activities occur as part of a transition plan. Transition activities typically include: (1) identification of steps to be taken to prepare the child for changes in service delivery and to help the child adjust to a new setting; (2) preparation of the family (i.e., discussions, training, visitations); and (3) determination of other programs and services for which a child might be eligible. Transition planning for children who may be eligible for Part B preschool services must include scheduling a meeting, with approval of the family, among the lead agency, the educational agency and the family, at least 90 days (with parental permission up to six months) prior to the child's third birthday. Transition of children who are not eligible for special education also includes making reasonable efforts to convene a meeting to assist families in obtaining other appropriate community-based services. For all Part C children, States must review the child's program options for the period from the child's third birthday through the remainder of the school year and must establish a transition plan.

Validation Planning and Data Collection

The Montana Self-Study indicated that transition planning has become more comprehensive, and transitions are individualized to the child and family. Concerns identified were: 1) need for training on child-focused assessments for Part B eligibility; 2) preparations of the child and family for transitions; 3) additional alternatives for transitions to "other services" at age three; and 4) summer services for three year olds who are not eligible for extended school year services. Based on the self study information and the public input process, the Steering Committee recommended that OSEP investigate the success and timeliness of transitions.

A. STRENGTH

Transition training

The State Part C Coordinator and Part B 619 Coordinator have co-presented training specific to transition across the State which has resulted in an increase in successful transitions for children and their families. The joint partnership in providing this training increased its effectiveness because participants received consistent information stressing the importance of a smooth and seamless transition from Part C to Part B. Answers to questions did not have to be delayed because both experts were available. School personnel reported that they now actively participate in planning and assessment before children turn three. Families report that because the professionals had an improved working relationship it placed less of the burden on them to get services in place for their child. Because of the great effectiveness of this training, it should be presented on an ongoing basis due to staff turnover.

B. SUGGESTION FOR IMPROVED RESULTS FOR INFANTS, TODDLERS AND THEIR FAMILIES*Preparing children and families for successful transitions*

Service providers and representatives from school districts stated that it would be beneficial to prepare families for the child-centered focus of special education compared to the family-centered focus of Part C. They stated that parents need more preparation for their role in the planning process. They reported that some parents may not have realistic expectations and could benefit from increased planning and preparation for the transition to special education. OSEP agrees that additional training for parents would enhance the transition process.

VI. PART B: PARENT INVOLVEMENT

A purpose of the IDEA Amendments of 1997 is to expand and promote opportunities for parents and school personnel to work in new partnerships at the State and local levels. Parents must now have an opportunity to participate in meetings with respect to the identification, evaluation, and educational placement of their child, and the provision of a free appropriate public education to their child. Parental involvement has long been recognized as an important indicator of a school's success and parent involvement has positive effects on children's attitudes and social behavior. Partnerships positively impact achievement, improve parents' attitudes toward the school, and benefit school personnel as well.

Validation Planning and Data Collection

Monitoring: OSEP's 1994 monitoring report did not identify any findings of noncompliance in this area.

Self-Assessment: Montana's Self-Assessment states that OPI recognizes that parent involvement in education is critical to student success and has promoted the active participation of parents in the educational process. Montana's comparatively small schools remain very close to their communities and families. Data from the self-assessment indicate that parent participation in the child study team and individualized education program meetings is nearly 100%. As part of OPI's on-site monitoring of school districts, OPI distributes parent surveys. In general, results of these surveys suggest that parents are satisfied with the special education and related services provided by their school districts. OPI closely collaborates with the parent support organization (Parents Let's Unite For Kids) in provision of parent training activities and dissemination of parent training materials and guides. To ensure parent input, OPI includes parent representatives on its task forces, invites parents to participate in workshops and inservice training activities, and includes them in committees when developing technical assistance manuals. OPI has developed brochures and technical assistance manuals that are available to interested parties. This information is written in easy to understand language and covers such areas as parental rights, mediation, complaints and due process.

