

## Subpart F — Additional Services for Children with Disabilities

### §1302.60 Full participation in program services and activities.

Head Start Performance Standard Number	Who is Responsible	Who Implements	Timelines or Ongoing	Form Name
1302.60	D/MH Coord.	Site Sup., Teachers, D/MH Coord.	Ongoing	

**A program must ensure enrolled children with disabilities, including but not limited to those who are eligible for services under IDEA, and their families receive all applicable program services delivered in the least restrictive possible environment and that they fully participate in all program activities.**

(A plan was originally written to reflect the Final Rule on Head Start Services for Children with Disabilities, 45-CFR-Part 1308 as published in the Federal Register on January 21, 1993. This rule became effective February 21, 1993.)

#### DISABILITIES SERVICES OBJECTIVES

The objectives of Subpart F are as follows:

1. To ensure that all children are developmentally screened within the designated timeline in order that needed services may be provided in a timely manner.
2. To have procedures for making referrals to determine the need for special education or related services.
3. To be participants in the development of the Individual Education Plan/Individual Family Service Plan (IEP or IFSP) for each child who is determined to have a disability and to provide appropriate special services, including strategies for transitions to and from other programs.
4. To provide comprehensive services to children with disabilities and their families which meet program standards and assure that all components of Head Start & Early Head Start are involved.
5. To make provisions for children with disabilities to be included in the full range of activities ordinarily provided to all Head Start/Early Head Start children and to provide modifications as necessary to meet their special needs.
6. To promote cooperation, coordination, and collaboration between Head Start, the local education agencies, and EHS and the CFCs/Child and Family Connections responsible for providing services under the Individuals with Disabilities Education Act (IDEA) for assuring a free and appropriate public education for children with disabilities in their communities.

The Disabilities Service Plan is written to assure that all involved parties have an outline of procedures to follow in order to provide services to a minimum of ten percent of our enrollment to children with disabilities and to conform to responsibilities under the IDEA.

PACT Head Start will provide a free and appropriate public education to children found to be in need of special education or related services mandated by the state in cooperation with the Local Education Agency or CFC.

Therefore, all Head Start & Early Head Start services, including nutrition, health, social services, mental health, parent involvement, education and safety provisions will be integrated into each child’s individualized program.

The Disabilities/Mental Health Services Coordinator will update the Disabilities Plan/Subpart F annually, (usually in the Spring prior to the next program year) to comply with Head Start regulations, public laws, and other relevant changes. Evaluation of the impact of each major area will be considered when updating the plan.

**§1302.61 Additional services for children.**

Head Start Performance Standard Number	Who is Responsible	Who Implements	Timelines or Ongoing	Form Name
1302.61 (a)	D/MH Coord.	Site Sup., Teachers, D/MH Coord.	Ongoing	Family Conference Report Family Support Plan

**(a) Additional services for children with disabilities. Programs must ensure the individualized needs of children with disabilities, including but not limited to those eligible for services under IDEA, are being met and all children have access to and can fully participate in the full range of activities and services. Programs must provide any necessary modifications to the environment, multiple and varied formats for instruction, and individualized accommodations and supports as necessary to support the full participation of children with disabilities. Programs must ensure all individuals with disabilities are protected from discrimination under and provided with all services and program modifications required by section 504 of the Rehabilitation Act (29 U.S.C. 794), the Americans with Disabilities Act (42 U.S.C. 12101et seq.), and their implementing regulations.**

To ensure that each child receives a full range of services, designation of services and who will provide them is identified on the IEP/IFSP, the *TS Gold Family Conference Report, the Family Support Plan* if applicable, and/or within each child’s disabilities services file and in Child Plus. Such services that could be identified and included are special education, audiological services, physical therapy, occupational therapy, speech/language services, psychological or mental health services, transition services, assistive technology, special equipment and materials, nutrition services, one-on-one assistance, etc. PACT will endeavor to avoid undue attention to children with disabilities.

Staff receive training in identification of, and for working with children with special needs and their parents, and in coordinating relevant referral resources. Training is received during New Staff Training, ongoing at Staff Meetings, and individually as needed.

