

## DATA NOTES FOR *IDEA*, PART C

This document provides information, or data notes, on the ways in which states collected and reported data differently from the Office of Special Education Programs (OSEP) data formats and instructions. In addition, the data notes provide explanations of substantial changes or other changes that data users may find notable or of interest in the data from the previous year. The data covered in these data notes are:

- 2007 Child Count
- 2007 Settings
- 2006-07 Exiting
- 2006-07 Dispute Resolution

### **Tables 8-1 Through 8-5, 8-8 Through 8-10 and Table 8-14, *IDEA* Part C Child Count, 2007**

#### **Alabama**

The total number of infants and toddlers served increased as a result of state and local child find efforts to locate and serve more eligible children and their families. Continued national emphasis on increasing child count resulted in targeted increased activities and initiatives focusing on the medical community and other primary referral sources as reported in Alabama's Annual Performance Report (APR).

Alabama had an increase in the number of Hispanic infants and toddlers receiving services. U.S. Census data indicated there was an increase in the Hispanic population in Alabama that resulted in an increase in the number of referrals/children served. Local staff and providers increased collaboration and communication with the local Hispanic communities and networks.

Alabama had an increase in the total number of male infants and toddlers being served. U.S. Census/Alabama data indicated an increase in the total number of male children born over the past years, thus supporting Alabama's findings.

#### **Alaska**

The state provided special education services to 66 children of unknown ethnicity. These children were reported proportionally in existing ethnic groups.

#### **Arizona**

Arizona Early Intervention Program (AzEIP) had a total of 590 unknown ethnicity data for infants and toddlers who received services this report period. Using the ethnicity formula, the state assigned to American Indian or Alaska Native counts = 42; Asian/or Pacific Islander = 12; black (not Hispanic) = 26; Hispanic = 226; and white (not Hispanic) = 284.

## Arkansas

The decrease in the total number, Asian/Pacific Islander, black (not Hispanic), Hispanic, male and female infants and toddlers served by Part C in Arkansas for 2007 directly resulted from a decrease in the number of births in the state and thus the number of children served and found eligible for Part C services.

## California

Section A.2. was left blank because California does not serve children ages 3 through 5 in Part C; children these ages are served by Part B. Section B.2. was left blank because California does not serve children ages 3 through 5 in Part C; children these ages are served by Part B. Although California serves the at-risk population, California's data did not distinguish them from other Early Start children. Some children enter the program as at risk (e.g., referral soon after birth) and then manifest developmental delays. The updated information may not be present for several months (up to a year) after the delay has been identified. Other children enter Early Start with one or more developmental delays and also have risk factors identified to facilitate provision of appropriate secondary and tertiary prevention. In 2002, California conducted analyses following a 1998 cohort to identify what portion of regional center Early Start consumers become eligible for California's services based on diagnosed developmental disability by school age. Although these analyses did not factor in deaths nor differences by age and/or ethnicity, they provided the best estimate of "solely at risk" (8 percent). In 2006, California replicated the 2002 analyses to determine whether the proportions had changed with time; these analyses reaffirmed the 8 percent estimator for at-risk only.

Ethnicity was estimated for 6,602 children (17.13 percent of total) in accordance with instructions provided, although this method is known to overestimate those classified as Hispanic vs. other ethnic groups. The estimated ethnicity was 1,493 age 0 (22.01 percent); 2,040 age 1 (16.13 percent); and 3,069 age 2 (16.07 percent). These same percentages applied to estimated ethnicity for the at-risk infants and toddlers. The point-in-time caseload count grew 12.19 percent, while the 12-month caseload count grew by 9.83 percent; the latter was down from the 10.53 percent with December 2006 reports. age 0 grew 6.62 percent; age 1 grew 10.76 percent; and age 2 grew 15.32 percent.

The number of Native American infants and toddlers receiving services shrank 13.48 percent ( $n=19$ ), as did the number of black (not Hispanic) infants and toddlers commensurate with California's general population ethnic changes ( $n=43$  or 1.95 percent). The number of Asian/Pacific Islander ( $n=240$  or 8.24 percent), white (not Hispanic) ( $n=380$  or 3.29 percent) and Hispanic ( $n=1,517$  or 9.85 percent) infants and toddlers receiving services increased commensurate with California's general population ethnic changes. Given the effects of estimated ethnicity, many of the small differences in rates of change could have been due to the effects of estimation. The methods used also necessarily resulted in the similar rates of change in the at-risk data.

A gender split of 62 percent, 38 percent male-female was commensurate with gender splits for developmentally disabled populations given the prevalence of conditions unique to males (e.g., certain X-based chromosomal anomalies) and was the same as last year's percentage split. However, as expected, the number of males increased at a higher rate (12.82 percent) than the number of females (11.17 percent); both were similar to the total child count increase of 12.19 percent (within about 1 percent). No change in the at-risk only population met both the number and percentage change levels to trigger any year-to-year change flags. This was a subpopulation not served by the California Department of Education. The drop in the number of Native American infants and toddlers was the only change that was both at least 10 percent and more than 10; however, given the skewing of allocated ethnicity toward Hispanic, this change was probably an artifact of the required ethnicity allocation methodology.

### **Colorado**

There was an increase in the number of American Indian/Alaska Native and black (not Hispanic) infants and toddlers receiving services. Colorado has 20 Early Intervention Services (EIS) programs that collect and report data to the state. Increased technical assistance was provided during the past year in order to emphasize the importance of complete and accurate data. The state believed the increase was a result of more accurate recording of race in the database.

### **Connecticut**

Connecticut estimated the race/ethnicity for 170 children who had an unknown race/ethnicity or multiple race/ethnicities.

The 2006 Census estimate for all children under 3 who were Asian alone was 5,885; 3.41 percent of that is 201. The state could not compare these data to the Census data because for this 618 table, the option is Asian/Pacific Islander; therefore, it could not explain for certain why the number dropped by 17 children. This is a small number, but the state will explore the issue in the discussion in its next APR. The 2006 Census estimate for all children under 3 who were of Hispanic origin regardless of race was 21,632; 3.41 percent of that is 738. The state could not compare these data to the Census data because for this 618 table, Hispanic is only one of five options under race/ethnicity; therefore, the state could explain for certain why the number increased from 806 to 941 children. The state's public awareness and child find activities for Spanish-speaking families may have been more effective, but the state will explore the issue within the discussion in its next APR. The state anticipated that over the next three years, with the upcoming changes to the race and Hispanic origin fields in the 618 data tables, the number of Hispanic children may vary significantly.

## **Delaware**

Race/ethnicity was prorated for 32 children. A single race category was not available for these children so they were coded as unknown/other in the database. These infants and toddlers were proportioned in the five race/ethnicity categories.

## **Florida**

A total of 1,627 children were of unknown or other race and were proportionately distributed into OSEP's race categories as in previous years.

## **Georgia**

A total of 265 children of unknown race were proportionately distributed into OSEP's race categories.

## **Idaho**

The Idaho Part C program does not serve children over the age of 3. The cumulative count was unduplicated for the state.

## **Illinois**

The Hispanic caseload grew by 15.9 percent from the previous year and accounted for more than half of all growth. This continued a trend seen in the last few years. Birth data supported this as an expected trend.

The black (not Hispanic) population grew at a slower rate than the Hispanic or white (not Hispanic) populations. The program studied birth data and found that the number of black (not Hispanic) births dropped overall and as a proportion of all births. There also was a significant movement of black (not Hispanic) families when the large Chicago projects were demolished, and previous residents were dispersed not only in the Chicago area but even downstate.

The program initiated a Minority Outreach workgroup to study several aspects of minority recruitment and service. This group considered how birth patterns of African-Americans changed and how to respond to those changes.

While there was growth in the caseload of Asian infants and toddlers, it did not increase as much as births. The Minority Outreach workgroup also looked into how the program could find eligible Asian children and improve services to them.

The state believed the reduction in the Native American population was a continued correction to the high numbers first seen several years ago. A significant proportion of Native Americans continued to be cross-coded as Hispanic. The state undertook more detailed research to ensure that these cases were being coded correctly. The proportion of

the caseload coded as Native American continued to exceed the proportion of the population that were Native American.

### **Indiana**

Indiana implemented new eligibility criteria beginning in May 2006, which eliminated the at-risk category.

### **Kentucky**

The cumulative count reported for 2006 included children at intake and not just those eligible for Part C. The correct number should have been 7,355 children eligible for Part C and receiving services during the year. The number reported for 2007 was for children eligible for Part C and receiving services during the year.

Kentucky's child count data for 2007 included 691 children for whom ethnicity was not known. Based on the known distribution, the state proportioned these children into the five race/ethnicity categories.

Gender was known for all children in this report and was not estimated.

The Hispanic/Latino population in Kentucky is growing, and larger numbers of children in Part C are being served in that ethnic category. According to census estimates provided by the Kentucky State Data Center, the Hispanic population in Kentucky overall (not just birth to 3) has grown by 5-7 percent every year since the 2000 Census (a 32 percent projected increase from 2005 through 2010). This should result in more children being located and served by Part C, and the state found that was the case when it compared the child count from year to year.

Kentucky began a series of improvement activities to address low birth to 1 and birth to 3 participation rates as reported in the FFY 2004 State Performance Plan (SPP) and the FFY 2005 APR. It was believed that these improvement activities, including increased awareness of state performance, may have accounted for the program growth, including the growth in the number of white (not Hispanic) children receiving services.

### **Louisiana**

The discrepancy from 2006 to 2007 regarding the increased number of children is the result of a change to the eligibility criteria that went into place on 7/1/2007. The criteria were changed from a narrow to moderate criteria. The 12/1/07 criteria represent 5 months of the new criteria. The change effected total number children, changes by age grouping and changes in race/ethnicity numbers.

### **Maryland**

The increase in the percentage of Hispanic children served was attributed to a combination of changing demographics, sustained efforts to target outreach to

underserved and special populations and increased collaboration with the Hispanic community that resulted in the increased number of children served of Hispanic descent. In 2007, 11 jurisdictions reported serving more children of Hispanic descent. Two jurisdictions reported serving 20 to 25 more children of Hispanic descent; one jurisdiction reported serving 15 more children; and three jurisdictions reported serving 5 to 10 more children. Statewide, 78 more children of Hispanic descent received services from local infants and toddlers programs (LITPs).

The increase in the percentage of Asian/Pacific Islander children served was attributed to a combination of changing demographics, sustained efforts to target outreach to underserved and special populations and increased collaboration with the Asian community that resulted in the increased number of children served of Asian/Pacific Islander descent. Statewide in 2007, there were 43 more children served of Asian/Pacific Islander descent, while six LITPs reported increases. Two LITPs reported serving 10 to 15 more children of Asian descent, and three reported serving 5 to 10 more children of Asian descent.

### **Massachusetts**

Massachusetts had a decrease in the number of at-risk children reported due to an update in August 2006 of the at-risk definitions, criteria and procedures for documentation along with additional guidance and clarification given to providers through trainings on clinical interpretation of factors as risk factors. This update was done in an effort to tighten and remind providers of the at-risk eligibility criteria.

### **Michigan**

Michigan had 97 children with more than one ethnicity. These were distributed proportionately into OSEP's five race/ethnicity categories.

### **Minnesota**

The state identified 8 more male children than female children out of 3,924 total children. The state did not view this change as statistically significant and was unable to account for this normal variation.

### **Missouri**

The increase in the child count of infants and toddlers less than age 1 was indicative of an overall rebound in the First Steps child count. The December 2006 child count was significantly lower than that of the previous year, due, in part, to a large decline in referrals for a period when the future of the program was questionable. Both referrals and the number of children served rebounded since that time, seen primarily in the youngest children in the program.

## Montana

Montana attributed the decrease in number of American Indian/Alaska Native children ages birth through 2 being served to the current political situation facing many of the tribes in which they do not feel confident in leaders and, therefore, do not want outsiders (Part C staff) in their homes.