Public Input Process: OPI distributed a survey to parents and educators across the State. A higher than "satisfactory" response was received from both educators and parents to the statement "Parents are actively involved throughout the special education process for their child." (The average score for parents was 2.25 and the average score for educators was 2.52 on a three-point scale with 2 being "satisfactory.")

In addition, the Montana parent support organization, Parents Let's Unite for Kids, distributed a questionnaire to its membership. Ninety-seven per cent of the parents responding indicated that they participated in writing their child's IEP. They also reported being "more than satisfied" to such statements as "feeling valued as a member of the IEP, having the opportunity to provide input into IEP development, being able to communicate with their child's teacher, and being kept informed of the progress their child is making.

One of the focus questions asked during the public meetings was: "Are parents involved in the education of their child with a disability?" Responses tended to vary depending upon the school district and each parent's individual experiences. Participants generally agreed that they were invited and included when decisions were made regarding their child. Some participants reported that they felt intimidated by the jargon used by educators and that they were not treated as a professional member of the team. Other parents said they lacked an understanding about their rights and that the school district did not do an adequate job of educating them to advocate for their child.

STRENGTH

OPI's positive working relationship with parents

OPI staff has a strong commitment to public participation and has made an extraordinary effort to be accessible to parents and educators in spite of the logistic challenges posed in a large and sparsely populated state. This is confirmed by the overall positive response OSEP observed during the public input process and results from the self-assessment data and survey from the parent support organization. During the on-site process, OSEP was presented with multiple examples of teams going to extraordinary lengths to ensure parent participation, including transporting the parent when necessary and refusing to hold meetings without parents' presence. OPI and educators across the State should be commended for the positive working relationship they developed with parents.

VII. PART B: FREE APPROPRIATE PUBLIC EDUCATION IN THE LEAST RESTRICTIVE ENVIRONMENT

The provision of a free appropriate public education in the least restrictive environment is the foundation of IDEA. The provisions of the statute and regulations (evaluation, IEP, parent and student involvement, transition, participation in large-scale assessment, eligibility and placement decisions, service provision, etc.) exist to achieve this single purpose. It means that children with disabilities receive educational services at no cost to their parents, and that the services provided meet their unique learning needs. These services are provided, to the maximum extent appropriate, with children who do not have disabilities and, unless their IEP requires some other arrangement, in the school they would attend if they did not have a disability. Any removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

The IDEA '97 Committee Reports of the Senate Committee on Labor and Human Resources and the House of Representatives Committee on Education and the Workforce emphasized that too many students with disabilities are failing courses and dropping out of school. Those Reports noted that almost twice as many children with disabilities drop out as compared to children without disabilities. They expressed a further concern about the continued inappropriate placement of children from minority backgrounds and children with limited English proficiency in special education. The Committees stated their intention that “once a child has been identified as being eligible for special education, the connection between special education and related services and the child’s opportunity to experience and benefit from the general education curriculum should be strengthened. The majority of children identified as eligible for special education and related services are capable of participating in the general education curriculum to varying degrees with some adaptations and modifications. This provision is intended to ensure that children’s special education and related services are in addition to, and are affected by, the general education curriculum, not separate from it.”

Validation Planning and Data Collection

Monitoring: As reflected in its 1994 monitoring report, OSEP found that OPI did not meet its responsibility to ensure that: 1) children with disabilities received the related services necessary for them to benefit from special education; 2) extended school year services were considered and provided to children with disabilities in need of these services; and 3) the IEP of each child with a disability contained all the required information.

Self-Assessment: OPI examined a variety of issues that could affect school districts’ ability to provide a free appropriate public education in the least restrictive environment. Generally, the self-assessment found that general education and regular education teachers have a high level of collaboration in programming and participation in the development of IEPs. One of the biggest areas of need identified in the self-assessment is the shortage of qualified personnel in some areas. Barriers that have been identified as contributing to the shortage include: low salaries, the remote location of some areas, and the desire of potential employees to be close to population

centers. The self-assessment also indicated that there is a continuing need for on-going training that is locally responsive, especially with regard to general education teachers serving children with disabilities and infusing special education supports into the general curriculum. OPI's monitoring of school districts over the past 5 years has shown 88% to 97% of districts to be in compliance in areas associated with providing a free appropriate public education to children with disabilities in the least restrictive environment.