When a child has a condition which might limit his ability to participate, the Disabilities/Mental Health Services Coordinator is notified and will locate additional services or equipment if needed to permit the child to participate to the maximum extent feasible. The Head Start /EHS program is designed to meet individual differences and needs of participating children and the needs of disabled children. Identification of special needs is done through developmental and speech screenings, medical screenings, and assessment tools. Children in Head Start and Early Head Start can also be enrolled in Special Education Programs, or in Early Intervention Programs.

In accordance with ADA (Americans with Disabilities Act) and section 504 of the 1993 Rehabilitation Act, PACT cannot and does not discriminate on the basis of a disability and ensures accessibility to all program children and families. Currently, all Center-based sites are accessible. In the event that a Socialization Site is not accessible to

an individual, an alternate site will be temporarily located to accommodate him/her. All physical barriers will be removed when economically feasible. Teachers, Site Supervisors, or the Education Coordinators will notify the Disabilities/Mental Health Services Coordinator/Ex. Director as soon as a need for a change in facilities becomes evident. Children with disabilities will receive a full range of activities with provisions and modifications made on an individual basis. The Family Support Plan team, or the Disabilities/Mental Health Services Coordinator with input from the Director and/or the Mental Health Consultant if needed, will arrange for such provisions and modifications by accessing necessary personnel or agencies. Transportation may also be arranged on an as needed basis by contracting with a private individual or agency.

To increase staff knowledge and comfort concerning disabilities, workshops and trainings are provided as can be scheduled. Topics covered in the past have been Physical Therapy/Occupational Therapy, Speech/Language, Working with Parents of Children with Special Needs, Participating in the IEP Meeting, etc. The Disabilities/Mental Health Services Coordinator, along with the management staff, will continue to provide professional training throughout the program year, and to notify staff of upcoming training in the area

Comprehensive information is kept on children suspected of or diagnosed with disabilities under the Disabilities tab of the Child Plus program. Included in each suspected or diagnosed child's entries are the Disabilities/Mental Health Services Coordinator's correspondence with teachers and LEA's/CFC's, records of mailing and receipt of releases and referrals, relevant facts provided by parents, teachers, and other providers. Also, in Child Plus, changes and updates are entered. Each PACT Child's IEPs/IFSP, FSPs (Family Support Plans) are kept in Child Plus (or a paper file) along with Progress Reports and updates from teachers and providers and other related documents with information on goal setting and achievement. The Disabilities/MH Coord. will be informed via phone conversations or e-mail correspondence started by staff as soon as she/he is aware of any deficit areas on the child's screening or when the teacher makes observations of concern. Teachers will inform the D/MH Coord of parent contacts such as when evaluations are recommended, evaluation dates, staffing dates, parent concerns, and all support given to the family concerning the suspected or diagnosed special need. (This includes borderline deficits, social development, and self-help if the Teacher, Supervisor, and Disabilities/Mental Health Services Coordinator have agreed it is a concern.). Provider contacts will be made as needed; but more often depending on the status of the need. Teachers are to be discussing evaluation dates, staffing dates, achievements, concerns and successful behavioral techniques. Teachers call or e-mail the Disabilities/Mental Health Services Coordinator with more urgent information (such as evaluation and Staffing dates) as soon as possible.

A copy of the child's *DIAL-4 Screening & Parent Questionnaire*, the *ASQ screening & ASQ-SE* are kept in the child's file, along with the original Authorization of Release(s) of Information, copies of the LEA's IEP, (or the CFC's IFSP), MDC (multi-disciplinary conference) report, (also known as the EDC; Eligibility Determination Conference), test findings, the *PACT Family Support Plan* if applicable, doctor's reports, behavioral screenings, plans and follow-up, Mental Health Consultant reports and recommendations if applicable, and any other relevant reports or documentation. To ensure confidentiality, all disabilities files are kept in locked drawers and accessible only to the Disabilities/Mental Health Services Coordinator, Mental Health Consultant, and Director if necessary. PACT teachers receive a copy of the IEP/IFSP goals and any necessary information to facilitate their planning and goals setting. Copies of doctor reports, etc. are not forwarded to teachers, but teachers are offered an opportunity to review them. A time will be set between the teacher and Disabilities/Mental Health Services Coordinator so that the teacher may review all relevant information.

