December 2, 1999

Honorable Rod L. Betit  
Executive Director  
Utah State Department of Health  
P.O. Box 142802  
Salt Lake City, Utah 84114-2802

Honorable Steven Laing  
Superintendent of Public Instruction  
Utah State Office of Education  
250 East 500 South  
Salt Lake City, Utah 84111

Dear Dr. Betit and Dr. Laing:

The U.S. Department of Education’s Office of Special Education Programs (OSEP) conducted a review in Utah during the weeks of October 19 and December 7, 1998 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 Utah State Office of Education (USOE), the Utah Department of Health (UDOH), and parents and advocates in Utah.

In conducting its review of Utah, OSEP applied the standards set forth in the IDEA 97 statute and in the Part C regulations (34 CFR Part 303) and Part B regulations (34 CFR Part 300), as they were in effect at the time of the OSEP review. The Part C regulations in effect in September 1998 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 September 1998 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, USOE and UDOH 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 Steering Committees of broad-based constituencies, including representatives from USOE, UDOH and OSEP. The Steering Committees assessed the effectiveness of State systems in ensuring improved results for children with disabilities and protection of individual rights. In
addition, the Steering Committees 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 Utah, 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 Utah, areas that require corrective action because they represent noncompliance with the requirements of the IDEA, and technical assistance regarding improvement for best practice. Enclosed you will find an Executive Summary of the Report, an Introduction including background information, and a description of issues and findings.

USOE and UDOH have indicated that this Report will be shared with members of the Steering Committee, the State Interagency Coordinating Council, the State Advisory Panel, and members of the public. OSEP will work with your Steering Committees 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, Ms. Mae Taylor-Sweeten, and Ms. Ginger Rhodes from USOE; and Ms. Darla Saunders from UDOH, were responsive to OSEP’s requests for information. They each 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, school and agency administrators, and special education unit administrators.

Thank you for your continued efforts toward the goal of achieving better results for infants, toddlers, children and youth with disabilities in Utah. 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. Now that children with disabilities are receiving services, 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,

______________________________
Patricia J. Guard
Acting Director
Office of Special Education Programs

Enclosures

cc: Ms. Mae Taylor-Sweeten
    Ms. Darla Sauder
EXECUTIVE SUMMARY

UTAH 1998

The attached report contains the results of the first two steps (Validation Planning and Validation Data Collection) 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 Utah during the weeks of October 19 and December 7, 1998. 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 of a Self-Assessment by Part B and analysis of both the Self-Assessment and the Part C Self-Study (completed earlier), 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 the public input process, OSEP and the State made efforts to include multi-cultural and underrepresented populations. 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 Utah State Office of Education (UDOE) and Utah Department of Health (UDOH), parents, advocates, and members of the Steering Committees.

This report contains a more complete description of the process utilized to collect data, and to determine strengths, areas found to be out of compliance with the requirements of IDEA, and 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:

• The State Interagency Coordinating Council has been very successful in fostering interagency collaboration to help solve statewide issues.
• The State has a Comprehensive System of Personnel Development designed to provide training opportunities for professionals and para-professionals in an effort to address regional personnel shortages and a credential process that allows individuals to use prior relevant work experience to fulfill State personnel certification requirements.
• UDOH effectively collects and analyzes data to prioritize technical assistance needs among the collaborating agencies.
• UDOH uses a multi-faceted program evaluation system, including parent satisfaction surveys, to assess and improve the effectiveness of its early intervention system.
• The State developed an interagency collaborative and public/private partnership effort to implement and disseminate family-friendly child find and public awareness initiatives across the State that have resulted in a significant number of referrals from families.
• UDOH implemented a statewide initiative to promote and ensure family participation in the implementation and improvement of program development, personnel training, and policy development.
• UDOH’s Transition Planning Guide and strong collaboration with other agencies at the State and local level have helped to ensure effective transition from Part C services to Part B and other appropriate services.

Areas of Noncompliance

OSEP observed the following areas of noncompliance:

• UDOH does not have an effective monitoring system to ensure that early intervention providers meet the requirements of Part C regarding the provision of services in natural environments.
• UDOH has not ensured that the determination of natural environments for each eligible infant and toddler with a disability is made on an individualized basis, and that the Individualized Family Service Plan for each infant or toddler meets his or her unique needs and includes a justification when services are not provided in the natural environment.

Education of Children and Youth With Disabilities:
Part B of IDEA

Strengths

USOE has effectively developed State systems, as part of its general supervisory responsibilities, to implement the provisions of Part B and to promote appropriate educational services statewide. OSEP observed the following strengths:

USOE effectively uses Federal funds to develop statewide systems

• USOE used the federal transition systems change grant to fund Community Transition Councils and transition coordinators in each school district. These positions have been maintained statewide through funding from special education, rehabilitation, and School-to-Work.
• The Utah Consortium for Special Education routinely determines the direction of Utah’s Comprehensive System of Personnel Development activities. Its capacity to address personnel needs will be enhanced through the recently awarded State Improvement Grant from OSEP that is intended to address the needs of pre-service and in-service preparation to ensure that all personnel who work with children with disabilities have the skills and knowledge necessary to meet their needs.
USOE effectively uses existing State resources

- USOE and local districts are expanding efforts to retain and recruit qualified staff by collaborating with institutions of higher education to provide more accessible training opportunities. These opportunities, including distance learning courses, are provided to educators with varied needs, including bilingual personnel, and personnel who work with students with severe disabilities, and behavioral disorders.

- USOE has extended its limited resources capacity through the development of statewide teams. Examples include the Statewide Assistance Teams (SWAT), a “teacher to teacher” network, that ensures linkages with other teachers who share similar problems in dealing with a particular type of situation or student; and the Utah Augmentative-Alternative-Assistive Communication and Technology (UAACT) Teams that provide assistive technology evaluations used by local IEP teams.

- USOE has developed effective interagency collaborative initiatives, such as Families, Agencies and Communities Together (FACT) designed to empower local communities to develop comprehensive service delivery systems.

USOE is proactively addressing key provisions of IDEA 97 as demonstrated by the following examples:

- USOE actively reaches out to students with behavioral needs:

  1) Through comprehensive training and technical assistance in behavioral and educational strategies, the Behavioral and Educational Strategies for Teachers (BEST) is designed to enhance the capacity of districts to meet the needs of students with behavioral disorders in all settings, from regular education to self-contained settings.

  2) As a result of statewide training in the use of instruments designed to conduct functional behavioral analyses and create appropriate behavioral intervention plans, such as the Functional Behavioral Assessment (FUBA) and the Behavioral Intervention Plan (BIP), behavioral management specialists and teachers are acquiring the needed skills to address this population.

- USOE staff is very responsive to the needs of local districts and provides numerous training opportunities and technical assistance to personnel based on their needs at the district and State levels, including several conferences that are highly rated by district personnel.

- USOE is in the first year of a revised monitoring system that has shifted from episodic procedural monitoring to a system that emphasizes positive outcomes for students with disabilities and connects program effectiveness with the requirements of IDEA 97.
Compliance Areas

OSEP did not identify areas of noncompliance with Part B of IDEA in the districts visited. However, in a few areas, OSEP did have suggestions for improvement that would assist Utah toward meeting its goal of achieving better results for children and youth with disabilities.
Introduction
Administrative Structures and Children Served
Validation Planning
Validation Data Collection
Improvement Planning

I. Part C: General Supervision
   A. Areas of Strength
   B. Area of Noncompliance
   C. Suggestions for Improved Results for Infants, Toddlers and Their Families

II. Part C: Child Find/Public Awareness
   A. Area of Strength
   B. Suggestions for Improved Results for Infants, Toddlers and Their Families

III. Part C: Early Intervention Services in Natural Environments

IV. Part C: Family-Centered System of Services

V. Part C: Early Childhood Transition

VI. Part B: Parent Involvement

VII. Part B: Free Appropriate Public Education in the Least Restrictive Environment

VIII. Part B: Secondary Transition
   A. Areas of Strength
   B. Suggestions for Improved Results for Children

IX. Part B: General Supervision

Areas of Strength
INTRODUCTION

The population of Utah is approximately 2 million and nearly 40% of that number are children and youth. The largest concentration of population is in the Wasatch Front between Provo to the south and Ogden to the north. Utah has experienced a 48% increase in minority populations since 1995. There are approximately 56,000 children and youth with disabilities, birth through 21, receiving early intervention services or special education services.