Public Input Process: OPI distributed a survey to parents and educators across the State. A higher than “satisfactory” response was received from both educators and parents to the statement “Montana schools provide a Free Appropriate Public Education in the Least Restrictive Environment for Eligible Children with Disabilities.” (The average score for parents was 2.5 and the average score for educators was 2.43 on a three-point scale with 2 being “satisfactory.”)

In addition, the Montana parent support organization, Parents Let's Unite for Kids, distributed a questionnaire to its membership. Eighty-six percent of the parents responding reported that they had an IEP that was written for their disabled child and 59% of the parents reported that their child benefited from a combination of special and regular education services. However, parents reported that they were “less than satisfied” with the school's ability to address behavior problems, and to provide related services and the necessary educational supports, curriculum modifications, and adaptations necessary to meet the needs of their child.

One of the focus questions asked during the public input meetings was: “Do students with disabilities receive a free appropriate public education in the least restrictive environment that promotes a high quality education in the general curriculum?” Responses tended to acknowledge the limitations in services and alternatives for students with and without disabilities in a rural area. Individuals, in general, stated that the schools' commitment to students is “exceptional.” Some participants expressed frustration over related services that were contracted, lack of funds to provide better services, and the paperwork burden. Although most children with disabilities receive instruction in general education classrooms and in inclusive settings, many individuals expressed concern about the skills and support the general classroom teachers have for educating students with disabilities in their classrooms.

A. STRENGTHS

1. Collection of suspension/expulsion data

The Division of Special Education in collaboration with Safe and Drug Free Schools, Gun Free Schools and representatives from the Divisions of Measurement and Accountability and Information Systems Development/Maintenance worked together to create a data gathering instrument that allows OPI to collect suspension/expulsion data for all students, including students with disabilities. The resulting elimination of separate reports has significantly reduced the paperwork burden for schools and most importantly, students with disabilities are included as a part of reporting requirements for all students.

2. Montana Behavioral Initiative

The Montana Behavioral Initiative is a comprehensive staff development project created to improve the capacities of schools and communities to meet the diverse and increasingly complex social, emotional and behavioral needs of students. The Montana Behavioral Initiative assists educators and other community members in developing the attitudes, skills, and systems necessary to ensure that each student leaves public education and enters the community with social competence appropriate to the individual regardless of ability or disability. Personnel in over one hundred districts have received training.

3. Training for Inclusive Education (TIE) Project

The Training for Inclusive Education Project provides training opportunities to school districts to assist them in initiating and implementing inclusive educational practices. The project is unique in that teams must consist of: 1) an administrator; 2) a general educator; 3) a special educator; 4) a parent of a child with a disability; 5) a paraprofessional or aide; and 6) a related service person. Key concepts developed during the training include: team-building and leadership training; strategies for adapting the curriculum to meet the needs of a diverse student population; appropriate use of the general curriculum and classroom activities to meet IEP goals for individual students; ways of reallocating time and money resources in order to better serve students in the general education setting; techniques and models for collaborating with parents, professionals and paraprofessionals; models and roles used in the practice of team-teaching; principles of working with peer tutors and circles of support; and communication skills and issues of conflict resolution.

Over sixty schools with teams of six or more members have received training. This project has been proactive in linking the education of students with disabilities to the general curriculum and assisting those students in meeting high standards.

4. Educational Interpreter Certificate Project

The Educational Interpreter Certificate Project is a comprehensive and collaborative training program utilizing distant learning strategies and summer programs to deliver instruction to educational interpreters serving students with deafness. The project specifically addresses the skills necessary for providing educational interpretation. The project is unique in that what has begun as a two-State project has developed into a nine-State project, including the BIA.