Montana attributed the decrease in the number of Hispanic children ages birth through 2 being served to the population being composed primarily of migrant workers who move frequently. These families also occasionally travel to Mexico for an extended period of time during the months of December, January and February to visit families and friends during Montana's cold winter months.

## Nevada

Nevada attributed the increase in the total number of children served to the increases in total revenue for early intervention as demonstrated in the table below. From 2004 to 2008, the overall budget increased by 55.6 percent, and the total number of children served on Dec. 1 increased by 51.8 percent. With increased funding, Nevada was able to increase the staff that provided direct services to children in early intervention, which contributed to more children being served.

State Fiscal Year	Federal Grant	State General Fund	3rd Party Revenue	Total Revenue
2008	4,223,702	14,789,702	623,376	19,636,780
2007	4,129,169	14,056,845	1,447,396	19,633,410
2006	4,119,060	13,301,747	1,447,377	18,868,184
2005	3,030,801	8,568,135	1,465,829	13,064,765
2004	3,038,772	8,189,272	1,387,946	12,615,990

State Fiscal Year	Dec. 1 Child Count	Child Count % Increase/Decrease	Total Revenue	Revenue % Increase/Decrease
2008			19,636,780	.01
2007	1,986	30.66	19,633,410	4.06
2006	1,520	7.26	18,868,184	44.42
2005	1,417	8.33	13,064,765	3.55
2004	1,308		12,615,990	

From July 1, 2003, through July 1, 2007, the Nevada State Demographer Certified Population Estimates showed a statewide growth in population of 18.4 percent, which also contributed to the overall increase in children served. These data accounted for the increases in race/ethnicity, gender and settings due to the overall increase in the child count.

### **New Hampshire**

The number of white (not Hispanic) infants and toddlers served included 22 children who were reported as multi-racial. The state's at-risk data will be provided in the form of a revised report. The new statewide data system collected those data but was not able to produce a report in a timely manner.

### **New Jersey**

New Jersey attributed the increase in the number of American Indian/Alaska Native infants and toddlers ages birth through 2 receiving services to improved data collection and reporting of race/ethnicity.

The state attributed the increase in the number of Hispanic infants and toddlers ages birth through 2 receiving services to changing demographics, an increased number of infants and toddlers served statewide and sustained efforts to target public awareness activities to underserved populations.

### **New Mexico**

There were significant increases in the number of children served by racial and ethnic category over last year as the state's program was serving more children. This increase was seen in the entire birth through 2 population served, as well as the at-risk populations served as a result of increased public awareness and child find activities. The number of children identified as black (not Hispanic) decreased due to an unknown reason.

The Family Infant Toddler Program switched from an Access database system to an online data system, called FIT-KIDS, effective Jan. 1, 2008. This new system will result in more reliable data collection and more accurate data submission. In addition, it will provide "real time" data and reporting capabilities that will enhance the ability of the Family Infant Toddler Program's reporting requirements to OSEP. However, the data contained in this Dec. 1 child count report were collected and analyzed using the older Access database system. The new FIT-KIDS system will be used for federal reporting beginning with the Dec. 1, 2008, child count report.

### **New York**

The numbers reported excluded 382 children over age 3 who were enrolled in the New York Early Intervention Program on Oct. 1, 2007. There was a decrease from 8,416 children with unknown race/ethnicity in the last reporting period to 5,233 in the current reporting period. Much of this decrease in unknown race/ethnicity was a result of New York City's efforts in getting more complete race/ethnicity data. The 5,233 children with unknown race/ethnicity were distributed by apportioning the unknown children within a county in direct proportion to the distribution of children in the county with known race/ethnicity or, for New York City, apportioning the unknown race/ethnicity using the results of a match of New York City early intervention eligibles with the race/ethnicity



reported by their birth mother from birth certificate records. Nineteen children with unknown gender were distributed by apportioning these children in direct proportion to the distribution of children with known gender.

### **North Carolina**

The eligibility criteria for the North Carolina Part C program, as approved by OSEP, changed on July 1, 2006. Previously a broad eligibility definition had been in place, which included the provision of services to at-risk infant and toddlers. Under the new eligibility definition, at-risk children referred after July 1, 2006, were served. Section C reflects those at-risk children referred prior to July 1, 2006, who continued to receive services until they exited the program.

The increase in the number of Asian/Pacific Islander infants and toddlers ages birth through 2 receiving services was most likely explained by random fluctuations associated with categories with small numbers.

The Hispanic population in North Carolina is growing quite rapidly. According to U.S. Census estimates, from 2000 to 2005 the population of Hispanic children ages birth through 2 years old increased by 59 percent. The increase in the number of Hispanic children receiving services reflected this trend.

The number of children enrolled in the North Carolina Part C program increased in the past year, so the number of female children also increased, although at a slightly higher rate than the overall increase.

There was a decrease in the number of at-risk children.

North Carolina's eligibility definition for Part C was revised in July 2006 as approved by OSEP. The previous eligibility definition included the provision of services to children who were at-risk and to children with atypical development. Under the new definition, these two eligibility categories were no longer present in the eligibility definition for North Carolina. This policy change contributed to the decrease in the number of children served who were at risk.

### **North Dakota**

Differences were due to ongoing child find activities.

### **Oklahoma**

The number of Asian/Pacific Islander and Hispanic infants and toddlers receiving services increased due to the increase in these populations as well as changes in the state's Web-based system.

## **Oregon**

The decrease in the number of American Indian/Alaska Native infants and toddlers receiving services (13 children, -22.81 percent) came mainly from four counties (reported 32 children last year and 16 in 2007-08, a decrease of 16 children). The counties reported various possible factors for this decrease. The data coordinator for one county reported the completion of a two-year screening/identification grant, led by the local tribe, as the leading factor for its decrease. The second county data coordinator reported an overall population decrease in the county. The third data coordinator reported an increase in families from the reservation missing initial evaluations. The coordinator also stated this could be due to a change from using specialists from the reservations to using school district employees to conduct the evaluations. The fourth data coordinator reported several factors for the decrease—children transitioning into Part B, children moving, children being withdrawn by parents, parents reporting a different ethnicity for their child from one year to the next, and a temporary spike in last year's data that evened out.

## **Pennsylvania**

The state attributed the increase in the number of children served in the Asian/Pacific Islander and Hispanic categories to the overall increase in number of infants and toddlers and families served statewide and continued efforts on targeting child find efforts to underrepresented populations.

## **Puerto Rico**

The significant year to year changes explanations for Child Count 2007 are the following: According the US Census Bureau population estimates, there was a little decrease in the population of children 0-2 years in Puerto Rico from year 2005 to year 2006 (149,873 vs. 149,471, respectively)<sup>1</sup>. Although a decrease from 2005 to 2006 was observed, the proportion of children by gender for those two years remained constant (51.1% for males and 48.9% for females). Even though there were no changes in proportions, 362 more males were served this year, as compared to previous year.

From 4,262 children served during FFY 2006, an increase to 4,762 was observed for FFY 2007. For FFY 2007, 500 more children were served, where male kids accounted for 72.4% of this increase. However, the difference of male kids served during FFY 2006 and FFY 2007 is less than 1% (65.8% vs. 66.5%).

Over the years, Child Count in Puerto Rico is always greater for males than for females. Trends show that more male children are referred and admitted to Early Intervention Program (EIP) compared with females. As we do not have at this moment data on the prevalence of children with developmental delays by gender in Puerto Rico, it is not possible to correlate this increase due to a higher number of male kids with special needs or delays.

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<sup>1</sup> Most recent available US Census Bureau population estimates for Puerto Rico.

Nonetheless, the improvement in the number of Hispanic children served for FFY 2007 is the result of the child finding ongoing efforts to increase the number of children that are referred to EIP and due to the ethnic homogeneous population. As occurred last year, child finding activities were part of EIP's corrective action plans, as well as the Parent Information and Training Center's (APNI's) work plan.

For FFY 2007, Vaccination and WIC Programs have been the main focus for orientation of staff and families, as well as other EIP promotion efforts have been implemented, especially in those EIP with Child Count lower numbers.

During APNI Annual Conference held during March 14 and 16, 2007 promotional and educational material were distributed to families and CSHCN's professionals. It is estimated that APNI's Annual Conference impacted about 1,000 participants in south and metropolitan area of the Island.

### **Rhode Island**

Rhode Island's Early Intervention Program changed data collection systems in August 2006. The new system was called the Rhode Island Early Intervention Care Coordination System (RIEICCS). The system allows providers to check multiple races in compliance to the OMB standards. For this report, if the family identified their child as being part of more than one federal category, their data were distributed as recorded among categories. Only federal categories are in RIEICCS. A child listed as black and white would be counted as .5 black and .5 white. The state then rounds accordingly if needed. A total of 32 children (1.89%) without identified race were proportionally distributed. RIEICCS system data were validated through a raw data download to an access database. Enrollment continued to increase. One new provider was added in 2007. These changes and improvements were all factors that caused a change from the previous year's count. These data may change due to future edits, updates and corrections.

### **Tennessee**

Data were drilled down to the Tennessee Early Intervention System-Point of Entry (TEIS-POE) level. Findings revealed a proportional increase across all TEIS districts, with the percentage of the total remaining the same when comparing data from the December 2006 and 2007 counts. It is believed the increase in the number of children this year was due to the implementation of the Governor's Office of Children's Care Coordination (GOCCC) reforms, July 1, 2007. For the past 18 months, the state's early intervention system was very much in the public eye related to the GOCCC's analysis and the state's implementation of its recommendations.

### **Utah**

Data were collected and compiled using BTOTS (Baby Toddler Online Tracking System), Utah's statewide data system. Each contracting early intervention provider verified that its BTOTS data were complete and accurate. BTOTS data included 21

infants and toddlers under individual family service plans (IFSP) on Dec. 1, 2007, with race/ethnicity reported as other. Data for children under IFSP on Dec. 1, 2007, of unknown race/ethnicity because their parents chose not to disclose this information were included in the Dec. 1, 2007, child count total but were not distributed across the race/ethnicity categories.

2005 was the first year Utah submitted cumulative count under Section C. Although the data system was very new, the data should have been reasonably complete. Utah submitted a revision because the new data system was installed in EI programs through January 2006. As of Feb. 1, 2006, programs were still entering and cleaning up data. EI programs reported children in the category Other with detail as biracial. These were distributed using a combination of races reported and statewide distribution of Part C children. Utah Part C does not serve infants and toddlers at risk.

In 2007, data were collected and compiled using BTOTS, Utah's statewide data system. All contracting early intervention providers verified that their BTOTS data were complete and accurate. BTOTS data included 21 infants and toddlers under IFSP on Dec. 1, 2007, with race/ethnicity reported as Other. Additional children under IFSP on Dec. 1, 2007, were of unknown race/ethnicity because their parents chose not to disclose this information. Nineteen infants and toddlers under IFSP on Dec. 1, 2007, with race/ethnicity reported as Other and included in the Dec. 1, 2007, child count total but were not distributed across the race/ethnicity categories. From 2006 to 2007, the state had a significant increase (26.92 percent) in the percentage of American Indian/Alaskan Native children ages birth through two served in early intervention. This increase was a result of targeted child find activities in programs whose service boundaries included Native American reservations.

### **Vermont**

The increase in the total number of infants and toddlers served under Part C was attributed to exposure of the Part C Program in Vermont through increased public awareness about prevention and early intervention services.

The increase in the number of black (not Hispanic) infants and toddlers ages birth through 2 represented a very small number, thus the percentage change was more dramatic than in larger states with higher enrollments. However, 10 of these children were from the state's most populated region, which has had an increase in refugee resettlement from the Sudan and Somalia.