Utah has a demonstrated commitment to the provision of preventive services to enhance the overall health, well being, and education of children and families. The Utah State Office of Education (USOE) and Utah Department of Health (UDOH) have developed collaborative partnerships with local school districts and administering agencies that enhance their ability to address the challenges of providing appropriate services to children and families. Both of these agencies have developed State initiatives to respond to the emerging needs of the populations they serve. In order to maximize State and Federal resources, USOE and UDOH have developed cooperative agreements with all concerned agencies. They have formed strong partnerships with institutions of higher education, which play a significant role in facilitating personnel training as well as the implementation, evaluation and improvement of the early intervention system.

Administrative Structures and Children Served: UDOH’s Division of Community and Family Health, Children with Special Health Care Needs Program, was mandated by Public Law 97-35, Omnibus Reconciliation Act of 1981 and Title 26 as the lead agency for the implementation of the State's Part C program. The Part C program is also referred to as Baby Watch. Baby Watch has a mission statement and four key goals and outcome objectives that provide guidance to the participating and collaborating agencies. Funding for Baby Watch comes from several sources, including Part C Federal funds, State appropriations, Medicaid reimbursement, and various other fiscal supports at the local level including a sliding fee scale for parent payment. UDOH administers the early intervention program through contractual agreements with eighteen local agencies throughout the State. These provider agencies include three local health departments, six local school districts, two schools for the deaf and blind, two university affiliated programs and five private organizations.

The management and coordination of these agencies is the responsibility of UDOH’s Baby Watch staff. There are five full time positions, including a program coordinator and five full-time support staff responsible for administrative support and the fiscal operations of Baby Watch. These individuals also serve on several interagency committees responsible for statewide initiatives. UDOH’s Baby Watch staff is also responsible for on-going compliance monitoring, development of reports, provision of technical assistance to local programs, and follow-through with corrective action plans to ensure compliance of all partnering agencies in carrying out the provisions of Part C.

To be eligible for early intervention services in Utah, a child must have a diagnosed condition with a high probability of resulting in a delay, or a 25% delay in one or more areas of development. In 1996, Utah reported serving 1,972 (1.72%) children. Although there was an

1 Much of the information in this section was provided by USOE and UDOH.
increase in the general population of children ages birth to two in the State, UDOH reported that in 1997 it served only 1,934 children (1.61%). This apparent decrease was due, in part, to improvements in the child tracking system that resulted in a more accurate count of the number of children receiving services, and a more efficient system of timely transitions which resulted in a decrease in the number of children remaining in the Part C system past their third birthday. UDOH anticipates that these improvements in its child count and transition procedures will better enable Baby Watch to accurately evaluate the effectiveness of its child find efforts in specific regions of the State.

Public school enrollment during the 1998-99 school year was 477,061 across 40 school districts ranging in size from 183 to 73,285 students. Approximately 12% of the student population is from minority backgrounds. Utah has a low per pupil expenditure at $3,300 per pupil (national average is $5,800) and a high pupil/teacher ratio. Special education revenue for 1997-98 totaled $178,918,407. Of these funds $1,665,812 were local funds, $150,482,717 were State funds, and $ 26,789,879 were Federal funds.

The USOE, Special Education Services Unit, employs a Director of Special Education (who is also the Director of Services for At-Risk Students), a Coordinator of Special Education, eight specialists and five (full time equivalent) support staff. The State staff is responsible for specific content areas as well as generic technical assistance to districts. Specialists are assigned districts and share responsibility for monitoring, complaint investigation and review of local policies and procedures.

USOE flows approximately 80% of its Part B Federal funds to districts. The remaining discretionary funds are expended on activities and projects that are tied to the Utah Agenda for Empowering Students with Disabilities, which is a strategic plan and the vehicle used to develop, implement and evaluate systems change and long range major objectives. The Utah Agenda is intended to guide future programming for students with disabilities. Current strategies include infusing the Utah Agenda into the Utah Public Education Strategic Plan and other broad change initiatives.

USOE designates the vast majority of Utah’s discretionary funds for Comprehensive System of Personnel Development activities. Other discretionary projects are intended to accomplish project goals in the areas of preschool, inclusion, behavior, and effective instruction related to the provision of special education and related services. USOE also allocates significant funds for pre-service training in the areas of preschool, speech and language, school psychology, paraprofessional, and mild/moderate and severe teacher preparation. To further strengthen its capacity to address personnel needs, Utah successfully competed for and received a State Improvement Grant in the amount of $578,551.

**Statewide Assessment Program:** Utah’s accountability system includes two major testing programs – 1) Stanford Achievement Test (ninth edition), referred to as the Stanford 9, and the 2) Core Assessment Program. The Core Assessment program uses criterion-referenced tests that have been developed by Utah State specialists, Utah teachers, and other educators from Utah schools. Its primary purpose is to provide specific information to teachers, students, parents, and
administrators about the extent to which students have mastered State Core Curriculum. The full range of accommodations is available to students with disabilities as determined appropriate by the IEP team.

The Stanford 9, a norm referenced test, is administered in grades 5, 8, and 11. School district participation in this program is mandatory according to State statute. The primary purpose of this program is to provide a regular check on the performance of Utah’s educational system in the basic curriculum areas by comparing Utah’s students to a nationwide sample (i.e. the test’s norm group). School districts are advised to give students with disabilities a practice test. If a student receives greater than 20% correct, the student is encouraged to take the test. For 1998-99, the scores of approximately 85% of students with disabilities were included in the statewide report, in aggregation with scores of nondisabled students. All of these students with disabilities took the Stanford 9 without accommodations or modifications. The State is working on a mechanism for reporting disaggregated results for students with disabilities for the 1998-99 administration of the Stanford 9.

IDEA 97 at §300.138 requires that children with disabilities are included in general, State and district-wide assessment programs with appropriate accommodations and modifications in the administration, if necessary. Based on information that OSEP collected it appears that about 15% of students children with disabilities are either not included or, if included, their scores were not being reported. It was not clear at the time of OSEP’s visit if alternate assessments were available. As Utah continues to develop its statewide assessment program, the State needs to ensure that children with disabilities are included in the regular assessment program with appropriate accommodations and modifications, or are provided an alternate assessment. In addition, the State must ensure that the scores of children with disabilities are reported with the same frequency and in the same detail as the State reports on the assessment of nondisabled children.

Validation Planning

Validation planning was an opportunity to collect and review Utah’s system data data, gathered from broad based constituents related to the delivery of services to children with disabilities and their families. OSEP, UDOH and USOE participated in several teleconferences to plan the public input process, clarify the role of the steering committee, and identify potential statewide issues.

In preparation for the validation planning week, OSEP reviewed available data. For Part C’s Baby Watch, OSEP reviewed information about the State's self-assessment (Self-Study), performance reports, correspondence from parents, advocates and other interested parties, and UDOH's application for Fiscal Year 1997 Part C funds. For Part B, OSEP reviewed the previous Utah Part B monitoring report (1994), issues from its complaint management systems and State-reported data.

UDOH in collaboration with Utah State University completed its first self-assessment for Part C in the fall of 1995-96 and updated it in the fall of 1997. In 1998, UDOH reviewed the updated 1997 Self-Study. An analysis of the Self-Study during 1997-98 included the identification of State, local and Federal resources that support the implementation of the statewide system.
UDOH highlighted areas of accomplishment and concerns from parent and service provider surveys. UDOH identified State staff and/or staffs of collaborating agencies with lead responsibility for implementing strategies to address the identified areas of concern.