B. AREAS OF NONCOMPLIANCE*Adequate Supply of Qualified Personnel*

Availability of an adequate supply of qualified related services personnel to provide a free appropriate public education to children with disabilities.

34 CFR §300.300 requires that a free appropriate public education be made available to all children with disabilities. In addition, 34 CFR §300.381 requires that each State ensure an adequate supply of qualified personnel, including special education and related services personnel and leadership personnel, necessary to carry out the purposes of IDEA.

As discussed below, OSEP determined that OPI did not ensure that children with disabilities had available an adequate number of related service providers, specifically in speech, occupational therapy, physical therapy, and counseling, to implement IDEA.

Three administrators in three different agencies reported that they depend on the Department of Mental Health to provide counseling services for their agency and that they have no other way to provide psychological counseling services to children who need them to benefit from special education. They explained to OSEP that because of financial cutbacks in the managed care system, the Department of Mental Health was unable to provide enough counseling services. A principal in one school district stated that students who have been identified as emotionally distributed suffered because they did not receive psychological counseling services that were needed for them to benefit from special education. OSEP reviewed the file of one of these students. Although he was failing all of his subjects in school and school staff acknowledged a need for more psychological counseling, counseling services were limited to 30 minutes per week based on the counselor's availability. In another school district, OSEP reviewed the records of children with disabilities who had psychological counseling on their IEPs. OSEP was informed that none of these students received consistent services because of staff shortages and scheduling problems with the Department of Mental Health. In a third school district, two teachers informed OSEP that they had students that were in need of psychological counseling services to benefit from special education. They reported that the procedure was to give parents a referral to an outside agency when the need was identified. An administrator and a school psychologist in a fourth school district said that counseling services were simply not available to students who need them to benefit from special education because they could not depend on Mental Health to provide those services.

In discussing personnel shortages, OSEP was informed by OPI staff that one of the biggest problems faced by school districts was obtaining qualified speech pathologists. Two administrators in different areas of the State reported that they were faced with a shortage of speech pathologists and this has impacted their ability to provide appropriate services for children with disabilities. One administrator reported that there were to approximately 50 children whose speech services were less than what they needed because of this shortage. An administrator in a cooperative told OSEP that his agency was short one speech pathologist and

was unable to hire one because there were none available. As a result, 50 students received less speech service than was indicated in their IEPs.

In three different school districts, administrators and teachers reported that students with disabilities were not receiving sufficient occupational and physical therapy services because there is a scarcity of physical and occupational therapists. In many cases, school districts have to contract these services at prohibitive costs. A teacher in one school district reported that the physical and occupational therapist were overloaded and did not have enough time to provide sufficient services to meet their needs. In another agency, the service provider reported that three or four children that she is aware of were not getting sufficient services to meet their needs. The administrator confirmed this. In a third school district, a teacher and an administrator reported that physical and occupational therapy were limited to once per month and that these services were not sufficient to meet children's needs.

C. SUGGESTIONS FOR IMPROVEMENT RESULTS FOR CHILDREN WITH DISABILITIES

Training for general education teachers

Montana has a high percentage of children with disabilities receiving services in the general classroom. The 20th Annual Report to Congress indicates that 64% of school-aged children with disabilities in Montana were educated in the regular classroom during 1995 to 1996 as compared to a national average of 55%. This figure reflects a philosophy in Montana toward inclusive programming for students with disabilities as well as the reality of serving a relatively small number of children with special needs across huge geographical distances. A district may, for example, have only one or two children with disabilities who have high needs in the district. This creates a situation that requires the creative use of educational resources, often requiring the involvement of the general education teacher in providing the special education program, consistent with Montana's personnel standards. Through interviews OSEP conducted with service providers, OSEP heard numerous requests from both general and special educators for additional training and support for the general education teacher in educating children with disabilities. Although OSEP notes that many of the activities associated with the Training for Inclusive Education Project would seem to meet this need, we also note that this project has only reached a limited number of schools in Montana.