The increase in the number of white (not Hispanic) infants and toddlers ages birth through 2 was due to the overall increase of 12.2 percent—with the majority of the population (white) at 90 percent and with 10 percent due to the combined increase of the other populations.

The increases in the number of male and female infants and toddlers ages birth through 2 reflected an overall increase in program numbers by 12.2 percent; however the small

numbers involved also affected the percentage rate. There was more of an increase in the base number of females but the end results still showed a larger proportion of the children served were males.

### **Virginia**

This data submission included 975 infants and toddlers receiving services (free appropriate public education) through the public schools.

The first flagged item was in the table "Virginia by Race Ethnicity Age Group 0-2". In this table, Hispanic was flagged because of the number (109) and percentage (19.68) increase for the children served compared to the state's 2006 child count statistics. The state was confident in the accuracy of these figures. In a review of data provided by the National Center for Juvenile Justice: Easy Access to Juvenile Populations, reported an increase in the Hispanic Birth to three populations of 5 percent in Virginia from 2005 to 2006. The non-Hispanic population of the same age group increased only .45 percent. This, along with the state's efforts to make all child find and service-related materials available in Spanish resulted in the increase of the Hispanic population served.

The second flagged item was the table by gender. In this table, Male: Birth through 2 was flagged for a number (400) and percentage (11.64) increase in the number of children served compared to the state's 2006 child count statistics. The state found no data indicating a reason for the change but checked its data and confirmed the accuracy.

### **Washington**

The following data should be included in the Computed Total on Page 1 for Washington state:

Multi-facial:	387
Does not wish to provide:	288
Sub-total:	675
Page 1 Lines 1-5 Computed total:	3,898
Grand total:	4,573 Day-in-time count

### **West Virginia**

A total of 130 children were classified as multi-racial. These children were classified using proportions of 3 percent African American (not Hispanic), 0 percent Native American, .8 percent Asian, 1 percent Hispanic and 95.1 percent white (not Hispanic).

### **Wisconsin**

The number of children who were American Indian/Alaska Native ages birth through 2 increased. 2006 data indicated the number of children who were American Indian/Alaska Native decreased. The increase could not be attributed to a single county or region. Wisconsin will monitor this over the next reporting period along with the Great Lakes

Inter-Tribal Council, which provides outreach to Native American families and works with counties to ensure integration of Native American infants and toddlers into county birth to 3 programs.

The number of children who were Asian or Pacific Islander ages birth through age 2 participating in the Wisconsin Part C Program increased. This appeared to be part of a normal trend that was also mirrored in Wisconsin Part C exiting data. Between 2004 and 2007, the overall number of children who were Asian or Pacific Islander fluctuated between 1.92 percent and 2.34percent. In 2004, 1.92 percent of children were Asian or Pacific Islander; in 2005, this number was 2.22 percent, in 2006; it was 2.17 percent, and in 2007, was 2.34 percent. The fluctuation could not be attributed to a specific county or region. The State will continue to monitor.

When Wisconsin submitted the 2006 child count, the count of males and females in the program was transposed. This error was corrected.

Wisconsin Part C changed its child count date to Oct. 1.

## **Tables 8-6, 8-11, and 8-12, *IDEA* Program Settings, 2007**

### **Alabama**

Alabama's total child count increased by 248 children. There was an increase in the number of children reported in the home setting category and a decrease in the number of children reported in the Other setting category. This shift in service settings was the result of a strong monitoring, technical assistance, and Comprehensive System of Personnel Development? program that emphasizes the importance of providing services in settings typical for children without disabilities.

### **Alaska**

A total of 66 children of unknown ethnicity were served. They were distributed proportionally into the existing ethnic groups.

There was an increase to Alaska's community-based settings on Table 2 Child Count for 2007. This reflected a change to Alaska's Part C database structure this past fiscal year. Data setting options were changed to align with current OSEP reporting requirements. Alaska provided training to all Early Intervention (EI) providers this past year. The change in these data reflected the change two providers made in recording these data. Previously, Early Head Start and Child Care settings were recorded by these agencies as Other. They are now correctly entering these settings under community.

### **Arizona**

See Table 1 comments for the unknown ethnicity formula counts. In December 2007, the Arizona Early Intervention Program (AzEIP) identified problems with the revised settings data reported to OSEP in July 2007, and the same problems occurred in the data used to develop the Dec. 1, 2007, settings report. The root of the problem was twofold: Arizona's data system currently uses billing records, rather than IFSP records, to identify a child's primary service setting; many children receive early intervention services that are not billed directly to the service coordination agency and therefore have no billing records from which to pull settings information. To account for the records that were missing billing and settings data, AzEIP's data reporting application in previous years used a formula to distribute these records across the settings categories. For 2007, records that were missing billing or settings data were all defaulted to the Other setting category. This resulted in a large increase in children reported in the Other setting category. Second, settings data derived from billing records provided by one of the participation state agencies were determined to be problematic related to settings codes incorporated into that system. Specifically, no community-based setting codes were available in that billing system. The settings data problem could not be corrected in time for this report and will be addressed by AzEIP during the coming months as stated in the FFY2006 Annual Performance Report.

## **Arkansas**

There was a decrease in the total number of children in Part C settings. This was consistent and a direct result of the decrease in the total number of children served and found eligible for Part C services.

The decrease in the number of children served in the home was due to the decrease in the population of births in Arkansas for 2007. Also, there are limited providers in rural areas of Arkansas, which causes parents to drive to the nearest facility for services. Some providers do not have the funds to hire therapists to travel and provide services in the home.

There was a decrease in the number of children served in the community-based setting category. This was a result of ongoing training and technical assistance in an effort to achieve accurate and reliable data.

## **California**

A.2. was left blank because California does not serve children age 3 to 5 in Part C; children these ages are served by Part B. B.2. was left blank because California does not serve children ages 3 to 5 in Part C; children these ages are served by Part B. Ethnicity was estimated for 6,602 children (17.13 percent of total) in accordance with instructions provided, although this method is known to overestimate those then classified as Hispanic vs. other ethnic groups. The estimated ethnicity was 1,493 age 0 (22.01 percent), 2,040 age 1 (16.13 percent) and 3,069 age 2 (16.07 percent).

The settings were 5,365 home (16.84 percent), 133 community (10.76 percent) and 1,104 Other (20.30 percent). The point-in-time caseload count grew 12.19 percent, while the 12-month caseload count grew by 9.83 percent; the latter was down from the 10.53 percent of the December 2006 reports. Age 0 grew 6.62 percent, age 1 10.76 percent, and age 2 15.32 percent.

The small Native American group shrank 13.48 percent (n=19), as did the black (not Hispanic) group commensurate with California's general population ethnic changes (n=43 or 1.95 percent), offset by relative increases commensurate with California's general population trends with more Asian/Pacific Islander children (n=240 or 8.24 percent), white (not Hispanic) (n=380 or 3.29 percent) and Hispanic (n=1,517 or 9.85 percent). Given the effects of allocated ethnicity, much of the small differences in rates of change could have been due to the allocation's effects. The drop in Native American children receiving services was the only ethnic change that was both at least 10 percent and numbered more than 10; however, given the skewing of allocated ethnicity toward Hispanic, this change was probably an artifact of the required ethnicity allocation methodology.

Instructions and data definitions for these settings data differed from prior year reporting requirements substantially enough to be responsible for all differences in settings.



Instructions required ties between the integrated setting of community and the more segregated setting of home. Similarly, the new instructions required reporting children who received their developmental, instructional and therapeutic needs via family training under the Other setting category along with the infants and toddlers with significant medical issues requiring residential health care settings. California sought technical assistance for the definition of family training, but was limited to a data definition from the *2005 Data Dictionary*, the most recent posted as of January 22, 2008, which combined family training, counseling and home visits in the definition.

These changes rendered these data noncomparable to last year's data, and all settings changes were attributable to the required revised data definitions.

### **Colorado**

There was a decrease in the number of children who received services in a community-based setting. Colorado has 20 EIS programs that collect and report data to the state. Extensive technical assistance was provided to emphasize the importance of complete and accurate data. A data field manual was provided to EIS programs, which supplied the definition of each setting. The state believed the decrease was a result of a better understanding of the definition of community-based setting as a setting for typically developing children. A therapist's office would not count as a community-based setting nor would a playgroup that was created for, and specifically serves, children with disabilities.

There was an increase in the number of children who received services in the Other setting category. Colorado has 20 EIS programs that collect and report data to the state. Extensive technical assistance was provided to emphasize the importance of complete and accurate data. A data field manual was provided to EIS programs, which supplied the definition of each setting. The state believed the decrease was a result of a better understanding of the definition of community-based setting as a setting for typically developing children. A therapist's office would not count as a community-based setting nor would a playgroup that was created for, and specifically serves, children with disabilities.

### **Connecticut**

The Other setting category included 23 infants and toddlers receiving services in a hospital, residential setting, service provider office or during supervised visits at the Department of Children and Families. Connecticut estimated the race/ethnicity for 170 children who had an unknown race/ethnicity or multiple races/ethnicities.

### **Delaware**

Delaware collapsed the following categories into the community-based setting category: Head Start, nursery school, school/community program and family day care. The following categories defaulted into the Other setting category: program designed for

children with developmental delay or disabilities, hospital (inpatient), residential facility, service provider location, and prescribed pediatric extended care facility.

### **District of Columbia**

DC Part C experienced a positive increase in the number of children participating in inclusive community-based settings over home-based services. This increase supported the District's efforts to ensure that inclusive childcare is accessible to all infants and toddlers residing in the District of Columbia. More of the state's families chose inclusive community-based child care to meet the developmental needs of their children.

The District continued to experience challenges related to provider shortages and that may have affected the number of children receiving services in the Other setting category. An additional contributing factor could have been that the District experienced an increase in the number of families who were not eligible for Part C funding assistance and whose services could be obtained, for example, in a university setting at more affordable rates. Many families access their private insurance to fund early intervention services and must use providers provided by their insurance company. In the District, private insurance companies do not have an obligation to support "early intervention" services. Additionally, families may prefer not to enroll their child in a center-based program, but prefer out-patient services, thereby exercising their right of choice.

The difference in total setting may have reflected the notion that many more affluent families are moving into the District, and those families traditionally served are moving out, as seen in most urban cities today that are affected by gentrification. Additionally, the District experienced challenges with families who may have had difficulties to follow through to get annual IFSP's and services updated. The state found that because its eligibility criteria are very narrow, families were often overwhelmed because they faced the challenge of caring for babies who were sick and had co-occurring developmental delays and/or disabilities. Oftentimes, these families were fragile and found themselves in a position to attend to the immediate health needs of their children and required additional support to get an IFSP with services updated.

The District continued to do excellent work in the area of ensuring that families had access to services in the child's natural environment whether in the home or in one of the District's excellent inclusive community-based childcare settings.

### **Florida**

There were 1,803 children with no primary setting included in the Other setting category. Last year, there were 2,573 children with no primary setting included. In 2007, a new location code was added (B- Prescribed Ped Ext Care Facility (PPEC)), with only nine children reported with this as their primary setting.

## **Georgia**

The state imputed 265 children of unknown race according to guidelines.

## **Idaho**

The Idaho Part C program does not serve children over the age of 3.

## **Illinois**

The 10.34 percent increase in community-based settings was only a bit over the 6.93 percent growth in the caseload overall. However, this reflected a general encouragement to the field to consider community settings as a viable and appropriate natural setting.

The overall caseload grew by 6.9 percent from the previous year, accounting for growth in all three settings groupings and in all racial and ethnic groups, except for Native Americans. More than half of the caseload growth was for Hispanic infants and toddlers. The Hispanic caseload increased by 15.2 percent. This continued a long-term trend.

While the number of black (not Hispanic) infants and toddlers receiving services increased, the percentage of the overall caseload decreased again.