During the week of October 19, 1998, OSEP and the joint Steering Committees for Parts B and C conducted a series of public meetings across the State to obtain information on issues and concerns about IDEA service delivery. These meetings were in Provo, Salt Lake City, and Blanding. The public meetings in Blanding focused on the needs of special populations, including Native Americans, and preschoolers. Attendance at Part C meetings varied from 55 to 75 persons. Approximately 120 persons attended the Part B meetings. There was also a teleconference with Part C representatives from St. George, Vernal, Richfield, and Weber Morgan.

For Part B, parent representatives of the Parent Training and Information Project facilitated the meetings in Provo and Salt Lake. Staff from the Utah Learning Resource Center facilitated the Part C meetings. In addition, OSEP held a meeting with representatives of six advocacy organizations. Represented were the Utah Parent Center, Allies for Families, Learning Disabilities Association of Utah, the ARC of Utah, Tourettes Syndrome Association and the Autism Society. OSEP also met with the Utah Advisory Committee on Disabilities.

Discussions at the public input and focus meetings centered around questions that addressed the nine cluster areas of IDEA identified by OSEP as leading to better results for infants, toddlers and children with disabilities. Focus questions were asked in order to obtain input on each of the cluster areas. (The Part B cluster areas are: Parent Involvement, Free Appropriate Public Education in the Least Restrictive Environment, Secondary Transition and General Supervision. The Part C cluster areas are: Child Find and Public Awareness, Family-Centered Systems of Services, Early Intervention Services in Natural Environments, Early Childhood Transition, and General Supervision.)

The week concluded with an all-day meeting with the Parts B and C Steering Committees. Part B members consisted of parents, individuals with disabilities, teachers, local school administrators, institutions of higher education, representatives from correctional and rehabilitative agencies, members of the Utah State Board of Education Advisory Committee on Disabilities, and staff from USOE. Representatives from Part C included the following: parents, interagency collaborators, service providers, representatives of childcare agencies, and staff from UDOH.

The purpose of these meetings was to discuss the results of the public input process, and review Utah’s data collection and analysis in relation to the Utah Agenda for Part B and the State Strategic Plan for Part C. A representative from the Mountain Plains Regional Resource Center Network facilitated the Part B Steering Committee meeting. Representatives from the Utah Learning Resource Center facilitated the Part C meeting.

Responses gathered during each of the public input and focus meetings were presented to the members to identify issues related to potential violations of Parts B and C of IDEA, areas for improvement, and to identify programmatic strengths and promising practices. In order to
develop priority issues that would form the foundation for Part B’s Self-Assessment and identify specific issues to be investigated by OSEP, the Steering Committee discussed major issues raised at the public input and focus group meetings, provided additional input, and selected what they considered to be priority areas of concern. A similar process was used for Part C input. Based on new input, the Part C Steering Committee revised the 1997-98 Self-Study. The committee discussed recommendations, data collection strategies and sites to be visited by OSEP.

Since OSEP’s visit, the Planning Committee for the Utah Agenda has assumed the responsibilities of the Part B Steering Committee. This committee is a representative group of stakeholders that is broader in scope than the original Steering Committee membership. Several members of the original group are also on the Utah Agenda group to provide continuity as USOE moves through the Self-Assessment and improvement planning process. USOE believes that it is crucial that this process be integrated with the Utah Agenda.

**Validation Data Collection**

OSEP visited the State during the week of December 19, 1998 for the purpose of collecting data to validate the areas identified through the planning process by USOE and UDOH. The areas identified by USOE and UDOH included the new requirements under the IDEA Amendments of 1997 and the Government Performance and Results Act and those areas identified in Utah’s Part B Self-Assessment and Part C Self-Study.

For Part C, OSEP visited the following sites: St. Georges, Blanding, Logan City, Layton City, and Salt Lake City. In addition, OSEP conducted a teleconference with local administrators and providers in Duchesne, Roosevelt, Vernel and Unitah County. OSEP visited three private programs, two local school districts, and two university-based programs. OSEP reviewed records of children and families, interviewed service providers and service coordinators, administrators, interagency collaborators and parents. Based upon the data collected during this phase, OSEP identified strengths and areas of noncompliance, and technical assistance suggestions for best practices.

Part B sites included a variety of settings located throughout Utah, including the Wasatch Front (where 80% of the State’s population resides), as well as sites located in less populated areas of the State. These sites were in Park City, Logan, Jordan and Washington County School Districts. OSEP visited two high schools, an elementary school and a separate facility serving students from birth to 21. In addition, OSEP collected data through teleconferences with personnel from Provo and South Sampete County School Districts. OSEP staff reviewed student records and interviewed teachers, related service providers, administrators, parents, and students. Based upon data collected during this phase, OSEP identified strengths and technical assistance suggestions for best practices, but did not find evidence of Part B systemic noncompliance in the districts visited.

**Improvement Planning**

The Part C Steering Committee has continued the ongoing monitoring process by integrating areas of concern and accomplishment into the document entitled, Capacity Building and
Empowerment of the Part C Delivery System. There are eight major sections for data input. These major sections include: development and implementation of policies, interagency collaboration, resolution of interagency conflicts, coordination of services at the State or local level, comprehensive system of personnel development, knowledge and access to funding sources, and family focused philosophy in policy development and service coordination. An action plan has been developed for each of the sections. The action plan includes strategies, allocation of resources, the person(s) responsible, and the priority for implementing the action strategies during the coming year.

OSEP will continue the improvement planning process with USOE and UDOH to finalize an improvement plan, including providing 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, UDOH, 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 enforcing mechanisms to ensure correction of identified problems.

Validation Planning and Data Collection

Prior to the validation-planning phase, UDOH submitted to OSEP a copy of the State’s self-assessment, the Part C application and Annual Performance Report for fiscal year 1998. During the validation-planning process, UDOH provided OSEP with a copy of the Baby Watch Monitoring Manual. The Monitoring Manual contained procedural guidelines and quantitative data compiled from the State’s self-assessment on the early intervention system. The self-assessment section in the Monitoring Manual highlighted both areas of accomplishments and concerns. The self-assessment committee documented the areas of accomplishment and concerns prior to and after administering the self-assessment survey statewide. As part of the corrective action process, the self-assessment listed the areas of concern and ranked them in order of priority. UDOH also identified in the self-assessment strategies to address areas of concern, and designated the key person(s) or agency responsible for taking the lead to implement the strategies during the next year. Thus, UDOH has already either addressed several of the areas of concern identified during OSEP’s validation planning and validation data collection process, or targeted them for corrective action.

UDOH, the State Interagency Coordinating Council, Steering Committee and Utah State University compiled, reviewed and analyzed the data from the self-assessment and identified both areas of strength and of concern in UDOH’s general supervision procedures.

UDOH has a comprehensive system of supervision and monitoring that is designed to bring about positive results for infants and toddlers with disabilities and delays and their families. UDOH’s system of supervision and administration includes provisions for monitoring, technical assistance, corrective action and enforcement. OSEP assessed UDOH’s ability to effectively
carry out each of these supervisory provisions during the validation planning and data collection process.

UDOH’s monitoring process requires each contracting agency that participates in the Part C system to engage in an administrative review process. The administrative review process requires each agency to: (1) submit an annual application; (2) participate in a fiscal audit; (3) submit requested data; (4) administer a satisfaction survey to its customers; (5) demonstrate compliance with contract provisions by reviewing with the State documentation of families enrolled, cost expenditures, IFSP documents, service coordination and financial records; and (6) complete the Early Intervention Self-Monitoring Program Evaluation Tool. UDOH conducts an administrative review of each contracting agency every other year, and a program self-evaluation on alternating years in conjunction with the administrative review. Prior to OSEP’s visit all of the contracting agencies participated in the administrative review process or the self-assessment and received a report from UDOH that identified areas of strengths, promising practices, concerns and areas of non-compliance. OSEP reviewed the data from these monitoring reports as a part of the validation data collection process.