Guides for including children with disabilities in regular group activities and other resources can be requested resources via the Disabilities/Mental Health Services Coordinator. Staff and parents can request by sending the Disabilities/Mental Health Services Coordinator a memo or by phoning.

Ongoing training is provided to staff, volunteers, and parents throughout the year addressing behavior problems and management, language development, motor development, recognizing delays and needs, etc. Parents are welcome to attend specialized training at staff meetings. Individual training is provided to staff and parents by the Mental Health Consultant as needed and following Mental Health Observations. (See the Early Childhood Devel. & Health Services section.) The Mental Health Consultant is also available to review special needs children files, to observe children, to make recommendations for enhancement or addition to services, to consult with staff and parents, and to participate in the child's *Family Support Plan* when needed. Teachers and parents are notified of workshops that may serve their particular need. The Disabilities/Mental Health Services Coordinator attends Regional and National Conferences, and other workshops as the budget and time allows. Joint training between agencies is planned and provided when possible. The Disabilities/Mental Health Services Coordinator also keeps a file of resources that can provide technical training.

Teachers accompany parents when possible to IEP/IFSP Staffings to provide support and to help interpret special education/disabilities terminology. Teachers also offer transportation to families for the evaluation and for the staffing when available. Literature is available from the Disabilities/Mental Health Services Coordinator for teachers to distribute to families and to help them explain procedures, etc. Should it be needed, PACT will try to locate an interpreter for the family and will make efforts to be certain the *IEP/IFSP* process is understood by the family. If the parent(s) is unable to attend the scheduled staffing, the teacher or Family Advocate will meet in person with them as soon as possible after the meeting to review the *IEP/IFSP*. Parents are encouraged to participate and give input into all of the staffing activities.

Head Start Performance Standard Number	Who is Responsible	Who Implements	Timelines or Ongoing	Form Name
1302.61 (b)	D/MH Coord.	Site Sup., Teachers, D/MH Coord.	Ongoing	

**(b) Services during IDEA eligibility determination. While the local agency responsible for implementing IDEA determines a child's eligibility, a program must provide individualized services and supports, to the maximum extent possible, to meet the child's needs. Such additional supports may be available through a child's health insurance or it may be appropriate or required to provide the needed services and supports under section 504 of the Rehabilitation Act if the child satisfies the definition of disability in section 705(9)(b) of the Rehabilitation Act. When such supports are not available through alternate means, pending the evaluation results and eligibility determination, a program must individualize program services based on available information such as parent input and child observation and assessment data and may use program funds for these purposes.**

PACT staff are aware of entities other than the LEAs which will take referrals and provide services. Staff are able to refer parents to these providers to be evaluated and have services provided, either along with what the LEA/CFC provides or apart from the LEA/CFC. An example of entities PACT refers to is McDonough District Hospital, Passavant Hospital, WIU Speech & Language/Hearing Clinic, Quincy Medical Group, Easter Seals, etc.

To meet all children's needs, Head Start will consider a variety of options. Allowing Physical Therapists, Occupational Therapists and Speech/Language Therapists (or others) to administer therapies at our facility is one way. Evaluators have been able to observe, screen and complete evaluations at our facilities. Exchange and

sharing of special equipment and materials has been done with the Special Education Co-ops and local rehabilitation providers. Extra staff, such as One-on-One Aides, have been hired and other special providers can be contacted. PACT remains flexible when planning to meet the needs of all children. Joint placement is always considered if to the benefit of the child.