Growth in the Asian caseload was slightly above the average, but Asian infants and toddlers continued to be underrepresented. A workgroup began to look into ways of reaching more Asian families and into why the African-American caseload moved from being significantly overrepresented to being slightly underrepresented within just a few years.

Cases served predominately in the community setting increased more than those in the Other setting category but remain the smallest of the three. The proportion of the caseload served predominately in the community setting increased from just 4.36 percent to 4.53 percent. The state encouraged consideration of delivering services in community settings.

There were large percentage increases in the number of children served predominately in community settings among both Hispanic and white (not Hispanic) infants and toddlers. As was noted previously, the state encouraged delivering services in a community-based setting, particularly as an alternative to non-natural settings.

Overall, the percentage of children served predominately in natural settings increased marginally from 89.3 percent to 89.6 percent. The proportion of 1-year-olds and 2-year-olds served predominately in natural settings improved.

The proportion of children under age 1 served predominately in natural settings fell. Infants have long been the most likely to be served predominately in natural settings. Children under age 1 represent the smallest age group. The change was 19.8 percent, but

the increase was only 29 cases. All efforts were made to reinforce rules that require preference for services being delivered in natural settings.

The largest percentage increase was among children served predominately in community settings, particularly for infants and 2-year-olds. The number changes were small. Even after growth, only 4.5 percent of children were served predominately in community settings.

### **Indiana**

Child counts in the Other setting category were down because Indiana has been encouraging providers to use more descriptive location codes.

### **Kentucky**

Kentucky asks primary service coordinators to indicate where the majority of services delivered to a child occurred at every six-month plan review. However, for children in the program less than six months, the data were not available. Settings data were estimated for 1,737 children.

### **Maine**

Maine Department of Education/Child Development Services (DOE/CDS) trainings occurred in the spring of 2007 for parents, providers and staff and included clarification and discussion of natural environment settings for children as well as strategies to ensure children are served in their home or community setting. Additionally, the Assistant Attorney General for Education initiated training opportunities for CDS regional site staff to discuss Part C, natural environment and the strategies mentioned above. All sites received training in Part C when their site was monitored.

### **Maryland**

Several factors, including local and statewide training on functional assessment and IFSP outcomes and providing early intervention services in natural environments, in addition to statewide initiatives on inclusive child care, resulted in a decreased number of children receiving services in the Other setting category. This occurred in 11 LITPs, with 2 of these programs accounting for 70 percent of the difference of 82.

### **Michigan**

Michigan reported 97 children with more than one ethnicity. They were distributed to the five OSEP reporting categories. Michigan used a crosswalk for a few districts' setting codes that were still using legacy OSEP codes as of Dec. 3, 2007. They should all have the new codes for Dec. 2008. The codes for home and Other setting were unchanged. The number of records crosswalked were 62 from program with typically developing children

to community-based setting, 152 from program for children with disabilities to Other setting and 39 from service provider location to Other setting.

### **Minnesota**

The increase in the number of infants and toddlers ages birth through 2 served were attributed to a change in Minnesota's eligibility criteria. Specifically, the state's definition of developmental delay was amended to include a delay of -1.5 standard deviations below the mean in one or more developmental domains which allowed the state to determine more infants and toddlers as eligible for early intervention. Further, efforts were made at the state level and among our local Interagency Early Intervention Committees to increase the effectiveness of outreach to families with racial, ethnic and linguistic diversity. These targeted efforts accounted for more significant increases among those groups.

### **Missouri**

The reason for the small decrease in the number of children reported in the Other setting category was unknown due to the individual nature of the decisions on where services should be provided for the child and family.

### **Montana**

The Other setting category was hospitals.

Montana attributed the increased number of infants and toddlers receiving services in community-based settings to the state's providing training to the local Part C providers regarding to the definition of the setting categories and how to report the data consistently across the state.

Montana attributed the decrease in the number of infants and toddlers receiving services in the Other setting category to how the local Part C providers were reporting settings. The decrease in this area was due to the training the state provided for the settings categories and how to report the data.

### **Nevada**

The Other setting category included program designed for children with developmental delays/disabilities, service provider location and residential facility.

### **New Hampshire**

Table 2, Section B, will be submitted as a revised report. The new statewide data system collected this information, but a report was not available when the data notes were due.

Information needed to complete federal reports is generated from the statewide data system (NHSEIS). This was the first time that data for Table 2 were generated through the NHSEIS data system, and it was not discovered until too late that race/ethnicity information was not included in the generated data report. The (NHSEIS) data report will be revised to include race/ethnicity information and resubmitted.

### **New Jersey**

New Jersey attributed the increase in the Other setting category to changes in the Family Cost Participation policies and procedures that resulted in an increase of families accepting only the early intervention services provided at public expense. This resulted in an increase of families declining direct child services and receiving only service coordination, evaluation/assessment and periodic/annual IFSP reviews.

### **New Mexico**

As more children were served, there was an increase in the number served in the home. This was consistent with the state's efforts to serve children in natural environments.

The Family Infant Toddler Program switched from an Access database system to an online data system, called FIT-KIDS, effective Jan. 1, 2008. This new system will result in more reliable data collection and more accurate data submission. In addition it will provide real-time data and reporting capabilities that will enhance the ability of the Family Infant Toddler Program's reporting requirements to OSEP. However, the data contained in the 2007 Dec. 1 child count reports were collected and analyzed using the older Access database system. The new FIT-KIDS system will be used for federal reporting beginning with the Dec. 1, 2008, child count report.

### **New York**

The small decrease of 80 children who received (EI) services primarily in a community setting was a result of an increasing proportion of children receiving EI services primarily in their home. This reflected New York State's commitment to providing each child with EI services in the least restrictive setting that is appropriate to the child.

The numbers reported excluded 382 children over age 3 who were enrolled in the New York Early Intervention Program on Oct. 1, 2007. There was a decrease from 8,416 children with unknown race/ethnicity in the last reporting period to 5,233 in this reporting period. Much of this decrease in unknown race/ethnicity was a result of New York City's efforts in getting more complete race/ethnicity data. The 5,233 children with unknown race/ethnicity were distributed by apportioning the unknown children within a county in direct proportion to the distribution of children in the county with known race/ethnicity or, for New York City, apportioning the unknown race/ethnicity using the results of a match of New York City EI eligibles with the race/ethnicity reported by their birth mother from birth certificate records.

## **North Carolina**

The number of children who enrolled in the North Carolina Part C program increased in 2007, so the number of children reported in the community-based setting also increased, although at a higher rate than the overall increase.

The decrease in the number of children with an Other setting category was most likely explained by random fluctuations associated with categories with small numbers and increase in number of children in community-based settings.

Community-based setting included child care facility, Head Start, and other community-based setting. The Other setting category included center-based early intervention, Children's Developmental Services Agency, inpatient hospital, outpatient service facility, and residential facility

## **Northern Marianas**

It may appear that there was an increase and a decrease in the state's numbers. Data showed an increase of 100 percent in the number of infants and toddlers served in a community-based setting. The number of children in this setting was so small that a slight increase showed as a large percentage increase. There also appeared to be a decrease in the number of infants and toddlers served in the Other setting category. This was also due to a small number of children in the category.

## **Oklahoma**

Oklahoma had a significant increase in the Other setting category this year because five new settings were added to the Other setting category. The settings added were 1) program designed for children with developmental delay, 2) hospital, 3) residential facility, 4) service provider location and 5) parent's work. It is important to note that Oklahoma also had 19 children in the Other setting category who were not included in the above categories.

Oklahoma had a significant number of community-based settings that were inappropriately added to the Other setting category in the past.

## **Oregon**

The increase of 33 infants and toddlers (67.35 percent) in community-based settings can be attributed to Oregon's work on increasing settings in the natural environment.

The decrease of 137 infants and toddlers (-35.77 percent) in the Other setting category can be attributed to Oregon's work on increasing settings in the natural environment.

## **Pennsylvania**

In January 2007, Pennsylvania created a new unified office for the Departments of Education and Public Welfare. The new office, the Office of Child Development and Early Learning (OCDEL), coordinates Pennsylvania's early childhood programs, including infant/toddler and preschool early intervention, the Head Start supplemental program, pre-K programs, full-day kindergarten, family literacy, and child care programs. The establishment of OCDEL has offered incredible opportunities for collaboration and was responsible for the increase in the number of children served in early childhood learning environments and other community-based settings. The increase in the number of services provided in the Other setting category was consistent with an increase in the number of children served.

## **Rhode Island**

Rhode Island's Early Intervention Program changed data collection systems in August 2006. The new system is called the Rhode Island Early Intervention Care Coordination System (RIEICCS). The system allows providers to check multiple races in compliance to the OMB standards. For this report, if the family identified their child as being part of more than one federal category, their data were distributed as recorded among categories. Only federal categories are in RIEICCS. A child listed as black and white would be counted as .5 black and .5 white. The state then rounds accordingly if needed. A total of 32 children (1.89 percent) without identified race were proportionally distributed. The RIEICCS system data was validated through a raw data download to an access database. Enrollment continued to increase. One new provider was added in 2007. Increases in certain diagnoses (such as autism) and the number of Department of Children, Youth and Families children referred (*Child Abuse Prevention and Treatment Act*) shifted primary locations from community settings to other settings as families often chose to meet in other settings. Justification for these other settings was documented in each child's record. The state was also trying to match the location settings in the IFSP and service-rendered form (SRF) to match only federal categories. Policy changes in 2008 are expected to have an impact on this report. These changes and improvements were all factors that caused a change from the previous year's count. These data may change due to future edits, updates and corrections.

## **Tennessee**

For FFY 2006-07, Tennessee had a significant increase in the primary settings of home and community. There was also a significant decrease for services provided in the Other setting category. In the past year, there was a strong state directive for the provision of core early intervention services to be delivered in home and community settings.

## **Utah**

Data were collected and compiled using BTOTS, Utah's statewide data system. Each contracting EI provider verified that its BTOTS data were complete and accurate.



BTOTS data included 646 children for whom the primary setting in which they received early intervention services was the Other setting category. This setting included programs specifically for children with developmental delays, integrated programs for children with developmental delays, a community hospital, the local health department office and main and satellite offices of the early intervention centers. These data were included in the Dec. 1, 2007, settings data total but were not distributed across race/ethnicity categories.

BTOTS data included infants and toddlers under IFSP on Dec.1, 2007, whose parents chose not to disclose their child's race/ethnicity, as well as 19 infants and toddlers under IFSP on Dec.1, 2007, with race/ethnicity reported as other who were receiving early intervention services primarily in the home.

### **Vermont**

The increase in the total number of children served was due to increased public awareness of the Part C program in Vermont about prevention and early intervention services, resulting in an increase in the number of referrals and at an earlier age. The increase in settings reflected the increase in the number of children ages birth to 2 the state served in 2007.

The state's focus on reaching younger children also resulted in an increase in predominantly home-based services.

High-quality child care for very young children was under development, which resulted in more families able to find quality placements.

The increase in provider availability in some of the state's regions increased provider choice for families, which reduced the number of services that predominantly occur at service provider locations (Other).

### **Virginia**

The Other setting category included residential facility, clinic and EI center/class for children with disabilities. This data submission included 975 infants and toddlers receiving services (FAPE) through the public schools.

There was an increase in the number of children ages birth through 2 receiving services in the home (438 children, 10.17 percent) and community-based setting (28 children, 11.29 percent). The state was confident in the accuracy of these figures. The increase was due to Virginia's continuing efforts to serve children with disabilities in natural environments.

## **Washington**

The following data should be included in the Computed Total on Page 2 for Washington State:

Multi-racial	387
Does not wish to provide:	288
Sub-total:	675
Page 2 computed total:	3,898
Grand total:	4,573 Day in Time Count

Settings data were reported based on the federal definition as described in OSEP Memo 08-04.

## **West Virginia**

The 13 children reported in the Other setting category were in a residential setting, which is a Women's Correctional Facility in Greenbrier County where incarcerated women are allowed to keep their young infants with them, and in a program for children with developmental delays.