A. AREAS OF STRENGTH

OSEP reviewed UDOH’s guidance documents, monitoring materials, policies and procedures and analyzed the data from the validation planning and data collection process. OSEP identified the following promising practices.

1. **The State Interagency Coordinating Council**

The State Interagency Coordinating Council, under the leadership of a parent chairperson, and the Part C Steering Committee provide ongoing assistance to UDOH, in assessing strengths and weaknesses and correcting deficiencies identified in the monitoring process. This past year the Part C coordinator from the Navajo Nation became a member of the Council. This action has resulted in the identification of cultural issues relative to service delivery in the Navajo region and has prompted discussions to address these issues in a more timely and comprehensive manner.

The State Interagency Coordinating Council activities play a vital and pivotal role in assisting the State to ensure compliance with Part C. The State Interagency Coordinating Council fosters ongoing interagency collaborative efforts and has established key subcommittees, such as the finance and natural environment task force. A result of an interagency collaborative effort was the establishment of a joint finance subcommittee with Utah State University. This interagency collaborative effort resulted in a cost allocation study that provided data to State administrators and policy makers regarding the cost of services, and the impact of the sliding fee scale. The cost study revealed that the average cost to serve a child in the Part C system in June 1997 was approximately $2,996.00, including administrative costs. Presently, the State’s reimbursement to early intervention providers (including both State and federal monies) is less than this average cost. As a result, the Council has indicated the need to petition the State legislature for an increase in funds to maintain the present quality of services and to avoid any contractor from discontinuing services in the Part C system. Another example of interagency collaborative
efforts facilitated by the State Interagency Coordinating Council resulted in the San Juan School District including the Part C eligible children it serves in the annual child count for Federal Impact Aid funds. Federal Impact Aid funds can only be applied for by local education agencies, such as the San Juan School District and these funds were targeted for use in conjunction with Part C dollars to address the transportation needs of Part C eligible children being served in the rural Navajo region. Efforts to provide transportation are critical in rural areas to ensure that children and families have access to needed services.

2. **Comprehensive System of Personnel Development**

UDOH had implemented various strategies to ensure opportunities for continuous professional development and para-professional training. Some of these strategies include implementing the Early Intervention I and II credentials, the Portfolio System (which allows individuals to receive credit for relevant work experience as part of the credentialing process) and a collaborative program with Utah State University which offers a minor in the field of early childhood. UDOH’s personnel training efforts are coordinated with USOE’s Preschool Special Education Program. Individuals may receive dual certification by having their pre-service program jointly approved by UDOH and the USOE. Plans are underway to expand these training efforts with the Utah Valley State College, Dixie College, and Salt Lake Community College. UDOH, in collaboration with the State Interagency Collaboration Council, will monitor the progress of these initiatives. This process will enable UDOH to determine the impact of these training initiatives in addressing the personnel concerns identified in OSEP’s validation planning and data collection phase and to determine the impact upon the supply of qualified personnel, in both urban and rural areas.

In addition, UDOH collaborated with the Department of Human Services to develop the Mapping Project. This project is designed to implement an inservice training model that will enhance the skills of child care providers to assist in child find efforts, to serve infants and toddlers in natural environments, and to assist with transition from Part C services to other appropriate services.

3. **Data Collection**

UDOH utilizes various data collection procedures to compile information and facts on the early intervention system. These data assist UDOH in prioritizing the need for technical assistance among the collaborating agencies. The data collection efforts include: scheduled reporting requirements, on-site program audits, tracking of fiscal expenditures, program reviews, and data analysis which results in timely feedback to the contracting agencies. These ongoing data collection strategies may in fact reduce the amount of time agencies spend compiling data and submitting reports to UDOH. UDOH has a tracking system to identify and track the status of Part C eligible children in the program and to provide information regarding services, their ethnicity and family composition. Given the steady increase in minority populations, these data have been beneficial in assisting UDOH in identifying the need to develop and implement culturally sensitive training programs in the areas of child find, parent training and personnel development.
4. **Program Evaluation**

UDOH utilizes various mechanisms to generate data on the overall operation of the early intervention system and to solicit feedback from parents. UDOH uses the data from the program evaluations completed during the administrative reviews to: develop corrective actions, identify program specific or regional concerns, and assess the need for statewide personnel training or guidance documents.

The Parent Satisfaction Survey is a key component of the program evaluation process. UDOH has made the survey available in both English and Spanish. Nine of the nineteen provider agencies have administered the parent satisfaction survey with a return rate greater than fifty percent. The most current survey results identified: families as the primary referral source, major service utilization patterns, successful procedures in the development of IFSPs, and families’ perception of the progress the child has made as a result of his/her enrollment in the early intervention system. UDOH will use the outcomes and results in collaboration with the State Interagency Coordinating Council and the Steering Committee, to design ongoing technical assistance, and program or monitoring revisions to minimize the occurrence of noncompliant practices.

**B. AREA OF NONCOMPLIANCE**

**State Monitoring Procedures Inconsistent with Part C Federal Requirements Regarding Natural Environments**

The Part C regulations at 34 CFR §303.501 requires that States monitor and provide technical assistance to all agencies and programs collaborating or contracted with the State to ensure that they are implementing a statewide system of early intervention services consistent with the requirements at 34 CFR §303.140 and the State’s approved application.

The development of State policies and procedures consistent with the requirements in 34 CFR §303.140 is just one strategy UDOH employs to comply with the Federal requirements of 34 CFR §303.501. UDOH’s policies and procedures are designed to provide guidance and technical assistance to collaborating agencies and providers that implement UDOH’s statewide early intervention system.

UDOH submitted to OSEP policies and procedures on natural environments as part of its application for Part C funds for fiscal year 1998. UDOH’s policies and procedures must ensure that under 34 CFR§303.167(c): (1) to the maximum extent appropriate, early intervention services are provided in natural environments; and (2) the provision of early intervention services for any infant or toddler occurs in a setting other than a natural environment only if early intervention services cannot be achieved satisfactorily for the infant or toddler in a natural environment. OSEP reviewed UDOH’s policies and procedures as set forth in their 1998 application for funds and determined that, on their face, they were fully consistent with the Federal requirements of 34 CFR§303.167(c) regarding natural environments. OSEP reviewed UDOH’s Part C Monitoring Manual as part of the OSEP validation planning process; UDOH had not included that manual as part of the State’s FY 98 Part C application. OSEP found that the
manual included procedures and guidance regarding the implementation of the natural environment provisions that were inconsistent with 34 CFR §303.167. OSEP found inconsistencies in the terminology used by the State to define natural environment and in criteria used to include the justification for not providing services in the natural environment. As further detailed in Section III, OSEP found that a number of local providers were failing to comply with Part C requirements regarding natural environments, which may be the result of the inconsistencies that OSEP found.

Based on this information, OSEP concludes that UDOH has not fulfilled its general supervisory responsibility to ensure the provision of services in natural environments, consistent with Part C requirements.

C. **SUGGESTIONS FOR IMPROVED RESULTS FOR INFANTS, TODDLERS AND THEIR FAMILIES**

OSEP made the following observations about improving services to infants and toddlers in rural areas and parent involvement in systems design.

1. **Technical Assistance and Training to Improve Services in Rural Areas**

Although OSEP identified significant strengths across the State in the provision of technical assistance, there continue to be special challenges, especially in the provision of supports and services in the rural areas. Data from the State’s self-assessment and the validation data collection indicated the need to make improvements in the area of culturally sensitive practices, and in the identification of effective rural service delivery models. OSEP was informed by service providers in rural areas that they lack resources and access to culturally competent supports. Service providers also reported that they travel long distances to reach families in the remote regions, and need to create safe and innovative environments to appropriately address the needs of the child and family in remote parts of the State. OSEP recommends that the State take steps to ensure that the content and intensity of technical assistance needed is available to ensure that providers are able to implement appropriate and timely services in the rural areas.