VIII. PART B: SECONDARY TRANSITION

The National Longitudinal Transition Study states that the rate of competitive employment for youth with disabilities out of school for three to five years was 57 percent, compared to an employment rate of 69 percent for youth in the general population. The Study identifies several factors that were associated with post-school success in obtaining employment and earning higher wages for youth with disabilities. These include completing high school, spending more time in regular education, and taking vocational education in secondary school. The Study also shows that post-school success is associated with youth who had a transition plan in high school that specifies an outcome, such as employment, as a goal. The secondary transition requirements of IDEA focus on the active involvement of students in transition planning, consideration of students' preferences and interests by the IEP team, and the reflection, in the IEP, of a coordinated set of activities within an outcome-oriented process which promotes movement from school to post-school activities. Through parent and student involvement, along with the involvement of all agencies that can provide transition services, student needs can be appropriately identified and services provided that best meet those needs.

Validation Planning and Data Collection

Monitoring: As reflected in its 1994 monitoring report, OSEP found that OPI did not meet its responsibility to ensure that a notice to parents meeting Part B requirements for IEP meetings where transition would be discussed was provided, and that students were invited to meetings where transition services were considered.

Self-Assessment: Montana's Self-Assessment indicates that high school completion rates have increased over the past five years. An analysis of OPI's on-site monitoring over a five-year period shows that 79% of all school districts monitored were in full compliance with transition requirements. The monitoring also demonstrates that 90% of all school districts had the required participants at IEP meetings. In addition, the self-assessment states that the Developmental Disabilities and Vocational Rehabilitation agencies participate in transition planning, and that earlier involvement has improved. It also notes that because of Vocational Rehabilitation counselors' heavy caseloads, attendance at IEP meetings is difficult.

Public Input Process: OPI distributed a survey to parents and educators across the State. A less than "satisfactory" response was received from both educators and parents to the statement "Students with disabilities are adequately prepared for employment, postsecondary education, independent living, and community participation." (An average score for parents was 1.75 and an average score for educators was 1.91 on a three-point scale with 2 being "satisfactory"). Comments tended to focus on the lack of options and opportunities in rural Montana.

In addition, the Montana parent support organization, Parents Let's Unite for Kids, distributed a questionnaire to its membership. Responses to questions about secondary transition indicated that parents perceive a need for improvement in this area. Fifty-nine percent of parents who reported that their child had a transition plan indicated that their child not had an opportunity for work experience or a plan for exposure to work experience.

One of the focus questions asked during the public input meetings was: “Are students with disabilities receiving services that facilitate a successful transition from school to work or from school to post-secondary education?” Responses indicated that this was a problematic area for many students with disabilities. Participants reported there are long waiting lists for vocational and living services, some as long as three to four years. There is often a lack of meaningful jobs, employment experience doesn't start early enough, and there are simply few, if any, employment opportunities in many communities. Participants reported that the biggest problem is that adult services are not mandated and that the funding simply is not available to provide even minimal services.

A. AREA OF NONCOMPLIANCE

Statement of needed transition services beginning at age 16 (or younger, if appropriate)

34 CFR §300.346(b) of the regulations in effect at the time of the monitoring visit required that the IEP for each child must include a statement of the needed transition services. The statement of needed transition services in IEPs must be a coordinated set of activities within an outcome-oriented process that promotes movement from school to post-school activities.

In five school districts, 19 out of 24 files reviewed of students aged 16 or older, IEPs, did not include outcome-based, coordinated activities designed to provide movement to post-school activities. Although the school districts OSEP visited utilized a standard set of forms developed by OPI for statements of needed transition services, their utilization did not facilitate the development of an outcome-based process with a coordinated set of activities. In some instances students had a set of activities referenced without an outcome-based goal. For example, one young lady only had childcare listed on her IEP as an activity to promote transition because she was going to have a baby. However, there was not a coordinated set of activities stated on the IEP that would lead a successful transition after she left secondary school. The transition plan did not address other important areas such as how she would support herself and her child, money management, or social skills. In other instances, students' preferences and interests were listed as the apparent goal without articulating a coordinated set of activities to achieve that goal. For example, in one file that OSEP reviewed, the student indicated he wanted to be a police or fireman. The IEP only articulated academic objectives that would lead to graduation, but were not tied to the student's desired outcome of becoming either a police or fireman.