## **Wisconsin**

The number of services provided in Other settings increased. Wisconsin embraced a model of providing services to infants and toddlers in a natural environment. On Oct. 1, 2007, 93.98 percent of infants and toddlers enrolled in the Wisconsin Part C Program received services in a natural environment. Data indicated that this was a decrease from the previous year and that in 2007, there was an increase in the number of children receiving services in Other settings and decrease in the number of children receiving services in the natural environment. The state attributed this to the emphasis the largest urban county placed on data collection. This county and the state are working together to support services provided to children in natural environments. As strategies are implemented, it is hypothesized that the number of children receiving services in other settings will decrease.

Wisconsin Part C changed its child count date to Oct 1.

## **Tables 8-7 and 8-13, IDEA Part C Exiting, 2006-07**

### **Alabama**

Upon review, the state realized the data numbers had been entered in the incorrect fields. The state corrected this error.

### **Alaska**

Alaska does not have the option for children exiting Part B eligible, continuing in Part C.

### **American Samoa**

There was an increase in the total number of children who exited (30 children, 125 percent).

In April 2006, American Samoa Early Intervention Program (ASEIP) redefined its eligibility process and provided staff training on a new assessment tool, the Assessment, Evaluation and Programming System (AEPS). The AEPS is the first assessment tool that ASEIP has received formal training on, and upon using the tool, ASEIP developed a more sophisticated method of identifying children as eligible and establishing continued eligibility for early intervention services. Children who were found to be developmentally age appropriate at the annual evaluation were exited from the program. These changes caused an increase in the number of children exited from the program. The AEPS training improved the overall ability of staff to determine eligibility.

The ASEIP improved the tracking of children and exiting of children through the use of the ASEIP database. The database more effectively monitors open and closed cases allowing for more accurate accounts of total children in the program and children exiting the program.

ASEIP developed new policies and procedures on exiting families that did not participate and families that it was unable to contact. This affected the state's child count and exit count.

The increase in the Part B eligible exiting category (12 children, 120 percent) reflected the ongoing program development in the transition area and efforts to build stronger relationships with the Part B program.

In addition, the increase in exits reflected improvements made to the tracking of children and exiting of children through the use of the ASEIP database.

The implementation of the new AEPS assessment tool in April 2006 and a redefinition of eligibility process affected the number of children eligible for Part C as well as the number of children exiting.

The state resubmitted its data due to an error found in exits without IFSPs. Internal data-entry procedures and other procedures were not followed correctly. While the state worked to have staff enter their own data, the wrong data in this case were entered. The database and the database reports used to verify data were updated to eliminate these errors in the future.

### **Arizona**

AzEIP had a total of 155 unknown ethnicity data for the Table 3 report. The state assigned these children to exiting categories and racial/ethnic categories using the unknown ethnicity formula.

### **Arkansas**

The decrease in the number of children completing their IFSP prior to the maximum age was due to a decrease in the number of children exiting.

The decrease in the number of children exiting Part C with no referral was a direct result of training and technical assistance provided throughout the year to programs.

The decrease in the number of children moving out of state was due to economic instability associated with problems in the housing industry and loss of jobs throughout the year.

The decrease in the number of unsuccessful attempts to contact parents was due to better case management, as a result of better training and more accurate information received from parents.

The decrease in the number of black (not Hispanic) children exiting Part C was due to the decrease in the number of children exiting Part C as a whole. Last year (2006) captured a significant number of children entering and exiting the program.

The increase in the number of Hispanic children exiting Part C was a result of the increase of Hispanic entering the program last year, due to better communication with the Hispanic community. These children reached the age to exit, thereby showing an increase.

### **California**

Part B eligible, continuing in Part C is not an option in California. Some of the data differences were probably attributable to refinements in the California Department of Education's annual CASEMIS Part B and Part C data collections. These collections would affect the Part C to Part B data matching for exit to Part B, which now captured referred to Part B, but determined ineligible (less than 100); referred to Part B and found eligible but then withdrawn by parent (even fewer); referred to Part B and found eligible but IEP agreement not yet reached (even fewer yet); and deaths (5).

Any children not yet reported as receiving Part B services, including families refusing transition or withdrawing at age of transition, were reported in the category eligibility not determined if they did not at least start the eligibility determination process (except for deaths). Part C and Part B participation is voluntary for families. The number of children reported in the eligibility not determined category (3,572) was artificially boosted because it included 2,800 children (44.4 percent) who did not begin the Part B eligibility determination per new instructions not included two years ago. The number of infants and toddlers receiving services under Part C in California has been growing at more than 10 percent per year, so double-digit growth in exit categories was expected. California statute requires all children receiving services under Part C to be referred to Family Resource Centers. The Lead Agency monitors EI programs for compliance with referral requirements.

The children reported in the exit to other programs with referrals category were transition-age children who did not enter Part B and who received referral information with their letters informing them that they were not eligible for Lanterman Services through the regional centers. Vital Statistics implemented a new system for deaths, which delayed death reporting and confirmation for all public agencies in California. The slight reduction in reported deaths over the past two years was attributable to reporting lag time under the new system.

Ethnicity was estimated for 4,058 (10.56 percent) of all exits, for 798 infants and toddlers who completed their IFSP before reaching maximum age (25.16 percent), for 855 (24.78 percent) whose eligibility was not determined, for 53 deaths (18.15 percent), 120 (20.13 percent) who moved out of state, for 588 withdrawn by parent or guardian (16.60 percent of all withdrawn by parent or guardian) and for 579 where attempts to contact were unsuccessful (19.47 percent of all where attempts to contact were unsuccessful). Ethnicity was not estimated for any infants and toddlers who were referred to Part B, received Part B services; those found eligible for Part B and continuing in Part C; those found not eligible for Part B, but referred to other programs; and those not eligible for Part B services, exited without referrals.

### **Colorado**

The increase in the number of infants and toddlers exiting Part C through completion of their IFSP was because more diligence was given to choosing the correct exit reason, and local EIS programs understood that if a child reached his or her outcomes, the parents could choose to exit the program because the child completed the IFSP.

The increase in the number of infants and toddlers exiting with no referral was due to more families choosing not to pursue other options if their child exited Part C and did not qualify for Part B. They chose instead to "take a break."

The increase in the number of infants and toddlers in the Part B eligibility not determined category was a data entry issue. There should be very few children exiting with this status. Technical assistance was provided in this area.

The decrease in the number of infants and toddlers reported in the deceased category was because fewer children died.

The decrease in the number of infants and toddlers reported in the moved out of state category was because fewer families chose to move away from Colorado.

The decrease in the number of infants and toddlers reported in the attempts to contact unsuccessful category was because better contact information was gathered at referral. The state is requiring more frequent contacts with families by service coordinators, so fewer families get out of touch. Data entry is also getting better.

Colorado showed an increase in the number of black (not Hispanic) infants and toddlers receiving services, so the decrease in the number exiting was probably because most of the black (not Hispanic) children identified were very young.

### **Connecticut**

Connecticut estimated the race/ethnicity for 99 children who had an unknown race/ethnicity or multiple races/ethnicities.

### **Delaware**

Race/ethnicity was prorated for 28 children who could not be identified with a single race. These children were coded as unknown/other in Delaware's database. These children were apportioned into the black or African American (not Hispanic), Hispanic or Latino or white (not Hispanic) categories.

### **Florida**

Exit data were generated using Excel pivot tables and proportioning race codes unmatched in the OSEP/Westat categories (unknown) according to the proportion of race codes matched in OSEP/Westat categories (known). During the exit period, 1,765 children were of unknown race; 415 were of other race; and 47 were Haitian (which is no longer used for newly referred children and is diminishing through time). These totaled 2,227 children who were proportioned into known races.

### **Georgia**

A total of 359 children were missing race (or coded as multi or other) and reported according to Westat instructions in the totals. Five children were missing exit reason and reported according to Westat instructions in the totals.

## **Hawaii**

The increase in the overall number of children not Part B eligible and exiting to another program was the result of the difference in eligibility criteria for Part C and Part B in Hawaii and improvements in Part C service coordination toward more consistently implementing the transition process with families who were not Part B eligible.

The increase in the overall number of children not Part B eligible and exiting with no referrals was the result of the difference in eligibility criteria for Part C and Part B in Hawaii. Some parents with children not eligible for Part B chose to keep their children at home, were not able to afford community preschool or were encountering waitlists for enrolling their child in a local Head Start program.

The decrease in the overall number of children with attempts to contact unsuccessful was the result of increased efforts to engage hard-to-reach families through successful creative outreach.

The increase in the overall number of black (not Hispanic) children served was the result of the ongoing cycle of military families transferred to and from Hawaii.

The decrease in the overall number of Hispanic children served was the result of the ongoing cycle of military families transferred to and from Hawaii.

## **Idaho**

Due to changes in reporting instructions, the category not eligible for Part B, exit with no referrals included those children whose parents did not consent to transition planning. Previously, those children were included in the category Part B eligibility not determined.

Substantial differences in percentages (in excess of 10 percent) of Native American, Asian, and black (not Hispanic) minority children exited for the various exit reasons were attributed to the arithmetically small counts in these minority populations.

## **Illinois**

The overall number of exits increased by 10.3 percent from the previous year. This was in line with past growth in the caseload and was anticipated. Most changes in cells were within a normal statistical range of the 10.3 percent overall change.

The change in the number of black (not Hispanic) infants and toddlers exiting was smaller than the change in the other major groups. This was in line with a trend of black (not Hispanic) children comprising a declining share of the caseload in the last few years. The only concrete factor that was noted for this was the demolishing of large public housing blocks on the south and west sides of Chicago and the dispersal of previous residents. The program created a special advisory group to look into other causes and solutions to this decline.

The American Indian population in Illinois is very small. The relatively large changes for that population reflected small changes in actual numbers. They also reflected a situation in one area of the state. The majority were from one of 25 agencies, and they were also coded as Hispanic, probably reflecting a concentration from Central America.

The large increase in exits among Asian infants and toddlers reflected past growth in the caseload. The number changes were relatively small. There was no known reason for changes in exit patterns specific to Asian infants and toddlers.

Of the major termination reasons, the largest change was for special education eligibility not determined. This appeared to have been the unintended negative consequence of an effort to reduce such terminations. The program implemented a series of sub-codes. Although it tried to be clear that it still considered any termination at age 3 to be negative if special education eligibility was not determined, there was an immediate decline in performance. A series of new efforts has since been implemented to improve transition performance.

## **Indiana**

Changes to race information appeared to be consistent with the change in demographics for Indiana. While the state did not conduct an in-depth analysis of the changes in exit codes, the initial review indicated that the changes had a direct correlation to the change in eligibility definition. Effective May, 1, 2006, the state increased the definition of developmental delay and omitted the category of eligibility by biological risk factor. Based on the change in definition, the state anticipated a decrease in children served. Therefore, it was anticipated that the number of children exiting the system would also decrease over time. The lead agency continued to monitor these changes and was in the process of contracting with a review team to conduct an independent review of the system.

The Indiana State Department of Health maintains state data on infant mortality. Based on these data, Indiana experienced a decline in the number of infant deaths over the past 10 years. Indiana's Part C program attributed the decline in the number of infant deaths within the state's Part C system to the state's overall trend of decline in infant mortality.

Indiana implemented new eligibility criteria in May of 2006. The previous eligibility categories were considered broad (15 percent delay in two or more areas of development or 20 percent delay in one area of development). The May 2006 criteria were changed legislatively and were redefined as moderate (20 percent delay in two or more areas of development or 25 percent delay in one area of development). Indiana's Part C program attributed the lower number of children exiting prior to age 3 to this eligibility change. The state now serves children with a greater degree of delay, who have needs that result in program participation up to age three.