The State should continue to assess service delivery practices in rural areas and conduct relevant research to identify innovative outreach and technical assistance models to enhance services in these remote and rural areas. OSEP recommends that UDOH continue to provide technical assistance and to work with other States and technical assistance providers such as the Early Childhood Coordinator for the Navajo Nation, local universities and the National Early Childhood Technical Assistance System.

As noted throughout this report, there is apparent concurrence throughout the State that there are special challenges in providing services in rural areas to underserved groups. UDOH has continued to make considerable efforts to address this issue by working in collaboration with local universities to increase training opportunities for professionals and para-professionals and to ensure that low-income and minority families in rural areas have access to culturally competent services within their local geographical areas. UDOH is exploring alternative service delivery models in rural areas to ensure that scarce services, such as infant mental health, respite
services and culturally sensitive practices are available. Service providers identified the need for additional resources to expand early intervention services, such as occupational, physical and speech therapy.

Most local providers reported satisfaction with the quality of technical assistance provided by Baby Watch staff; however, the need for intense technical assistance to identify innovative strategies, resources and other funding streams to implement alternative service delivery models in rural communities was also expressed. In addition the Steering Committee identified the need to provide ongoing technical assistance to some local providers in rural areas. Given the limited number of Baby Watch State staff, staff are unable to provide the intense level of technical assistance needed by some local providers in order for them to sustain efforts over time. Baby Watch State staff should work with State DOH staff to identify additional resources at the State level and to continue collaborative efforts with the National Early Childhood Technical Assistance System, local universities and private agencies. These technical assistance and collaborative efforts should focus on strategies to ensure the dissemination of research outcomes and promising practices that can be translated into effective service delivery practices, and to provide on-site technical assistance among collaborative programs and across the State. These efforts may reduce the frustration on the part of Baby Watch staff and providers who are challenged to provide needed services with minimal resources in some of the most rural regions of the State. These efforts may also assist with the institutionalization of promising practices among the regions and enhance the efforts on the part of providers to ensure the timely delivery of appropriate services.

2. Increased Parental Involvement in System Design

UDOH has acknowledged the need to increase parental involvement at the State and local level in the development of policies and systems design. Local administrators informed OSEP that with the increase in minority populations they are constantly seeking culturally sensitive strategies to increase and sustain parental involvement among underrepresented groups. Providers in the rural areas stated that the views of families from underrepresented groups are often not reflected in decision making process. The State has identified some of the areas in which it would like to see increased family involvement. These areas include providing input into development of local and State policies and procedures and in the development and implementation of in-service and pre-service training that focuses on cultural sensitivity. Increasing the present level of family participation in parent satisfaction surveys could also guide administrators in the decision making process at both the local and state level and result in the identification of strategies to enhance family centered and culturally sensitive practices across the State. Ensuring parental involvement in the implementation of the State’s policies and procedures and training may also preclude the need for parents and professionals to be engaged in timely and costly complaints and due process hearings.
II. PART C: CHILD FIND/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

OSEP did not find areas of noncompliance, but identified an area of strength. Rural areas continue to present special challenges even in the area of strength noted below.

A. AREA OF STRENGTH

1. Multi-media Campaigns

UDOH implemented a statewide multi-media child-find/public awareness campaign that has proven to be effective in urban areas, but as noted in Part B of this section, these strategies have not been as effective with underserved populations in the rural areas. The outreach public awareness efforts have included substantial in-kind contributions from broadcasting stations. Utah’s First Lady was the key spokesperson for the State’s child-find efforts. The State aired various public service announcements, and a 30-minute Baby Watch Special during prime time. Other accomplishments included: conducting developmental screenings in collaboration with well-baby check-ups throughout the state; the development and distribution of various materials in English and Spanish; distribution of a multi-agency central resource; and the development of interagency agreements with other State-wide child find initiatives. OSEP reviewed the child find section in the State’s Annual Report for fiscal year 1998 and components of the interagency agreements and noted that the State has made considerable effort to identify underrepresented groups by developing agreements with Migrant Head Start and the Navajo Nation.
UDOH has enhanced child find efforts through various State initiatives such as: efforts to enhance preventive health practices for children and families by promoting healthy outcomes and decreasing the occurrence of morbidity and costly hospitalizations; and enrolling children into the Child Health Initiatives Program, Medicaid and Supplemental Social Security Disability Insurance. The State has expanded its outreach efforts to various community-based programs. Activities have included dissemination of educational bilingual materials through targeted primary referral sources such as social services, mental health, businesses, leisure, and recreation agencies. The Department of Social Services was selected to receive Federal funding from the Department of Health and Human Services to participate in the Mapping Initiative, which is designed to provide technical assistance to foster child find efforts in child care settings and expand opportunities for children with disabilities to receive services in the natural environment. In general, the public in urban areas is well informed about the Part C system. Recent data indicate that over 70 percent of the referrals come to the Part C system from families. The State has targeted more outreach to physicians by designating child find staff in some counties and developing a developmental checklist, for distribution. The State has seen an increase in referrals since the implementation of these efforts.

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

OSEP made the following observations about improving child find and public awareness initiatives.

Expand Public Awareness Initiatives in Rural Areas

Presently, in Utah less than 1.0 percent of the eligible children being served receive services before age one. Service providers in the rural areas informed OSEP that while statewide child find and public awareness initiatives have been successful in informing the community in urban areas, they have not appeared to be as effective in the rural areas. UDOH should evaluate and review its child find and public awareness activities in rural areas to determine if current activities are adequate to ensure that all potentially eligible infants and toddlers, particularly those living in isolated areas, are being referred in a timely manner. Service providers informed OSEP that they are concerned with the steady increase in the number of groups immigrating into the rural regions of the State over the past several years. The State, with assistance from local providers, Utah State University, and input from the Part C Steering Committee, has been working to identify exemplary outreach child find models. The State should continue its efforts to research and identify promising practices that are sensitive, and involve distant learning, tele-medicine and other community-based initiatives that have been proven to be successful to reach rural populations. In addition, there are other funding initiatives such as the administrative tracking system that is supported with Medicaid funds from the Federal Department of Health and Human Services. An administrative tracking system could be beneficial to the State by identifying and tracking children soon after birth who may be in need of services or those at-risk who may be potentially eligible for Part C services in the near future. Improvements in this area could result in the identification of more potentially eligible children during the first year of life.
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

UDOH Self-Assessment identified several accomplishments and concerns relative to the provision of early intervention services in the natural environment. The major concern was the decision-making process in the development of the IFSP and in determining natural environments.
There were also concerns expressed that some families are being pressured into services that they don’t feel they need, and that several early intervention service providers did not support the provision of services in natural environments. The State has taken positive steps, through the Comprehensive System of Personnel Development to train providers and parents concerning the provision of service in natural environments.

OSEP reviewed and analyzed the data and identified the following area of noncompliance.

**AREA OF NONCOMPLIANCE**

**Failure to Make Individualized Determinations regarding the Provision of Services in Natural Environments**

34 CFR §303.167 requires UDOH to develop and implement policies and procedures that are consistent across the State and meet Federal requirements for the provision of services in natural environments. Federal regulations at 34 CFR §§303.12(b) and 303.18 define natural environments as settings that are natural or normal for the child’s age peers who have no disabilities, inclusive of home and community settings. OSEP reviewed the State’s monitoring manual including the procedures regarding natural environments and finds that they are inconsistent with Part C regulations. The terminology used by the State to define natural environments, and the examples provided of justifications for not providing services in natural environments, are not, as explained below, consistent with Part C requirements. These problems in the manual may have contributed to the deficiencies described below in the development of IFSPs and in carrying out the provisions regarding natural environments.

34 CFR §303.344 (d)(ii) states that the IFSP must include a statement of specific early intervention services necessary to meet the unique needs of the child and the family to achieve the outcomes listed on the IFSP, including the natural environments in which early intervention services will be provided. In addition, a justification of the extent, if any, to which services will not be provided in the natural environment, must also be included. The IFSP team must make individualized decisions about services in the natural environment that reflect the unique needs of the child and family.