B. SUGGESTION FOR IMPROVED RESULTS FOR CHILDREN WITH DISABILITIES

Culturally sensitive, coordinated transition plans should be individually developed to better meet the needs of the Native American population within the State

Montana's economic conditions in general and the economic condition particularly in the more rural and remote areas, present significant challenges in designing secondary transition plans that produce effective outcomes. This economic challenge is compounded by geographic distances,

which sometimes result in a significant limitation on the number of available options for employment.

Providing appropriate educational services to Native Americans living on reservations requires careful consideration of social-cultural factors in designing and providing effective transition services to Native American children with disabilities. Many Native Americans reside on reservations that are extremely remote and impoverished, even by Montana standards. In addition, there are jurisdictional issues between State, local, Federal, and tribal governments. OSEP visited two Indian reservations. School personnel on Indian reservations told OSEP that even for youths that go to college, many do not complete a degree because of difficulty in social adjustment. Employment opportunities are extremely limited because of an 80% unemployment rate on the reservation. The drop out rate is also extremely high as compared to other communities outside the reservation. A priority for program improvement related to post-secondary transition would be to ensure that culturally sensitive, coordinated transition plans are developed that are sufficient in scope to better ensure positive outcomes for Montana's Native American children.

IX. PART B: GENERAL SUPERVISION

IDEA assigns responsibility to State education agencies for ensuring that its requirements are met and that all educational programs for children with disabilities, including all such programs administered by any other State or local agency, are under the general supervision of individuals in the State who are responsible for educational programs for children with disabilities and that these programs meet the educational standards of the State educational agency. State support and involvement at the local level are critical to the successful implementation of the provisions of IDEA. To carry out their responsibilities, States provide dispute resolution mechanisms (mediation, complaint resolution and due process), monitor the implementation of State and Federal statutes and regulations, establish standards for personnel development and certification as well as educational programs, and provide technical assistance and training across the State. Effective general supervision promotes positive student outcomes by promoting appropriate educational services to children with disabilities, ensuring the successful and timely correction of identified deficiencies, and providing personnel who work with children with disabilities the knowledge, skills and abilities necessary to carry out their assigned responsibilities.

Validation Planning and Data Collection

Monitoring: As reflected in its 1994 monitoring report, OSEP found that OPI did not meet its responsibility to ensure that a written decision was provided within 60 days after a complaint was filed and that OPI did not have procedures to ensure that local education agencies Part B applications met Federal requirements.

Self-Assessment: Montana's Self-Assessment indicates that OPI has engaged in many proactive activities to address the needs of children with disabilities and support public agencies in providing services to children with disabilities. OPI has provided numerous training activities and technical assistance documents. It continues a five-year monitoring cycle in spite of a relatively small staff. Over the four year period from 1995 to 1998, 61 complaints were filed with OPI. Eight of those complaints were dismissed or withdrawn. There were 38 complaints in which the schools were found to be out of compliance and corrective action was required by the school. OPI also stated that the number of requests and due process hearings have significantly decreased since the initiation of the Early Assistance Program. As OSEP has noted in this Report, OPI has initiated many activities that benefit children with disabilities.

Public Input Process: OPI distributed a survey to parents and educators across the State. A mixed response was received from educators and parents to the statement, "The Montana OPI does a good job supervising and monitoring special education programs in school districts throughout the State." (An average score for parents was 1.75 and an average score for educators was 2.25 on a three-point scale with 2 being "satisfactory"). Comments tended to be appreciative and complimentary regarding the dedication of OPI staff.

One of the focus questions asked during the public input meetings was: "Are there any administrative barriers to providing appropriate services to students with disabilities?"