Occasionally, when a One-on-One (or Special Services Aide) is needed per individual child. Supervision of that person is primarily the Site Supervisor's responsibility, with support of the Disabilities/Mental Health Services Coordinator and the Education Coordinator. Training is provided by the Site Supervisor and supplemented by the Ed. Coords., Disabilities/Mental Health Services Coordinator and/or Mental Health Consultant, and by other professionals as needed. One-on-One Aides will be observed on an ongoing basis and documented on the appropriate forms by the Site Supervisor. A meeting between the Aide, Disabilities/Mental Health Services Coordinator, Mental Health Consultant if needed, Teacher, and Parent, and the Ed. Coordinator can be arranged initially and as needed through-out the program year. Training and workshops will be provided as the need arises and as the budget allows. One-on-One Aides will receive initial Behavioral Management training from the Site Sup. when contractual paperwork is done. The Site Supervisor, the Ed. Coord, and Disabilities/Mental Health Services Coordinator will do specialized training, according to the individual child's needs, and staff will be offered training as needed. A form called *One-on-One Aide Training and Progress* is used to track training and observations per aide. Specific training can be provided to teachers and aides when a child with a disability or condition requires special skills or knowledge of special techniques or equipment. Staff receiving training can share their knowledge with other staff.

One goal may be to remove the One-on-One Aide and for the child to function independently in the classroom.

Teachers are to make contacts with all providers for their children who have special needs about every three months, or more often as needed. Teachers are to discuss goals, achievements, concerns, behaviors, and behavioral techniques used with shared children.

All children receiving special education services shall have an *IEP/IFSP* done by the LEA/CFC. In a rare instance Head Start would arrange to provide for it or other supports for the child and family, such as initiating a 504 Plan.

If PACT arranges for an evaluation to be done (not by LEA or CFC) the staffing/*IEP/IFSP* meeting will be attended by one or all members of the professional multi-disciplinary team, the Disabilities/Mental Health Services Coordinator, the child's teacher(s), parents, Mental Health Consultant, and any other significant persons the parent wishes to include.

Should PACT initiate the evaluation, an *IEP/IFSP* meeting will be scheduled as soon as possible after the evaluation takes place, but always within 30 calendar days. Every effort will be made to accommodate the parents so that they can be in attendance and participate, such as locating the meeting in the parents' hometown of residence, or offering transportation.

The Disabilities/Mental Health Services Coordinator documents in Child Plus, and/or on the *Special Needs File Log* within the child's disability services file, all attempts to notify and accommodate the family. The Teacher also documents all notifications to family and other support given on the *Disabilities/Mental Health Progress Report* routinely, by phone or e-mail updates, and when requested.

Services to be provided that are specified on the *IEP/IFSP* are implemented as soon as possible following the staffing, ideally no later than 2 weeks from obtaining signatures on the forms unless a longer timeline is needed, which could be specified on the *IEP/IFSP*.

Should PACT conduct the evaluation (with a multi-disciplinary team) the team will state in writing on the *Multi-disciplinary Team Report* and *IEP/IFSP* what eligibility criteria applies and in accordance with the HS Eligibility criteria. (The Multi-Disciplinary Report is also referred to as the Eligibility Determination Conference Report.)

For all services not provided by the LEA/CFC or for those being provided jointly with Head Start with the LEA/CFC, Head Start will include on the child's Family Support Plan (if applicable), or separately within the child's file, designation of who (LEA/CFC, other agency, Head Start, or Early Head Start) will be responsible for the services and who will implement them. Along with what services will be provided and by whom, particular attention will be given to confidentiality of information and involvement of parents. A main objective of PACT is to involve parents in every aspect of the planning and implementation of their child's Head Start program.

If PACT were to write the *IEP* the standards will be used. Parents will be notified in writing via a letter, and also informed by their child's PACT teacher on visits and at Parent/Teacher Conferences, or by their Family Advocate if needed. This would be done in advance of the meeting time and up until the day of the meeting, and is scheduled to try to accommodate parents. PACT also tries to locate a meeting place that is familiar and as easily accessible to the family as possible. The Disabilities/Mental Health Services Coordinator documents in Child Plus and on the *Special Needs File Log* within the child's disability services file, all attempts to notify and accommodate the family. The Teacher also documents all notifications to family and other support given on the *Disabilities/Mental Health Progress Report* routinely and when requested. Teachers accompany parents when possible to IEP/IFSP Staffings to provide support and to help interpret special education/disabilities terminology. Teachers also offer transportation to families for the evaluation and for the staffing when available. Literature is available from the Disabilities/Mental Health Services Coordinator for teachers to distribute to families and to help them explain procedures, etc. Should it be needed, PACT will try to locate an interpreter for the family and will make efforts to be certain the *IEP/IFSP* process is understood by the family. If the parent(s) is unable to attend the scheduled staffing the teacher or Family Advocate will meet in person with them as soon as possible after the meeting to review the *IEP/IFSP*. Parents are encouraged to participate and give input into all of the staffing activities.