The procedures on natural environment contained in the Monitoring Manual stipulate that there are primary and secondary natural environments. The State defines primary natural environments as those environments that will not change for long periods of time and secondary environments as those that require special supports and equipment and may only be visited a few times. Accessing “secondary environments” that may result in services in segregated environments in order to use special equipment is not consistent with the Federal definition of natural environment. Any alternative environment, other than an environment that is normal for non-disabled peers, must be justified on the IFSP as stipulated in 34 CFR §303.344(d)(1)(ii).

The examples of justification for not serving children in natural environments, as set forth in the Monitoring Manual, include the lack of services or providers, and a parent’s refusal of services. The lack of services or providers is not an appropriate reason to deny the provision of services in natural environments. Part C requires that early intervention services occur in a setting other
than a natural environment only when early intervention services cannot be achieved satisfactorily for that infant or toddler in a natural environment.

Nor may a family’s refusal to receive services in the natural environment serve as a justification. Consistent with 34 CFR §303.405, families have the right to refuse services (including the location and frequency and intensity of services) without jeopardizing the other services on the IFSP. However, if a family refuses a service in the natural environment, Part C funds cannot be used to pay for the cost of the service in alternative environments. OSEP has provided States with guidance on this issue (See letter to Mary Elder, 9/17/98). A family that disagrees with an IFSP team decision may file a State complaint, file for a due process hearing or choose to mediate the issue.

The Annual Child Count Data Report for FY1997 indicated that approximately 37% of early intervention services in Utah were provided in early intervention “classrooms” or out-patient service facilities. The State’s monitoring report identified several agencies that were not in compliance with providing services in natural environments consistent with Part C regulations. As detailed below, the State’s self-assessment identified the need to provide guidance to agencies to assist them in the process of determining natural environments and documenting alternative environments with a justification on the IFSP, if necessary.

OSEP found that 15 of the 25 IFSPs it reviewed provided for services in a center-based program with other disabled children or outpatient service facility, rather than a natural environment, but did not include the appropriate justification. The child or family assessment and outcome sections on the IFSP did not include any data to warrant the delivery of services in these settings. Local administrators informed OSEP that services in these settings are considered the natural environment for the child because of the child's medical needs or family concerns regarding the health and safety of a child. While these settings may be necessary to enable the child to benefit from early intervention services, these settings do not meet the federal definition of natural environments. Therefore, the IFSP must, but did not for these 15 children, include justification for the provision of services in these settings that are not natural environments.

Other providers informed OSEP that regardless of individual needs, all toddlers are routinely transitioned to disabled-only center-based services at 18 months of age because it is more cost-effective and that families prefer services in the centers. OSEP reviewed a public awareness videotape that describes early intervention services. In the video, developed by the local provider, the narrator informed parents that at 18 months of age children would transition into the center-based program. This practice is inconsistent with Part C, which requires that decisions about whether a child will receive services in natural environments be made on an individualized basis by the IFSP team.

During the validation data collection OSEP determined that three of the six agencies visited were not using the proper procedures, as described on page 16, to determine the natural environment for the provision of services and that the IFSPs did not include the required justification for not providing services in the natural environment. A review of the State’s monitoring documents for those three sites indicted that the State had also found these agencies out of compliance with the provisions of services in natural environments. They had ordered corrective action, but the
corrective actions had not been implemented because the providers informed OSEP that they did not understand how their practices were out of compliance with the State’s guidance. UDOH’s continuous monitoring process includes annual follow-up visits to each of the contracting agencies to determine whether provider agencies have implemented the strategies identified in the corrective actions. When UDOH conducts the annual follow-up visits, it needs to clarify the guidance concerning the development of the IFSP related to individual determinations and to justification when services are not provided in the natural environment. UDOH must ensure that when deficiencies are found the agencies take effective corrective action to come into compliance with Part C requirements.
IV. PART C: FAMILY-CENTERED SYSTEM OF 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 family-centered system of services.

Validation Planning and Data Collection

Over two thirds of the families receiving early intervention services in the State responded to the State’s family satisfaction survey. The majority of these families indicated that services provided for their child and family were excellent. Ninety-three percent of families who responded indicated that they would recommend the Baby Watch Program to another family. In addition, families identified certain needs that would assist them in being active participants in the early intervention process. These needs included the ability of service providers to listen and understand the opinion of families, the need for service providers to focus on the positive attributes of the child and family, and need for families to be informed and understand the service delivery system.

Families also indicated that it was very important for them to be involved in making the decisions about services, and to have regular contact with providers. UDOH as part of the program review process administered a parent questionnaire to some sixteen programs across the State. Preliminary analysis of the data indicated that families were very pleased with the services they were receiving. Families also reported that the delivery of services caused little or no disruptions in their daily schedules, staff were available and helpful, families were informed of
their rights and the services their child was receiving contributed to their child’s overall well-being.

**AREA OF STRENGTH**

**Enhancing Family Involvement Through Statewide Initiatives**

UDOH has always included families in key roles in the implementation of the State’s early intervention system. These roles have included family input in the development of child find and family centered practices, dissemination of information and conducting training activities across the State. Families have served on family support committees, the State Interagency Coordinating Council, and family support networks and participated in the fee determination study, program evaluations, and public hearings and advocacy groups. UDOH has developed guidance documents for personnel training and the development of policies and procedures. In order to maximize the involvement of families in those processes, UDOH has included a family involvement module in each of those documents. Each local contractor must submit as part of its application process to the State procedures and activities that will be implemented to foster greater family involvement. Some of these local initiatives include a parent advisory league, parent education forums, dad’s clubs, and a “Siblings are Special Too” program.

Families indicated that these initiatives have resulted in their becoming more knowledgeable about the Part C system, increased their involvement in the decision making process and resulted in a more meaningful relationship with Baby Watch staff. This high level of family involvement has resulted in significant systems changes that have improved results for children and families. Some of the system changes have included: a parent appointed as chair of the State Interagency Coordinating Council, a review and revision of parent fee policy, development of a parent directory to promote ongoing parent networking and empowerment, and increased family response to the state-wide parent satisfaction survey.
V. PART C: EARLY CHILDHOOD 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 convening 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

UDOH’s self-assessment highlights six recommended practices that provide guidance to local administrators and service providers in their efforts to ensure a smooth transition from Part C to Part B. As part of its validation planning and data collection process, OSEP reviewed UDOH’s interagency agreements with Migrant Head Start and USOE to determine whether they were in compliance with Part C. In addition, OSEP reviewed the data compiled in the longitudinal study conducted by Utah State University, The Utah Early Intervention Evaluation: Part 1: The Transition Process. Overall the transition study reports that parents and providers had a high level of satisfaction with the transition process. Service providers, however identified the need to create more options for community-based placements for those children who do not qualify for Part B services and the need to identify more effective ways to encourage local education agencies to respond to the Part C invitation by ensuring that a Part B representative attends the transition meetings.

AREA OF STRENGTH

Providing Guidance To Enhance Transition Efforts

The State has developed a Transition Planning Guide that includes a process to record and track transition activities from Part C and Part B. The guidelines were developed to address the areas of concern identified by the survey and those concerns identified during the validation data collection process.

UDOH in collaboration with local providers, local education agencies and other community-based programs has revised interagency agreements, or developed protocols to ensure timely and efficient transitions. Quarterly meetings are scheduled among agencies to discuss issues or
concerns regarding the transition process. The need to have transition meetings prior to the required 90 day meeting is assessed. Protocols are developed to provide systems of support for all children, especially those with sensory impairment(s), for placement in inclusive environments and/or the need for extended school year services. Part C local providers can request from the Office of Child Care Referral Services a community resource directory to assist local providers in facilitating community-based placement options.