## **Kentucky**

Race for 267 children whose ethnicity was not known was estimated using the known rate based on the other 2,883 children. Gender was erroneously reversed in the original submission and was revised.

## **Maryland**

The number of children who completed the IFSP prior to reaching maximum age increased by 162 or 13.17 percent in 2006. This increase was significant (more than 10 children or more than 10 percent) in eight jurisdictions. Maryland State Department of Education did not identify systemic reasons for this increase in those jurisdictions, but will continue to track these data and discuss significant changes with local programs.

The number of children who exited the Part C program without referrals decreased from 91 in 2005 to 41 in 2006. Nineteen of the 24 jurisdictions had no children exit without referral or significantly decreased the number who exited without referrals. This change was attributed to local monitoring in this area to ensure that linkages to community services were recommended when children were not moving on to Part B preschool programs.

In 2006, local staff reduced the number of children for whom the results of Part B eligibility determination were not reported from 390 in 2005 to 334 in 2006. This change was related to local efforts to improve the exchange of information about Part B eligibility determination between local Part C and Part B staff. Currently, local Part C staff obtain the results of Part B eligibility determination from Part B staff and enter the results into the Part C database. It is anticipated that Part B eligibility will be tracked through the Part B database and shared with Part C for Table 3 for the next reporting period. MSDE tracks changes in local data in this area and follows up with local programs to discuss significant changes as part of the monitoring process.

2006 data indicated an increase of 74 children whose parents withdrew from the program. This increase was attributed primarily to data reported by 10 jurisdictions. This increase appeared to be due primarily to a more transitory population of families served in five local jurisdictions located in and around the major urban areas in the state and in proximity to the District of Columbia. Another reason may be an increased number of referrals being made by local departments of social services without the knowledge of the family or referrals made by hospitals when children were very young and not yet demonstrating developmental delays. In these cases, families may not have been as motivated to continue to participate in the program, as they would have been if they referred themselves. MSDE tracks changes in local data from year to year to determine if there is an ongoing issue and follows up with local programs to discuss significant changes.

2006 data indicated an increase of 127 children in the unsuccessful contacts category. This increase was primarily attributable to data reported by 12 jurisdictions. The primary

reason reported by the local jurisdictions was families moving without contacting the local programs. Over 50 percent of the increase occurred in one large urban area. MSDE tracks changes in local data from year to year to determine if there is an ongoing issue and follows up with local programs to discuss significant changes.

### **Massachusetts**

The decrease in the percentages of children reported in the not eligible for Part B, exit with no referrals category was due to continued data verification measures taken to ensure documentation of completion of transition data. Focused monitoring efforts during fiscal years 2005, 2006 and 2007 included grading EI programs on the documentation of recommended outgoing referrals to the parents by program staff at the time of discharge. This, along with additional training and individual communications with programs during fiscal years 2006 and 2007 regarding the Commonwealth's focused monitoring indicators, increased the data quality of transition information.

Race/ethnicity was estimated for 817 children. Of the 450 children under 3 years of age at the time of exiting, 146 completed their IFSP, 39 moved out of state, 58 withdrew from services and 206 could not be successfully contacted. Of the 367 who were 3 years of age at the time of exiting, 295 were Part B eligible, 51 were not eligible for Part B and were referred to other programs and 17 were not eligible for Part B and exited with no referrals.

### **Michigan**

There were 89 children with a multi-ethnic ethnic code in the state data system. These were distributed proportionately according to the supplied methodology.

### **Missouri**

Decreases in the categories completion of IFSP prior to reaching maximum age; Part B eligible, exiting Part C; not eligible for Part B, exit with referrals; not eligible for Part B, exit with no referrals; total number of children and white (not Hispanic) children were attributed to a decreasing number of 2- to 3-year-olds in the Part C system from year to year as reported on the annual Dec. 1 child count, the increase in the number of children withdrawn from the program in 2005 and 2006, and the significant decrease in referrals for 2005. Fewer children exited due to these reasons because there was a smaller overall pool of children eligible to exit.

The reason for the increase in the number of children who moved out of state was unknown. The increase in the number of children withdrawn was likely caused by the February 2006 contracting change for 7 of the state's 10 System Points of Entry (SPOEs). The new SPOEs found that many inactive children had not been inactivated from the web system. The new SPOEs were directed to locate these children. Many were found to have been withdrawn from the program by the parents and were coded as such in the system. The increase in the number of Hispanic infants and toddlers who exited

was due to an increasing Hispanic population in the state, meaning that more Hispanic children were entering and exiting the program.

### **Nebraska**

There did not appear to be a specific reason for the decrease in the number of infants and toddlers completing their IFSPs prior to reaching maximum age (22 children, -31.43 percent). This may have been an anomaly, but the state will continue to monitor the data for any commonalities that may indicate a trend.

The increase in the number of infants and toddlers in the category moved out of state (11 children, 122.22 percent) may have been due to more accurate recording of when a child exited the program.

The decrease in the number of infants and toddlers withdrawn by a parent (44 children, -2.86 percent) may have been due in part to more accurate recoding of why a child exited the program. Withdrawal by parent in the past should have been recorded more specifically as moved out of state. The other possibility was that *CAPTA* referrals often seemed to have more families starting the program and then withdrawing later. In addition, withdrawal by parent may have been used more generically in the past.

### **Nevada**

There was a decrease in the number of children in the category completed an IFSP prior to reaching maximum age (32 children, -52.46 percent). The state discovered through data audits/data verification that the early intervention programs were incorrectly coding children exiting the system in this category. Technical assistance was provided to the early intervention programs, and ongoing quarterly data audits/data verification in this field continues to ensure correct coding.

There was an increase in the number of children who were found Part B eligible by 80 children or 15.5 percent. In analyzing these data, it was noted that there was an overall increase in the number of children who exited Part C during 2006-07 of 64 children or 5.41 percent. This increase to the total number of children exiting contributed to the increase in the children who were found Part B eligible. During 2006-07, Nevada developed and disseminated to all programs Transition Effective Practice Guidelines, which give guidance around timely transition planning and the development of appropriate transitions plans. Also during this time period, the Part C Data Manager developed data reports that enabled each program to run a report that alerted the supervisors of upcoming timelines for each service coordinator, such as a timely transition plan and the facilitation of the transition meeting. Each early intervention program has agreements with its local school districts, so the increase can also be attributed to Part B meeting eligibility requirements in a more timely manner. Technical assistance and training continues to be provided to all programs to assist them with the requirements of transition, including the timelines and the development of the plan and additionally the requirements for participation by the LEA in transition meetings.

There was an increase in the number of children who were withdrawn by a parent (39 children, 60.94 percent). Through data audits/data verification, the state discovered that the early intervention programs were incorrectly coding children exiting the system in the category of completion of IFSP prior to maximum age and that these children actually needed to be coded in the data system as withdrawn by parent. These two exit codes in the data system continue to be monitored on a quarterly basis for proper usage.

There was a decrease in the number of children with unsuccessful attempts to contact by 23 children or 14.2 percent. In analyzing the exiting data, there was also an increase in the number of children who exited as Part B eligible by 80 children; part of that increase was attributed to the early intervention program's success in retaining contact with children and families to the point of transition into the local education agency. Nevada continues to have a high transient rate, and programs lose contact; families not only move in and out of the state but frequently move within the state due to seasonal employment. The programs contact families only to find the phone disconnected, or staff show up for a scheduled home visit only to find the home empty. Many times these children end up coming back, and the early intervention programs have children whose record is opened and closed several times over the course of 3 years. In State Fiscal Year (SFY) 2007 (July 1, 2006, through June 30, 2007), Nevada's Part C office received more than 400 record reopen requests.

There was an increase in the number of Asian/Pacific Islander by 15 children or 28.3 percent who exited Part C. The state compared the number of children exiting Part C in 2006-07 to the 2006 Census population estimates ages birth through 2 and found that Nevada's percentage of population for Asian/Pacific Islander children was 6.31 percent. The percentage of Asian/Pacific Islander children who exited Part C was 5.44 percent or a difference of .87, so an increase in the number of Asian/Pacific Islander children exiting the program was appropriate.

There was a decrease in the number of black (not Hispanic) children, 17, or 12.98 percent, who exited Part C. The state compared the number of children exiting Part C in 2006-07 to the 2006 Census population estimates ages birth through 2 and found that Nevada's percentage of population for black (not Hispanic children) was 8.67 percent. The percentage of black (not Hispanic) children who exited Part C was 9.13 percent, for a difference of .46, a decrease in the number of black (not Hispanic) children exiting the program was appropriate.

### **New Hampshire**

New Hampshire Part C began collecting data using a new data system on April 16, 2007. The small number of children exiting the Part C program as reflected in this report was due to difficulties in downloading data from the previous data system and exiting children from ESS using the new data system and not due to a reduction of the actual number of children exiting the program.

## **New Jersey**

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the percentage differences found in the total number and percentage of infants and toddlers exiting. In addition, New Jersey experienced significant growth in the number of children receiving services over the past three years, ranging from 2.31 percent to 11.49 percent each year.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data was a two-year change, which contributed to the number and percentage differences found in the completion of IFSP prior to reaching maximum age category. In addition, changes in family cost participation resulted in a number of families choosing to exit the system. Some families exiting before their child reached age 3 identified that their child had made significant progress and was no longer in need of early intervention services.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the Part B eligible category. In addition, New Jersey attributed the change to the increase in growth and the high percentage of children nearing age 3.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the exit with no referrals category. In addition, New Jersey attributed this change to changing populations and parent choice.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the exit with Part B eligibility not determined category. In addition, New Jersey attributed this to improved follow-up, data collection and data reporting.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the moved out of state category. In addition, New Jersey attributed this to family choice and increasing cost of living and taxes.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that

New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the attempts to contact unsuccessful category. New Jersey attributed this to improved follow-up and data collection and reporting on changes to family information.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the number of Hispanic infants and toddlers who exited Part C. In addition, New Jersey attributed this increase to an increase in the number of children served for the fiscal year. This increase followed the trend of populations served.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the number of white (not Hispanic) infants and toddlers exiting Part C. New Jersey attributed this increase to an increase in the number of children served.

In FFY 2005, New Jersey reported exiting on FFY 2004 data and, as a result of improved timely and accurate data collection, also reported FFY 2006 exiting data. This means that New Jersey's data were a two-year change, which contributed to the number and percentage differences found in the total number of children exiting Part C. New Jersey attributed this increase to an increase in the number of children served.

### **New Mexico**

The New Mexico Family Infant Toddler Program did not track the exit category eligible for Part B, continuing in Part C during this reporting period.

There were significant increases in the numbers of children exiting the *IDEA* Part C program in New Mexico due to families leaving the state, which was presumably due to families leaving New Mexico to look for employment elsewhere. It was not known why there was an increase in the number of infants and toddlers in the withdrawal by parent category and attempts to contact unsuccessful category. The state did not know why there were significant differences in the racial and ethnic categories for children exiting the program.

### **New York**

The addition by OSEP of a new allowable category for exiting reason in the 2006 reports resulted in decreases from 2005 to 2006 in the previously defined categories.

The general instructions for Table 3 required that the 5,120 children turning age 3 prior to the reporting period (July 1, 2006, to June 30, 2007) be excluded from the report. In reports submitted in previous years, children who remained in the New York State Early

Intervention Program beyond their third birthday were reported in Table 1 and were not reported in Table 3. The instructions for Table 3 required that children who turned 3 during the reporting period, yet continued to receive early intervention services, be reported in Table 3. The New York State Early Intervention Program requires children to be determined eligible for Part B services in order to receive Part C services beyond their third birthdays. All children must be evaluated for Part B eligibility by age 3. If eligible, an IEP is developed with a start date for Part B preschool services. The parent decides when the child will transition to Part B and, depending on the child's birth date, the child can stay in EI with an IFSP until Jan. 2 (for children born Sept. 1-Dec. 31, or until Sept. 1 (for children born Jan. 1-Aug. 31). Based on the addition by OSEP/Westat of a new category, Part B eligible, continuing in Part C, on this table, these children (n=5,745) were counted separately in this category and were no longer included in Part B eligible, Exiting Part C, as they had been in prior years.