Services to be provided that are specified on the *IEP/IFSP* are implemented as soon as possible following the staffing, ideally no later than 2 weeks from obtaining signatures on the forms unless a longer timeline is needed, which could be specified on the *IEP/IFSP*.

For all services not provided by the LEA/CFC or for those being provided jointly with Head Start with the LEA/CFC, Head Start will include on the child's Family Support Plan (if applicable), or separately within the child's file, designation of who (LEA/CFC, other agency, Head Start, or Early Head Start) will be responsible for the services and who will implement them. Along with what services will be provided and by whom, particular attention will be given to confidentiality of information and involvement of parents. A main objective of PACT is to involve parents in every aspect of the planning and implementation of their child's Head Start program.

Head Start Performance Standard Number	Who is Responsible	Who Implements	Timelines or Ongoing	Form Name
1302.61 (c) (1)(i-v)	D/MH Coord.	Site Sup., Teachers, D/MH Coord.	Ongoing	Disabilities/Mental Health Progress Report, Family Conference Report Family Support Plan

**(c) Additional services for children with an IFSP or IEP. To ensure the individual needs of children eligible for services under IDEA are met, a program must:**

**(1) Work closely with the local agency responsible for implementing IDEA, the family, and other service partners, as appropriate, to ensure: (See below.)**

- (i) Services for a child with disabilities will be planned and delivered as required by their IFSP or IEP, as appropriate;**
- (ii) Children are working towards the goals in their IFSP or IEP;**
- (iii) Elements of the IFSP or IEP that the program cannot implement are implemented by other appropriate agencies, related service providers and specialists;**
- (iv) IFSPs and IEPs are being reviewed and revised, as required by IDEA; and,**
- (v) Services are provided in a child’s regular Early Head Start or Head Start classroom or family child care home to the greatest extent possible.**

Teachers are required to attend and participate in Domain meetings, IEP/IFSP meeting (staffings), and IEP/IFSP Reviews. Teachers document parent and provider contacts on the *Disabilities/Mental Health Progress Report* or in updates to the Dis/MH Services Coord. Teachers share children’s skills and accomplishments with the LEA/CFC and offer samples of the child’s work and input. When writing goals, teachers use the IEP or IFSP to assist with goal setting so that PACTs goals reflect those of the school or CFC.

All children in PACT Head Start have a *Family Conference Report*-- written to individualize for each child. The *Family Conference Report* is the PACT Head Start equivalent to the education goals portion of the *IEP/IFSP* If Head Start arranges for the evaluation of a child, then an *IEP/IFSP* will be written according to state regulations and Head Start Performance Standards.

The *Family Conference Report* contains space for the child’s current level of functioning in several domains according to the child’s *DIAL-4 Screening and GOLD* (or other assessments used by PACT). One or more goals are written with objectives for each domain, specifying who will do what, when, how well, with what aide, and by end of year. Health, Dental, Nutrition, Mental Health, Parent Involvement, Social Services, Family Goals, Disabilities, and Transitions are all addressed per child if they receive a *Family Support Plan*, or on *Family Action Plans*, and goals and objectives are written accordingly. Specific education goals are set with a time of initiation and duration determined. Other options to meet the child’s needs are identified and the person responsible for providing the services is designated.

Teachers make consistent contacts with the family and with providers to make certain children are receiving services for which they are eligible. Teachers talk to the Disabilities/MH Services Coord. about other referral options where a child may be able to receive therapies and help parents with referrals when needed.

Teachers make note of the date a service plan is written and estimate a Review date – one year from date written for IEPs and every 6 months for IFSPs. The Disabilities/MH Services Coord. tracks these dates in the Child Plus Program and gives staff reminders of due dates.

All centers in the PACT service area welcome other providers (Speech Therapists, OTs, PTs, DT’s etc.) to perform therapies within the child’s Head Start and Early Head Start classroom. This can be done with individuals or with groups. (As stated above, teachers stay in contact with parents and providers and keep an ongoing log of conversations.)