Collaborative staff training on transition includes staff from Baby Watch, UDOE, and the Utah School for the Deaf and Blind. This collaborative training process allows each local region to develop transition protocols and materials specific to needs and resources in their community. Ongoing parent training, that includes support, information and user-friendly materials are an integral part of the transition process. Transition activities are tracked and performance outcomes are assessed on an annual basis. Revisions to interagency agreements, training activities, and protocols are made as necessary.
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

Public Input Process and Self-Assessment: The Steering Committee raised the following issues to be investigated by OSEP: 1) Non-English speaking parents have difficulty understanding the special education process, including parents’ rights, IEP process, and placement in the least restrictive environment; and 2) The adequacy of training for parents regarding their role in the IEP process and other relevant IDEA requirements.

In the districts visited, OSEP did not identify violations of IDEA requirements related to these two issues or other issues related to parent involvement.

SUGGESTIONS FOR IMPROVED RESULTS FOR CHILDREN

Parent training and dissemination of information

Parents and communities provide strong support to the educational process. OSEP found that throughout all local sites visited families are very involved in the educational programs for their children. School personnel reported that each IEP meeting is an opportunity to train parents about the process and to solicit input on their child’s educational needs. Schools actively involve parents in meetings concerning their child’s special education.

Administrators, teachers, and parents informed OSEP that, while parental attendance and participation in the development of the IEP is high, the effectiveness of parents in the process would be enhanced by providing more training in regular and special education practices and the requirements of the law. Some districts, however, have found effective ways to provide information to parents. One district visited by OSEP was able to involve parents in district level training by having school personnel attend parent group meetings already scheduled for other purposes to provide information or resources as needed. For example, staff members regularly attended meetings of local parent disability groups, such as the Children with Hyperactive and Attention Deficit Disorder organization and the ARC. Staff also work collaboratively with the Utah Parent Center on topical areas. Additionally, the school psychologist was assigned a percentage (10%) of time at the Family Education Center to support groups for children and their families. USOE could greatly assist districts in ensuring meaningful parental involvement by encouraging other districts to adopt creative approaches to providing parent training and by
disseminating successful strategies for involving parents in training opportunities, including any specific strategies in reaching non-English speaking 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

Public input and Self-Assessment: Based on Utah’s Self-Assessment and the public input data, OSEP investigated the following issues to determine whether children and youth with disabilities are receiving a free appropriate public education in the least restrictive environment: 1) Level of service and access to general curriculum; 2) Shortage of special education personnel; and 3) Training related to IDEA 97 requirements.

Parents also raised a concern that many school district personnel did not understand that some children who are not eligible for special education and related services under Part B may be eligible to receive accommodations under Section 504 of the Rehabilitation Act of 1973. OSEP has shared that information with the U.S. Department of Education’s Office for Civil Rights, the Office responsible for the implementation of Section 504. In the districts visited, OSEP did not find evidence of noncompliance related to the Part B issues identified above.
AREAS OF STRENGTHS

1. **Addressing the Needs of Students with Behavioral Disorders**

USOE has taken proactive measures to ensure that public agencies effectively address the behavioral needs of students with challenging behaviors. In all of the school districts OSEP visited, new strategies were in place for children whose behavior impedes their learning. Each of these districts now employ a behavioral management specialist who is available to assist school personnel with strategies for assessing behavioral needs and developing an intervention plan. The following are examples of strategies and instruments that USOE has initiated to address the needs of students with behavioral disorders:

- **Behavioral and Educational Strategies for Teachers (BEST)** is a statewide mechanism that USOE uses to provide comprehensive staff development, and is designed to provide behavioral and educational strategies for teachers across the continuum of educational services from regular education settings to self-contained settings. Project staff focus on three primary activities: the establishment of model demonstration sites that can be used as a means of providing training experiences to teachers and other staff; the training of local teams through the BEST Teams Institute; and ongoing statewide technical assistance and training through conferences and workshops. The purpose of the BEST Teams Institute is to enhance the capacity of schools, districts, and regions to provide high quality services to students with behavioral disorders.

- **Functional Behavioral Assessment (FUBA) and Behavioral Intervention Plan (BIP)** – USOE has conducted numerous trainings across the State to assist school personnel to effectively use these instruments to conduct functional behavioral analyses and to create appropriate behavioral intervention plans.

- **Assessing Behavior and Learning Environments (ABLE)** – USOE has trained approximately 50 teachers to use this instrument, which was designed for students who are severely disabled to obtain a more realistic determination of their preferences and interests beginning at age 14 or younger.

- **Statewide Assistance Team (SWAT)** – USOE supports a statewide “teacher-to-teacher” network, that operates on the idea that if one person is having difficulty dealing with a particular type of student or situation, there is likely another who has been successful in dealing with the same issue who can act as a support base and serve as a resource. SWAT ensures an ongoing linkage and contact system for personnel in Utah. Students and families also benefit from SWAT, as effective strategies are developed to deal with behaviors in the least restrictive environment.

2. **Staff Retention and Recruitment**

As part of the Self-Assessment, the Steering Committee identified the need to collect more comprehensive data to determine whether, and to what extent, personnel shortages, were
impacting upon the provision of a free appropriate public education to children with disabilities. In the districts visited, several school district administrators informed OSEP of their on-going concerns regarding recruiting and retaining qualified personnel in all disciplines providing services to children with disabilities. Although they reported that shortages were not currently resulting in a denial of a free appropriate public education for any children with disabilities, they were concerned that problems in recruiting and retaining qualified personnel could eventually impact the provision of services. They explained that it is difficult to recruit new personnel, and retain personnel, because of: (1) the low teacher salary scale; and (2) the high special education teacher caseloads, which are caused, in part, by the way in which the State calculates the number of special education teacher positions that it will fund.

To maximize existing resources, local directors collaborate with institutions of higher education to develop creative solutions to staffing needs. In addition, USOE, in collaboration with institutions of higher education, has developed distance learning courses for district personnel who do not have easy access to higher education facilities.

The following are examples of other opportunities local districts, with USOE support, have made available to ensure that students with disabilities receive a free appropriate public education.

- Districts in close proximity to universities and community colleges introduce students to the field of special education by utilizing student interns, job coaches, and using students as peer tutors.

- To accommodate an emerging need for bilingual personnel, districts offer financial incentives to teachers for dual certification.

- To recruit new teachers to work with students with severe disabilities, districts provide incentives that enable university interns and aides to return to school for endorsements and certifications that increase their salary base while they are working toward full certification.

- To address the shortage of teachers of students with severe disabilities, one facility visited by OSEP used paraprofessionals, working in teams and supervised by certified staff, for “on the job” training. This experience allows the paraprofessionals an opportunity to determine whether they want to continue formal training and receive certification in this field.
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

Data reviewed: OSEP’s monitoring report of November 17, 1994 did not include any findings of noncompliance related to transition. Based on Utah’s self-assessment and the public input data, the steering committee recommended that OSEP investigate the following: 1) The need for better collaboration between agencies; 2) Student participation in the transition planning process; 3) The effectiveness of training of school staff, parents, and students about transition issues; 4) The need for more age-appropriate settings in which to provide a free appropriate public education to 18-22 year old students who have not yet graduated.

OSEP did not identify violations of the IDEA requirements related to these issues.

A. AREAS OF STRENGTHS

USOE actively pursues funding for statewide activities to improve transition. Described below are examples of activities identified by school personnel as assets to the development of transition services for students with disabilities.

1. Systems Change Grant

Utah was one of the first 12 States to receive a Federal transition systems change grant from OSEP (1991-96). Utah has sustained most of the efforts that began with the Federal grant and initiated new activities. The Community Transition Councils formed during the grant period continue to function effectively throughout the State. Each school district identified a district coordinator and these positions have been maintained statewide with several being funded by special education, rehabilitation, and Schools-to-Careers (School-to-Work). There is a State level cooperative agreement between education and rehabilitation and each school district has a local agreement between education and rehabilitation that outlines how services will be delivered by each agency to students in transition from one system to another.
2. **Statewide Transition Conference**

USOE has conducted a statewide transition conference annually with 500-600 participants. School personnel at all sites visited by OSEP indicated the substantive value of this annual conference. The transition conference provides an orientation for new teachers and networking opportunities for all staff responsible for requirements under transition.