A total of 8,361 children with unknown race/ethnicity were distributed by apportioning the unknown children within each county in direct proportion to the distribution of children in that county with known race/ethnicity or, for New York City, apportioning the unknown race/ethnicity using the results of a match of New York City EI eligible with the race/ethnicity reported by their birth mother from birth certificate records. A total of 45 children with unknown gender were distributed by apportioning them in direct proportion to the distribution of children with known gender.

In exiting reports prior to program year 2003-04, children moving out of county were assigned to the exit category moved out of state. For 2006-07, a total of 980 children fell into this category. In an effort to determine their true program status or exit category, these children were matched against both enrolled children and children closed during the program year. Matching criteria included the child's name, sex, date of birth, Social Security Number, Medicaid ID and mother's maiden name. Based on the results of this match, 412 children were found to be enrolled in the early intervention program (EIP) in another county and were removed from the exit report; 527 children under 3 years of age could not be located (unable to be matched) and were categorized as attempts to contact unsuccessful and 41 children over 3 years of age unable to be matched were placed in the Part B eligibility not determined category. There were 24 children remaining who exited the EIP during the year with a New York State exit reason that did not explicitly correspond to a federal exit category and whose status could not be resolved by any of the previous steps. Based on additional guidance from Westat, these children were assigned to an exit category based on their age at time of program exit. Five children over age 3 were placed in the category Part B eligibility not determined, and 19 children under age 3 were placed in the attempts to contact unsuccessful category.

### **North Carolina**

The number of children enrolled in Part C in North Carolina increased significantly in the past three years. Therefore the number of children exiting also increased. North Carolina implemented the categories not eligible for Part B, exit with no referrals; not

eligible for Part B, exit to other programs; and completion of IFSP prior to third birthday in June 2006 to correspond with the federal reporting categories.

Previously, not eligible for Part B, exit to other programs was the default category for those who exited but were not eligible for Part B. This category decreased as reporting in the not eligible for Part B, exit with no referrals category increased.

Exit reason crosswalk for North Carolina:

Completion of IFSP prior to reaching maximum age for Part C was the sum of the state categories does not meet eligibility criteria for ITP, which means that an enrolled child no longer met eligibility due to developmental improvement, and completed IFSP prior to third birthday.

Part B eligible was the sum of the state categories aged out; entered preschool program (Part B) and aged out; eligible for preschool, family refused.

Not eligible for Part B, exit to other programs was the sum of aged out; not eligible for preschool program (Part B) and aged out; not eligible for Part B -referred to other programs.

Not eligible for Part B, exit with no referrals was the state category aged out; not eligible for Part B-exit with no referrals.

Part B eligibility not determined was the sum of state categories aged out; unknown eligibility for preschool program and the number of children who reached their third birthday who either did not have a closure report or were in the state exit category Other.

Deceased was the state category child expired.

Moved out of state was the state category moved, address unknown or out-of-state.

Withdrawal by parent (or guardian) was the sum of the state categories parent ended participation, no longer wants services, parent ended participation, no longer needs services, parent ended participation, dissatisfied with services, and parent discontinued.

Attempts to contact unsuccessful was the sum of the state categories lost to follow-up and unable to make contact and the number of children who did not reach their third birthday who were in the state exit category Other. Part of the increase in the attempts to contact unsuccessful is the inclusion of children who had not reached their third birthday and had an exit reason of other, which were previously included in Part B eligibility not determined.



## **Northern Marianas**

The number of children who exited increased by more than 10 from last report period due to the increase in the state's child count.

## **Ohio**

Part B eligible, continuing in Part C is not an exiting option in Ohio.

There were five children for whom sex was not collected in the data system; therefore these five unknowns were redistributed proportionally.

There were 693 children for whom race was not collected in the data system; therefore, these 693 unknown races were redistributed proportionally.

## **Oregon**

Oregon's seamless system does not allow the option of continuing in Part C.

Late in 2006-07, Oregon transitioned to a new data collection system/process for collecting child-level exit data. This process led to changes in the trend data that cannot be explained at this time (e.g., they may be the start of a new trend, they may be an anomaly that will return to normal in the next reporting cycle, or the new system may more accurately reflect the status of Part C exits in Oregon). Oregon implemented data collection and reporting training on the new collection system during the 2007-08 school year. There were also changes to the system in 2007-08 that are currently being implemented to improve the data collection and reporting process.

The increase in the total number of children who completed their IFSP prior to reaching maximum age (90 children, 59.21 percent) could be partially explained by Oregon's increased efforts statewide to identify more children in need of EI services at younger ages. This resulted in more children being identified as eligible for services at younger ages and with less severe disabilities. These students were more likely to complete their IFSPs prior to age 3. [See also Oregon's "General" note on Part C Exit.]

The decrease in the total number of children found Part B eligible (275 children, -24.64 percent) was partially explained by an overall decrease in the total number of EI children exiting Part C services and in the corresponding increase in the number of EI children completing their IFSP prior to the maximum age. [See also Oregon's "General" note on Part C Exit.]

The decrease in the total number of children exiting to another program (11 children, -84.62 percent) was partially explained by the overall decrease in the total number of EI children exiting Part C services. [See also Oregon's "General" note on Part C Exit.]

The decrease in the total number of children exiting with no referral (42 children, -60 percent) was partially explained by the statewide emphasis on referring children to Part B and/or other programs at the time of exit. [See also Oregon's "General" note on Part C Exit.]

There was an increase in the total number of children who moved out of state (30 children, 25.42 percent). [See Oregon's "General" note on Part C Exit.]

There was an increase in the total number of children who were withdrawn by a parent (39 children, 29.32 percent). [See Oregon's "General" note on Part C Exit.]

There was an increase of 20 children (21.05 percent) in the category attempts to contact unsuccessful. [See Oregon's "General" note on Part C Exit.]

There was an increase of 11 Asian/Pacific Islander children (26.19 percent). There was a corresponding increase of Asian children who were 2 years old on Dec. 1, 2006. [See also Oregon's "General" note on Part C Exit.]

There was a decrease of 11 black (not Hispanic) children (-16.92 percent). There was a corresponding decrease of black (not Hispanic) children who were 2 years old on Dec. 1, 2006. [See also Oregon's "General" note on Part C Exit.]

There was a decrease of 170 white (not Hispanic) children (-13.56 percent). There was a corresponding decrease of white (not Hispanic) children who were 2 years old on Dec. 1, 2006. [See also Oregon's "General" note on Part C Exit.]

### **Puerto Rico**

There was an increase in the total number of children who exited Part C (4,068) when compared with last year (3,634). This increase could be due to the greater number of children served during fiscal year 2006. In the 2006 child count, it was observed that 1,148 exits were categorized as Part B eligibility not determined, 147 fewer exits than reported in 2005. This reduction was due to the Pediatric Centers' efforts to know the Part B determination for children previously enrolled in the Early Intervention System.

Some Pediatric Centers and Part B coordinators exchanged the Part B eligibility determination. The state also provided orientations to families about the importance of registering for Part B in a timely manner.

There was an increase in the number of children reported in the attempts to contact unsuccessful category (from 197 in 2005 to 269 in 2006). Pediatric Centers reported that despite their efforts, the number of families that move out of their houses without informing their service coordinators and providers, the number of families that changed their phone numbers and the number of families who were not interested in the continuation of early intervention services were still large.

Service coordinators adopted new strategies to reduce the number of unsuccessful contacts, such as setting up new appointments by sending notifications to those families that were absent without a given reason and conducting home and job visits when the families were not located.

### **Rhode Island**

The Rhode Island Early Intervention Care Coordination System (RIEICCS) was implemented in August of 2006. The new Web-based system uses only the five federal categories for race. Providers are allowed to select more than one race. The system compiles the actual race, and the numbers are rounded when entered into the spreadsheet. Data that were imported included some of the old categories. RIEICCS placed old categories into white (not Hispanic). State staff verified the RIEICCS numbers and proportionally distributed among the categories in Table 3. The percentages of the categories in Table 3 were determined, and the 7.52 percent (120 infants/toddlers) were proportionally distributed among the categories in Table 3.

Enrollment increased in previous years therefore increasing discharges. Most categories showed a 10 percent change (or more) from 2005 as expected. The data were extracted from the statewide RIEICC system. These data may change due to future edits, updates and corrections.

### **South Dakota**

On Table 3, five American Indians and five white (not Hispanic) infants and toddlers were listed in the Part B eligibility not determined category because the parents declined services.

On Table 3, 10 male and female infants and toddlers were listed in the Part B eligibility not determined category because the parents declined services.

### **Tennessee**

The increase in the number of Hispanic infants and toddlers exiting was examined by the nine Tennessee Early Intervention System (TEIS) Districts. Data revealed that the significant increase of children exiting occurred in the Memphis Delta District. Over the past two years, Memphis Delta District has seen an increase in the number of Hispanic children served due to targeted collaborative efforts in public awareness and child find activities.

The decrease in the number of Asian infants and toddlers exiting was examined by the nine Tennessee Early Intervention System (TEIS) Districts. Data did not reveal any significant changes by districts. The district with the greatest number/percentage decrease was South Central District. The data manager believed this change, although not considered a significant change, was due to economic changes in job availability in this

region of the state relative to automobile manufacturing. This reason followed the pattern of change in Part B for the 2005-06 school year.

The decrease in the number of infants and toddlers found eligible for Part B was examined by the nine Tennessee Early Intervention System (TEIS) Districts. Data revealed four districts with a significant change for a decrease in children exiting at age 3 who were not determined to be Part B eligible. Specific information was accessed from the South Central District, which experienced the greatest decrease. In ensuring clean data entry in this district office, personnel did not record a child as being determined Part B eligible unless they had specific information informing them so from either the LEA or parent. The process of verification of information has been stressed at the state level through 618 child count training. The Data Manager believed with good confidence that this explanation could be applied to the other three districts, which also revealed significant change.

The decrease in the number of infants and toddlers found not eligible for Part B, exit with referrals to other programs was examined by the nine Tennessee Early Intervention System (TEIS) Districts. Data revealed two districts with significant change for a decrease in children not eligible for Part B, with exit referrals to other programs. Specific information was accessed from the First Tennessee District, which had the greatest decrease. Tennessee in the past few years emphasized the establishment of programs for 4-year-olds (state-funded, lottery preschools), making options for children at age 3 (Early Head Start) become more limited. A specific reason for significant change could not be ascertained in the one additional district where a decrease occurred.

The decrease in the number of infants and toddlers found not eligible for Part B, exit with no referrals was examined by the nine Tennessee Early Intervention System (TEIS) Districts. Data revealed an overall statewide decrease in children not eligible for Part B, with no referrals, with no significant change (numbers/percentage) noted for any particular district. When comparing this exit reason with other exit reasons, no particular patterns were found.

The increase in the number of infants and toddlers withdrawn by a parent or guardian was due to a significant change in two districts. Specific information was accessed from one of the two districts; however, there was no definitive reason for the increase. When reviewing complaint data in reference to this reason, there were no findings as a possible cause for an increase.

The decrease in the number of infants and toddlers in the attempts to contact unsuccessful category was examined by the nine Tennessee Early Intervention System (TEIS) Districts. Data revealed four districts with a significant change. No specific reason was ascertained for this decrease.

## **Texas**

Most of the year-to-year changes reflected growth in the number of children served, and corresponding growth in the number of children who exited the program. The increase in the number of children exiting to other programs and the related decrease in the number of children exiting with no referral was the result of ongoing transition efforts to connect families to appropriate services upon dismissal from Part C services.