The following are the procedures used by PACT for screenings and making referrals to the LEA/CFC:

Procedure for Screening and Referral for Evaluations	
Activity	Timeline
<p><b>Screening is Administered:</b>  <i>Dial-4 &amp; Parent Questionnaire-3-5-year-olds</i>  <i>ASQ &amp; ASQ-SE-Infants to 3 years</i></p>	<p>Within 45 days of enrollment.  <b>Home-based</b> - done on 2nd home visit &amp; completed by the 3<sup>rd</sup> visit.  <b>Center-based</b>- as soon as can be scheduled.            Both should be forwarded to the Ed. Coordinator/Site Supervisor immediately.            The Ed. Coord. /Site Sup. checks for errors &amp; forwards all questionable, un-testable, &amp; screenings with potential delays, plus re-screens to the Dis/MH Coordinator <b>unless the Supervisor &amp; Teacher agree there is no concern. If teacher and their Supervisor agree there is no immediate concern they will make a statement on the front of the screening form.</b></p>
<p><b>Teacher discusses referral</b> for further evaluation with parents, assures confidentiality, and obtains signatures (parent consent).             The <b>Teacher forwards the scoring section</b> to the Disabilities/Mental Health Services Coordinator.</p>	<p><b>Home-based</b> - On next home visit.  <b>Center-based</b> - Do immediately upon receipt of paperwork.  <b>Do not wait until next conference.</b>  <b>Discussion of referral needs to be made in person. The Family Advocate may help you get releases, but the referral discussion must come from the Teacher.</b></p>
<p><b>Disabilities/Mental Health Services Coordinator sends Referral and Releases</b> and sometimes a copy of the screening to their respective Special Education Co-ops/Districts, CFC, or schools.</p>	<p>Within 1 week of receipt of Referrals and Releases.  <b>Note: All referrals and requests for IEPs or IFSPs MUST go through the Dis/MH Services Coord.</b></p>

<p>Teachers, with possible assistance from the Family Advocate, follows up with family on progress of referral:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Find out if family has heard from the referral source.</li> <li><input type="checkbox"/> Find out if family has appointments for the Domain Meeting, the Evaluation and the IEP/IFSP meetings.</li> <li><input type="checkbox"/> Find out if transportation is available, etc.</li> </ul>	<p>As needed and e-mail important information to Dis/MH Coord.</p>
<p><b>Teachers and Family Advocates</b> offer family support by helping make appointments, offering transportation, etc. and continue to follow up and report all efforts vis e-mail or Progress Reports. Family Advocates will do this upon request or in cooperation with the CB Teacher.</p>	<p>Until evaluation is completed</p>

For developmental screenings which are questionable due to areas with potential delays, re-screens, because of refusals or circumstances, or with a number of behavioral observations, teachers are contacted by the Disabilities/Mental Health Services Coordinator about appropriate measures to be taken. For those which do not result in an immediate referral or re-screen, teachers will monitor them in their deficit areas for approximately 8 weeks. The teacher will routinely work on goals set to help improve the deficit areas(s). Any conversations with parents about the need or question of a referral for an evaluation will be part of the monitoring process.

If staff deems a child eligible for an evaluation (has sufficient concerns) or a child completes the referral/evaluation process and the parent rejects either, teachers will monitor as if the child has a diagnosed disability in order to make provisions or accommodations as needed per individual child. Teachers will report to the DIS/MH Coord through e-mail or calls and Progress Reports. Monitoring will only occur up to eight weeks after the initial screening is done, unless there are special circumstances. Teachers will examine the child's work samples/portfolios and on-going assessment and make a determination within those eight weeks whether or not a referral is needed. If a referral is not needed correspondence may be discontinued and deficit areas will be addressed in planning and goal setting.

Younger siblings of children enrolled in the PACT program, who are suspected of having delays, should be referred to Child and Family Connections for evaluations, with parental permission. Teachers contact the Disabilities/ Mental Health Services Coord. and assistance will be given on how to proceed with the referral. The Disabilities/Mental Health Services Coordinator will forward the appropriate paperwork to the teacher with directions on how to complete the forms.