3. **Collaborative Efforts**

USOE has established interagency committees with responsibility to identify barriers to service delivery and seek additional Federal grant dollars, such as the Choose-to-Work Grant funded by Rehabilitative Services Administration and Work Force Services.

USOE is also a partner in three Federal grants (two at the University of Oregon and one at Wayne State University) to address the issue of self-determination and self-directed planning. USOE has also collaborated with the Utah Parent Center to secure Educated Transition Choices Grants from the Rehabilitative Services Administration to train parents about the agency’s role in transition planning.

USOE funds a State specialist through the School-to-Careers grant, who chairs a committee that presents awards to recognize school efforts in developing inclusive practices in School-to-Work.

**B. SUGGESTIONS FOR IMPROVED RESULTS FOR CHILDREN**

**Collaboration with Other Agencies**

In 1998, DeStefano, Hasazi, and Furney published the results of a research study that identified effective practices and policies related to transition. One of the conclusions of study was the need for State and local districts to expand secondary transition options for students with disabilities. Although the districts visited by OSEP were actively involved in secondary transition activities, administrators, teachers and transition specialists consistently expressed concern over the lack of appropriate options for some students with disabilities who have completed high school or who have reached the age of 22. They reported that for some individuals with more severe disabilities, sheltered workshops are the only post-school employment option available. While competitive employment options exist for individuals with mild disabilities, there are few supportive or other competitive employment opportunities for individuals with moderate and severe disabilities. As a result, many of these individuals are at home waiting for appropriate employment opportunities. Insufficient legislative appropriations for programs for post-secondary services was identified as a barrier. OSEP supports USOE’s efforts to collaborate with responsible agencies to develop appropriate strategies to meet the post-secondary needs of this population.
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

Public input and Self-Assessment: Based on Utah’s Self-Assessment and the public input process, the Steering Committee recommended that OSEP investigate the following: 1) Effectiveness and relevance of inservice training by USOE; 2) Effective dissemination of training materials and information; and 3) Level of collaboration between special education and general education at the State level.

During the public input meetings, members of the public raised concerns regarding discrimination and over-identification of Native American students in special education. OSEP was informed that these issues were addressed in a previous investigation by the Office for Civil Rights in the U.S. Department of Education. The Office for Civil Rights investigation has resulted in a corrective action plan with an advisory oversight Committee in place. Based on concerns relating to the corrective action plan, a group of five USOE staff was organized to provide regular ongoing technical assistance. Some of the areas of technical assistance provided during the 1998-99 school year addressed appropriate/nonbiased assessment practices (preschool and school age), transition, paraprofessional training, adapting classroom materials, positive behavior supports, serving students with severe disabilities, and inclusion.

In addition, members of the public raised concerns regarding the State’s due process system, particularly with regard to meeting timelines. Through document reviews and interviews with State personnel responsible for due process hearings, OSEP determined that during the 1997-98 school year, of the four hearing requests, three hearing requests were resolved through mediation. The remaining hearing took more than 45 days; however, extensions of the timeline were appropriately requested by a party to the hearing and granted by the hearing officer. OSEP was informed by State officials that Utah is reviewing its due process procedures to ensure timely and impartial due process hearings. For example, the process for hearing officer selection was recently streamlined.
In the districts visited, OSEP did not find evidence of noncompliance related to the Part B issues identified above. OSEP concluded that USOE had an effective monitoring system for identifying issues of noncompliance and ensuring correction of deficient areas. During the 1998-99 school year, USOE’s monitoring system has been revised to move from a system that focused on procedural compliance to a model that emphasizes a systemic approach to improve and sustain the service delivery system and to positively effect student success. The new system shifts from episodic procedural monitoring to one of active strategic planning and continuous improvement within the framework of compliance. This new model is intended to enhance the school district’s role through stakeholder input and enables USOE to work in partnership with the district providing resources, support, and technical assistance as determined necessary. Because 1999-2000 is the first year that USOE is implementing this revised monitoring system, OSEP could not evaluate its effectiveness.

AREAS OF STRENGTHS

1. Statewide Training Opportunities and Technical Assistance

School personnel praised the efforts made by USOE staff members to respond to specific needs identified by school districts and individuals for training on specific topics and to provide technical assistance in the area of assistive technology.

Training opportunities are available for administrators, teachers, paraprofessionals and other specialists at the district and State levels. The State sponsors many large conferences at no cost to participants throughout the year. Specific conferences identified include the Inclusion Conference, the Preschool Regional Conferences, Behavioral and Educational Strategies for Teachers (BEST) Conference, Transition Conferences, Interventions Conference, Utah Council for Exception Children Conferences, and conferences designed for special audiences including parents and paraprofessionals.

Another example of statewide training is the continuation of a project initially funded through a Federally funded inclusion systems change grant called Utah’s Project for Inclusion. This project is designed to develop and implement statewide training, technical assistance and support that will enhance the capacity of local school districts and schools to support students in inclusive settings. Inclusion support teams, members of which are from special and general education participate in on-going training to build a service delivery system that meets their local schools needs. Students (disabled and nondisabled) also have the opportunity to come together each year at the Peer Power Conference.

Comprehensive System of Personnel Development (CSPD) -- The Utah Consortium for Special Education comprised of local directors, State office staff, Utah Parent Center, Institutions of Higher Education Utah State Office of Rehabilitation, Utah Health Department and others meet routinely to determine the direction of Utah’s Comprehensive System of Personnel Development activities. Utah’s capacity to address the needs of personnel will be increased through the Utah State Improvement Grant. The purpose of this grant is to address the needs for in-service and pre-service preparation to ensure that all personnel who work with children with disabilities have the skills and knowledge necessary to meet their needs. This will be
accomplished by providing general and special educators with content knowledge and collaborative skills to meet the needs of children with disabilities. It will prepare professionals and paraprofessionals in the area of early intervention and work with institutions of high education and other entities to prepare personnel to ensure that those institutions and entities develop the capacity to continue to support professional development programs that meet State and local needs.

OSEP supports UDOE’s efforts to collect more comprehensive data regarding its personnel needs, and, if necessary, take effective steps to ensure that there is an adequate supply of personnel to ensure the provision of a free appropriate public education and improved results for students with disabilities.

**IDEA 97 Training** - USOE has conducted extensive training at both the State and local levels regarding the new requirements under IDEA. USOE conducted a statewide “training of trainers” in the fall of 1997 and each school district was provided with a set of the training materials developed by the National Information Center for Children and Youth with Disabilities. Training on the new law is integrated into every State sponsored special education conference. Each August, a two-day Law Conference is held for over 500 participants with the focus being on the implementation of IDEA ’97. District administrators have also received training from curriculum directors and testing directors on access to the general curriculum and State and district assessment requirements.

**Utah Augmentative-Alternative-Assistive Communication and Technology (UAACT) Team** - USOE has replicated Colorado’s model for assistive technology training to district-designated teams of special educators throughout the State. Currently, there are 18 teams in Utah, each composed of a variety of individuals from several special education disciplines. Each team spends most of the day with a referred student in the student’s school environment observing the student and trying various pieces of equipment that may help the student to communicate in oral or written language. The team writes a report containing information that is used by the local IEP team as they develop the IEP. Districts reported that the UAACT team evaluation is a very helpful service to the local IEP team in their efforts to provide appropriate services and supports to students with disabilities.

2. **Interagency Collaboration**

Utah has established a Statewide interagency collaborative initiative intended to develop, promote and deliver child-focused, family-centered, community-based and culturally appropriate services for children and families in Utah. **Families, Agencies and Communities Together (FACT)** gained legislative support in 1989 and has developed into a statewide framework for public/private, State/local collaboration around issues of at-risk children and families. FACT projects operate in 20 school districts and local interagency councils serve families in all of Utah’s counties. All FACT service delivery components collect data for evaluation of outcomes in the health, safety, and economic well-being and academic domains. FACT serves persons from birth to 18 and those with disabilities ages 18-22 who at times require appropriate and uniquely designed interventions.