Comments regarding OPI staff were glowing pointing toward their timely support, dedication, and including stakeholders in policy-making.

A. STRENGTHS

1. Early Assistance Program

The Legal Services and Special Education Divisions of the OPI have instituted the Early Assistance Program that is designed to provide technical assistance to parents, school districts and advocacy organizations in regard to the delivery of a free appropriate public education for students with disabilities. The intent of the Early Assistance Program is to intervene prior to a due process hearing stage or at the time of filing a complaint with OPI. The Early Assistance Program gathers information and attempts to resolve the problem within fifteen school days. OPI feels that, given the opportunity to discuss the issues in a less formal venue, both parents and schools can reach agreement without undermining the relationships necessary to ensure the smooth delivery of special education services to students with disabilities. A key to success thus far has been the active involvement of parent and advocacy organizations. The Early Assistance Program has significantly reduced the number of complaints and due process hearings.

2. Montana's regionalized personnel development system

Montana has implemented a system of personnel development which is cost effective, includes a high level of involvement of institutions of higher education and utilizes a regional council structure for planning and implementation of personnel training. The regionalized structure permits the system to be more responsive to the unique needs of the school districts within each region.

B. AREAS OF NONCOMPLIANCE

Ensuring correction of deficiencies as identified by OPI through its monitoring of public agencies.

34 CFR §300.600 requires that the State ensure that the requirements of IDEA are carried out and that each educational program for children with disabilities is under the general supervision of the State educational agency and meets the education standards of the State education agency. One part of a State's general supervision over educational programs to children with disabilities is the effective utilization of a monitoring system.

As discussed below, OSEP found that while OPI utilizes a monitoring system that is effective in determining whether school districts meet Part B compliance requirements, it does not ensure that deficiencies that it has identified during its monitoring are corrected.

As part of its monitoring process, OPI writes corrective actions for school districts that have been found in violation of special education requirements. OPI staff reported to OSEP that aside from

receiving written documentation there, is no process for follow-up once corrective actions have been approved.

OSEP visited a school district that OPI had monitored in August 1996 and whose corrective action plan was closed in April 1999. OPI, in addition to other compliance findings, cited the district for writing separate speech IEPs and for removing children with disabilities to a setting that was not in the least restrictive environment. During Validation Data Collection, OSEP visited the same program in this district that serves children with severe physical disabilities, ranging in age from eight to 20 years, in a high school building. This same program was operating in the same manner that was cited by OPI as being out of compliance with least restrictive environment requirements in 1996. In addition, OSEP found that speech IEPs were still being developed outside the regular IEP meeting.

In another school district, OPI cited the district in June 1997 for deficiencies in transition planning, including not ensuring student participation in IEP meetings where transition was discussed, missing documentation of participation by other agencies, and goals and objectives designed to meet assessments of transition needs. Inservice training of school personnel was conducted in October 1997 as required by OPI as a corrective action, and OPI concluded in January 1998 that "all issues have been appropriately addressed. When OSEP monitored these same requirements in April 1999, the district was still not meeting the requirements for transition planning.

3. Completion of due process hearing within 45 days

34 CFR §300.512 requires that a final decision be reached in a due process hearing and a copy of the decision mailed to each of the parties not later than 45 days after the request for a hearing, unless the hearing officer grants specific extensions of time at the request of either party.

As discussed below, OSEP found that OPI does not ensure that requests for due process hearings are resolved within the timelines specified under Part B.

OPI staff told OSEP that some due process hearings are not completed within 45 days. They said that this was primarily the result of illness and changes in OPI personnel. OSEP reviewed the records of 23 requests for due process hearings from 1997 to the date of Validation Data Collection. Thirteen of these requests were not resolved within 45 days from the time of the request or granted specific extensions of time by the hearing officer at the request of either party. In one instance, for example, a request for a due process hearing was open over a year and still unresolved, with no record of extensions, at the time of OSEP's visit. In most instances due process hearings were not extended for specific periods of time, were extended after 45 days had already expired, or were still not resolved after extensions had expired.