**Note: The Teacher may contact the Disabilities/Mental Health Services Coordinator prior to submitting the child's screening or at any time of the year with questions or concerns.**

Head Start Performance Standard Number	Who is Responsible	Who Implements	Timelines or Ongoing	Form Name
1302.61 (c) (2)	D/MH Coord.	Site Sup., Teachers, D/MH Coord.	Ongoing	Family Conference Report Family Support Plan

**(2) Plan and implement the transition services described in subpart G of this part, including at a minimum:**

- (i) For children with an IFSP who are transitioning out of Early Head Start, collaborate with the parents, and the local agency responsible for implementing IDEA, to ensure appropriate steps are undertaken in a timely and appropriate manner to determine the child’s eligibility for services under Part B of IDEA; and,**
- (ii) For children with an IEP who are transitioning out of Head Start to Kindergarten, collaborate with the parents, and the local agency responsible for implementing IDEA, to ensure steps are undertaken in a timely and appropriate manner to support the child and family as they transition to a new setting.**

Children with disabilities (IFSPs) will be transitioned using the same procedures as all children except for the following additional steps. (See Subpart G for details of Transitioning.) For children moving out of Child and Family Connections services, the teacher is required to attend and participate in the transition meeting and offer input and insight. They must also offer the family a DVD or copy of the book *Where Will I Be When I Am Three?* which is supplied by ISBE (Illinois State Board of Education), if the family has not received this information from their CFC provider. Parents are also offered a copy of *Welcome to Holland* which contains definitions and other relevant information for moving to new settings.

Children with disabilities (IEPs) will be transitioned using the same procedures as all children except for the following additional steps. (See Subpart G for details of Transitioning.) For children moving out of Head Start services into Kindergarten, the teacher is required to attend and participate in the transition meeting and offer input and insight. They must also offer the family a DVD or copy of the book *Educational Rights and Responsibilities - Understanding Special Education in Illinois*, which is supplied by ISBE (Illinois State Board of Education), if the family wishes to have this information. Parents are also offered a copy of *Welcome to Holland* which contains definitions and other relevant information for moving to new settings.

**§1302.62 Additional services for parents.**

Head Start Performance Standard Number	Who is Responsible	Who Implements	Timelines or Ongoing	Form Name
1302.62	D/MH Coord.	Site Sup., Teachers, D/MH Coord.	Ongoing	HVR Family Conference Report Form

**(a) Parents of all children with disabilities.**

**(1) A program must collaborate with parents of children with disabilities, including but not limited to children eligible for services under IDEA, to ensure the needs of their children are being met, including support to help parents become advocates for services that meet their children’s needs and information and skills to help parents understand their child’s disability and how to best support the child’s development;**

Parents are encouraged to participate in all aspects of the plan and to write comments on the Home Visit or Family Conference Report form. Goals are reviewed weekly in home-based and at socialization activities, and monthly in class in center-based.

**(2) A program must assist parents to access services and resources for their family, including securing adaptive equipment and devices and supports available through a child’s health insurance or other entities, creating linkages to family support programs, and helping parents establish eligibility for additional support programs, as needed and practicable.**

**(b) Parents of children eligible for services under IDEA. For parents of children eligible for services under IDEA, a program must also help parents:**

**(1) Understand the referral, evaluation, and service timelines required under IDEA;**

**(2) Actively participate in the eligibility process and IFSP or IEP development process with the local agency responsible for implementing IDEA, including by informing parents of their right to invite the program to participate in all meetings;**

**It is considered a priority that the child’s Head Start & Early Head Start Teacher attend every Domain Meeting, IEP/IFSP Staffing and IEP/IFSP Review scheduled when notice is given or staff obtains a date from the parent or evaluating staff. Staff must assertively obtain dates for such meetings.** The child’s Family Advocate, the Site Supervisor on occasion, and One-on-One Aide (if applicable) will also try to attend to give input. The teacher shares strengths, accomplishments, concerns, her assessment of skills, etc. The Disabilities/Mental Health Services Coordinator can attend IEP Meetings of those children we refer and any which the teacher or parent has specifically requested her presence if the Coordinator’s schedule allows. The Teacher and the Disabilities/Mental Health Services Coordinator share educational information pertaining to the child and give input on the placement decision and obtain copies of the *IEP/IFSP* for the child’s files (Disabilities/Mental Health Services Coordinator’s and Teacher’s).