The increase in the number of children whose Part B eligibility was not determined was difficult to attribute to any one reason. Though the number was higher than the year before, the percentage of the total was within 1 percentage point of previous years.

The increase in the number of families who moved out of state and those who could not be contacted was the result of a larger number of families who were mobile and transient. Implementation of the *Child Abuse Prevention and Treatment Act (CAPTA)* in the later half of the year resulted in Texas serving more children involved with Child Protective Services, which also contributed to this increase. The greater number of children exiting who were Asian was the result of population growth in urban areas.

## **Utah**

Data were collected and compiled using BTOTS. Each contracting early intervention provider verified the BTOTS data were complete and accurate. BTOTS data included 17 infants and toddlers exiting during the reporting period with ethnicity other. Those data were included in the exit reason totals but not distributed across the racial categories.

The number of children exiting Part C Part B eligibility undetermined, other decreased in 2006-07 from 2005-06 because the Baby Watch Early Intervention Data Manager and Quality Assurance Manager collaborated with the Part B Preschool Coordinator to ensure accuracy in exit data reporting by program.

## **Vermont**

The number of infants and toddlers who completed their IFSP prior to reaching maximum age increased in 2006 due to a tightened focus on ongoing assessment before and at age 3.

The decrease in the number of infants and toddlers who exited to other programs were all due to parental decision.

The increase in the number of infants and toddlers who moved out of state was again due to parental/familial decision.

Twelve children were not eligible for Part B and exited without a referral to another program. Seven of these children's development was at an appropriate level.

**Washington**

Washington reported the following infants and toddlers by race/ethnicity in Table 3:

Category	Multi-racial	Not provided	Total
Completion of IFSP prior to reaching maximum age	33	12	45
Part B eligible	180	80	260
Not eligible for Part B, exit to other programs	28	11	39
Not eligible for Part B, exit with no referrals	10	18	28
Part B eligibility not determined	28	25	53
Deceased	x	x	x
Moved out of state	16	12	28
Withdrawal by parent (or guardian)	23	7	30
Attempts to contact unsuccessful	18	19	37
Transition data by multi-racial and not provided	522		

Reason for Exiting	Hispanic		Difference		
	2006	2007	Number	Percent	Flag
Completion of IFSP prior to reaching maximum age	40	70	30	75	Yes
Not Part B eligible, exit with/referrals to other programs	47	59	12	26	Yes

**Justification**

Increased child find activities, including increased work with the Children's Administration, along with technical assistance and training to increase quality early intervention services, assisted in these positive outcomes.

Reason for Exiting	White (not Hispanic)		Difference		
	2006	2007	Number	Percent	Flag
Completion of IFSP prior to reaching maximum age	253	313	60	24	Yes
Not eligible for Part B, exit w/no referrals	136	156	20	15	Yes
Withdrawal by parent/guardian	125	110	-15	-12	Yes

**Justification**

Increased child find activities, including increased work with the Children's Administration, along with technical assistance and training to increase quality early intervention services, assisted in these positive outcomes.

Transition data related to exits was an area in which ITEIP provided additional technical assistance and training. This change most likely reflected improved data entries. ITEIP will track this situation for additional analysis.

#### Report on Infants and Toddlers Exiting Part C Programs—by Gender

The prior gender report was based on our Dec. 1, 2006, count and reported for birth through 2 and ages 2 through 3 receiving services. The 2007 report was for all infants and toddlers ages birth through 3 exiting. Therefore, the data could not be compared.

#### **West Virginia**

Of the 71 children who exited in the category Not Eligible for Part B, exit without referrals, 48 were listed as the parent did not consent to transition planning.

Of the 348 children who exited in the category Part B eligibility not determined, 138 were listed as family requested that the referral not be made, and 189 were listed as referral made, awaiting Part B determination.

Of the 343 children who exited in the category withdrawal by parent or guardian, 329 were listed as parent declined further IFSP services, and 7 were listed as parent dissatisfied with IFSP services.

The state attributed its increased exit count to an increase in child count. With more children enrolled each year, more children were expected to exit.

The state attributed its increased numbers of children exiting in the category completion of IFSP prior to maximum age to better training of its service coordinators in the definition of exit reasons. In 2005, 12 percent of the state's children exited with this reason; in 2006, 16 percent exited with this reason. There was a corresponding 3 percent drop in children exiting in the category withdrawal by parent. The state surmised that, previously, service coordinators exited children who had reached developmentally appropriate levels in the category withdrawal by parent rather than the correct category completed IFSP prior to maximum age.

The state attributed its increased number of children exiting in the categories Part B eligible, moved out of state and attempts to contact unsuccessful to the increased child count. The percentages of children exiting in these categories remained fairly stable.

The state attributed its increase in number of children exiting in the category exit to other program to its service coordinators doing a better job in transitioning children, including linking families to other programs when a child was not eligible for Part B. Over the past three years, the state hired four Technical Assistance Coordinators to work regionally with service coordinators, and a big part of their job is to train and mentor service coordinators in transition.

The state attributed its increase in the Hispanic population exiting to the migratory nature of its Hispanic population. The state's Hispanic population tends to be concentrated in the Eastern Panhandle of the state and are often migrant workers, which means they exit more than other families. A total of 28 Hispanic children exited in the categories moved out of state, attempts to contact unsuccessful and withdrawn by parent (or guardian).

The state attributed its increase in the number of white (not Hispanic) children exiting to its increased child count; the percentage remained stable.

### **Wisconsin**

The number of children who exited the program because they completed their IFSP prior to reaching maximum age increased. No new system process or policy was established that would have caused this result. The state attributed this change to several counties reporting a greater focus on data entry. Several counties reviewed their process of keeping files open until a child turned 3 versus exiting the children who met their IFSP goals prior to age 3.

The number of children who exited to other programs, exited with no referral and exited with Part B eligibility not determined decreased. The state attributed these changes to the emphasis placed on transition of services from Part C to Part B statewide. In a joint effort between the Department of Health and Family Services and the Department of Public Instruction, Wisconsin emphasized and facilitated memorandums of understandings between the Part C programs and Part B programs. This open dialogue created a greater awareness of opportunities for children exiting the Part C program and improved timely transitions to Part B. It should be noted that the largest urban county in Wisconsin worked diligently with local school districts to form agreements regarding transition services and improvement of timely transitions influencing statewide data.

The number of children who exited because they moved out of Wisconsin decreased. Annually between 2.5 percent and 3 percent of families exit the program due to moving out of state. In 2004, the percentage of children who exited the program because they moved out of state was 2.6 percent; in 2005 the percentage was 2.81 percent; in 2006 2.95 percent, in 2007 2.80 percent. The fluctuation appeared consistent with normal trends. There was not a particular county or region of the state that experienced a higher rate than another. The state will continue to monitor.

The number of children who exited the program because attempts to contact were unsuccessful decreased. This decrease was a reflection of improved intake processes in the largest urban county in Wisconsin. This County implemented processes to follow families who are mobile and to reduce the amount of time from referral to contact of a family.

The number of children who were Asian or Pacific Islanders exiting the program decreased. Between 2005 and 2006, the overall number of children exiting the program decreased. Proportionately, the number of children who were Asian/Pacific Islander



remained the same. In 2005 2.2 percent of the children exiting the program were Asian/Pacific Islander. In 2006 2.0 percent of the children exiting the program were Asian/Pacific Islander.

The number of children who were black (not Hispanic) exiting the program decreased. The state could not attribute the change to any one county or region in the state. The state will monitor the situation to see if this is a trend or a one-year change.

The number of children who were Hispanic exiting the program decreased. Between 2005 and 2006, the overall number of children exiting the program decreased. Proportionately, the number of children who were Hispanic remained the same. In 2005, 10.9 percent of the children exiting the program were Hispanic. In 2006, 10.2 percent of the children exiting the program were Hispanic.

This was Wisconsin's second *Report on Infants and Toddlers Exiting Part C Programs*. The reporting period of this report was July 1, 2006, through June 30, 2007. With the submission of this report, Wisconsin Part C changed the reporting period from December to December to July to June for this and subsequent annual reports. This was the official request from Wisconsin Part C to reset the Wisconsin Part C reporting timeframe for subsequent years.

## **Tables 9-1 Through 9-3, IDEA Part C Dispute Resolution, 2006-07**

### **California**

In 2006-07, California had a unique complaint experience (in California, complaints cover procedural issues) where one parent chose to file five separate complaints—one for each issue, instead of the typical practice of filing one complaint listing all issues the family wishes to have investigated. Had this event not occurred, the 2006-07 number of complaints would have been exactly the same as last year's (eight) despite California's caseload increase being the highest in the nation. Similarly, even though California served more than 10 percent more children, the number of filings for due process and mediation (all filings are automatically for both) actually decreased by about 14 percent. The contractor to the Department of Education advised California that cases settled in mediation should not be counted as cases filed for due process and that cases settled informally (resolution by neither formal process) and withdrawn should be counted only under resolved without a hearing and not be included in mediation data at all. Cases where part of the issues were resolved in mediation and part via hearing were counted as filings and decisions in both mediation and due process. Although California maintains logs and monitors all cases, including those filed in the prior year settled in the following year, the data instructions for dispute resolution require those cases to be excluded from the data reported here and used in the APR. These data were reported in accordance with the instructions dated Aug. 2006 as advised by the contractor to the Department of Education; later instructions were not yet approved by OMB and were expected to be used first with the November 2008 reporting.

The most frequent “good cause” cited by the Administrative Law Judges for time extension was relevant evidence, usually additional assessment or evaluation information germane to a dispute regarding appropriate range and/or intensity of IFSP services that would not be available for parental review five days in advance of the original scheduled hearing date; of the eight cases with time extensions, five were for four to six days (four included days spanning three-day weekends); one other involved a significant family member health episode and more than six inches of documents filed as evidence (lasted 1 month); and one with voluminous translation requirements (2 weeks). The eighth one was still under investigation. California attributed these low rates for filings of complaints and for mediation and due process to the organizational culture of resolving issues at the lowest level possible and as soon as possible. Such cultural values were reflected in the EI Program's (regional centers) policies and practices and also contributed to the majority of cases filed for mediation and/or due process being resolved informally.

### **Delaware**

The early intervention program in Delaware did not receive any written complaints or requests for mediation or hearings during the period of July 1, 2006, through June 30, 2007.

## **Hawaii**

There were no families in need of dispute resolution in 2006.

## **Indiana**

Indiana did not have any written, signed complaints; mediation requests; hearing requests or expedited hearing requests during the reporting period.

## **Kentucky**

Race for 267 children whose ethnicity was not known was estimated using the known rate based on the other 2,883 children.

## **Louisiana**

Twenty complaints were reported as discrepancies between provider billing and actual service delivery dates, claims of services not being delivered per the IFSP, reports of unprofessional conduct by providers and disputes in monitoring results of a provider agency.

## **New Jersey**

New Jersey had one mediation withdrawn and saw this as the logical place to note the status of this mediation.

## **New Mexico**

The New Mexico Part C program did not receive any formal requests for mediation or due process hearings for the 200607 period.

## **South Dakota**

South Dakota has a history of limited due process hearings in Part B and none in Part C. This is due to a strong commitment to resolution of issues and parent concerns before formal dispute resolution is necessary. The Part C state staff and service coordinators collaborate closely to make sure families understand their parent rights and to resolve issues that arise in a timely manner, and families may at any time request formal dispute resolution.

## **Texas**

The reporting period WAS for Texas' state fiscal year, Sept. 2006 through Aug. 2006.

## **Vermont**

Vermont did not have anything to report in categories A-D on page 1.

## **Washington**

This reporting response was not logical. All the state's other data were from Oct. 1 through Sept. 30 each year, as it went with the federal contract cycle.

Data reporting needs to stay consistent. The state submitted both periods of time this round, but requested a written response as to why this would be a different timeline from the rest of its data.