**3) (Understand the purposes and results of evaluations and services provided under an IFSP or IEP; and,**

Teachers and Family Advocates as well as other PACT staff accompany the parent(s) whenever possible to help interpret language and results. (See more details above.)

**(4) Ensure their children’s needs are accurately identified in, and addressed through, the IFSP or IEP.**

(See above standards for details.)

**§1302.63 Coordination and collaboration with the local agency responsible for implementing IDEA.**

Head Start Performance Standard Number	Who is Responsible	Who Implements	Timelines or Ongoing	Form Name
1302.63	D/MH Coord.	D/MH Coord. & Teachers	Ongoing	Interagency Agreements

**(a) A program must coordinate with the local agency responsible for implementing IDEA to identify children enrolled or who intend to enroll in a program that may be eligible for services under IDEA, including through the process described in §1302.33(a)(3) and through participation in the local agency Child Find efforts. (See under (b))**

**(b) A program must work to develop interagency agreements with the local agency responsible for implementing IDEA to improve service delivery to children eligible for services under IDEA, including the referral and evaluation process, service coordination, promotion of service provision in the least restrictive appropriate community-based setting and reduction in dual enrollment which causes reduced time in a less restrictive setting, and transition services as children move from services provided under Part C of IDEA to services provided under Part B of IDEA and from preschool to kindergarten.**

PACT endeavors to have *written Collaborative Agreements* with the four Special Education Districts within our 8 county area -- Four Rivers Special Education District, West Central Illinois Special Education Co-op Schools (via School Superintendents or Principals), Sangamon Area Special Education District, and Adams County Special Education Association. The Special Education Districts accept PACT’s referrals for evaluations and agree to notify PACT of staffing dates. PACT also has written Collaborative Agreements with the two CFCs (Child and Family Connections) agencies in our area; CFC #13 for Hancock, McDonough and Schuyler Counties and CFC#17 for Adams, Brown, Cass, Pike, and Scott counties.

*Collaborative Agreements* may include a process for making referrals per each district, timelines, procedures for staffing invitations, and any other items agreed upon by both PACT and the LEAs/CFCs.

A system of communication between the two is also addressed. The Disabilities/Mental Health Services Coordinator communicates with each district’s Early Childhood Supervisor to develop the agreement at least once a year. Also addressed in each agreement are transition practices, resource sharing, joint training, etc., according to each collaborator’s preferences for the agreement content.

PACT also participates in Child Find under Part B and in the LEA's Child Count Report if requested. PACT receives referrals from public agencies and makes referrals to other entities upon parent consent.

**(c) A program must participate in the development of the IFSP or IEP if requested by the child's parents, and the implementation of the IFSP or IEP. At a minimum, the program must offer:**

**(1) To provide relevant information from its screenings, assessments, and observations to the team developing a child's IFSP or IEP; and,**

PACT staff share screening results, work samples, and other insight into children's work prior and/or during and IEP/IFSP meeting.

**(2) To participate in meetings with the local agency responsible for implementing IDEA to develop or review an IEP or IFSP for a child being considered for Head Start enrollment, a currently enrolled child, or a child transitioning from a program. (See all above.)**

**(d) A program must retain a copy of the IEP or IFSP for any child enrolled in Head Start for the time the child is in the program, consistent with the IDEA requirements in 34 CFR parts 300 and 303.**

Teachers or Family Advocates obtain an *Authorization of Release of Information* to the LEA the child has their IEP, or to the CFC who keeps a copy of the IFSP. The Disabilities/Mental Health Services Coordinator mails, e-mails, or faxes the release with a letter and requests a copy. The Dis/MH Coord retains a copy in the child's original Disabilities Services file in Child Plus and forwards a copy to the Teacher. The Dis/MH Coord. and Teacher watch for expiration dates and request new copies when their current one expires.