

# **Interagency Agreement**

*for*

**Service Delivery for Children  
with Disabilities and Their Families**

*Between*

**U.S. Department of Health and Human Services  
The Administration for Children and Families  
Head Start Bureau - Region III and the Migrant Branch**

*and*

**The Virginia Department of Education**

*and*

**The Virginia Department of Mental Health/Mental  
Retardation/Substance Abuse Services**



**December, 1999**

# **VIRGINIA INTERAGENCY AGREEMENT FOR SERVICE DELIVERY FOR CHILDREN WITH DISABILITIES AND THEIR FAMILIES**

## **EXECUTIVE SUMMARY**

### **PARTIES TO THE AGREEMENT**

The parties to the Virginia Interagency Agreement for Service Delivery for Children with Disabilities and Their Families are the U.S. Department of Health and Human Services, The Administration for Children and Families, Head Start Bureau - Region III and the Migrant Branch; the Virginia Department of Education; and the Virginia Department of Mental Health/Mental Retardation/Substance Abuse Services.

### **DEVELOPMENT OF THE AGREEMENT**

This agreement was developed by a workgroup representing all parties to the agreement. A select group of advisors representing multiple agencies and parents provided feedback and input on content. The agreement was then reviewed by key constituents, including providers and consumers of services to young children with disabilities and their families.

### **PURPOSE AND GOALS OF THE AGREEMENT**

The purposes of this agreement are to improve the quality of services for Virginia's children (birth to age five) with disabilities and their families and to promote and encourage collaboration among parties to the agreement and their local counterparts. Legal mandates for this agreement are included. The goals include the following:

- Assist local programs in the delivery of quality services in compliance with federal and state laws;
- Provide a model for local agreements to improve the quality and implementation of local agreements among Parts B & C of the Individuals with Disabilities Education Act (IDEA) and local Early Head Start and Head Start agencies (throughout this document the term Head Start is used to include Migrant Head Start); and
- Promote the provision of services collaboratively to increase cost-effectiveness, reduce duplication of services, and maximize the joint utilization of existing resources.

### **CONTENT OF THE AGREEMENT**

The agreement contains overarching assumptions, areas of agreement, program descriptions, confidentiality, dispute resolution, and terms and review of the agreement. In addition, recommended practices were developed for specific stages of service delivery including Child Find and Screening, Child Evaluation, Determination of Eligibility for Services, Individualized Education Program (IEP) and Individualized Family Service Plan (IFSP) Development and Placement Decisions, Provision of Services, Transition, and Funding. These recommended practices are intended to complement and enhance existing state and federal statutes and regulations governing local programs and services.

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## **PARTIES TO THE AGREEMENT**

The parties to the Virginia Interagency Agreement for Service Delivery for Children with Disabilities and Their Families are the U.S. Department of Health and Human Services, The Administration for Children and Families, Head Start Bureau - Region III and the Migrant Branch; the Virginia Department of Education; and the Virginia Department of Mental Health/Mental Retardation/Substance Abuse Services.

## **PURPOSE AND GOALS OF THE AGREEMENT**

*Whereas*, the purposes of this agreement are to improve the quality of services for Virginia’s children (birth to age five) with disabilities and their families and to promote and encourage collaboration among the parties to the agreement and their local counterparts; and

*Whereas*, federal statutes and regulations provide: (1) requirements for interagency agreements found in regulations under the Individuals with Disabilities Education Act (IDEA), Parts B and C (20 U.S.C. 1400 et seq.), related to state agreements, and (2) requirements for interagency agreements found in Head Start Program Performance Standards on Services to Children with Disabilities of 1993 (45 CFR 1308) related to local agreements and in Head Start Program Performance Standards of 1996 (45 CFR 1304) related to community partnerships; and

*Whereas*, the Code of Virginia (§ 2.1-760) establishes the Virginia Interagency Coordinating Council (VICC) and defines the participating agencies and their duties, which includes promoting state interagency agreements. The VICC includes representation by the parties to this agreement; and

*Whereas*, the Virginia Department of Education’s Regulations Governing Special Education Programs for Children with Disabilities in Virginia at § 2.2, K mandated by IDEA, provides that the Department of Education (SEA) shall perform among its functions to “secure agreements from state agency heads regarding appropriate roles and responsibilities for the identification, evaluation, placement, and delivery of education and related services to all children with disabilities.”

*Whereas*, the Head Start Bureau has funded the Region III Disabilities Services Quality Improvement Center to facilitate the development and implementation of state-level interagency agreements between Early Head Start and Head Start programs and the LEAs and Part C providers responsible for assuring the implementation of IDEA [Department of Health and Human Services, Administration for Children and Families, Program Announcement No. 93600-97-2]; and

*Whereas*, the Federal Interagency Coordinating Council, mandated by IDEA, has demonstrated the importance of interagency collaboration by establishing an agreement among the federal counterparts of the parties to this agreement; *now*

*Therefore*, the U.S. Department of Health and Human Services, Administration for Children and Families, Head Start Bureau, and the Virginia Department of Education, and the Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services have entered into an agreement in order to:

- Assist local programs in the delivery of quality services in compliance with federal and state laws;
- Provide a model for local agreements in order to improve the quality and implementation of local agreements among Parts B & C of the Individuals with Disabilities Education Act (IDEA) and local Early Head Start and Head Start agencies (throughout this document the term Head Start is used to include Migrant Head Start); and
- Promote the provision of services collaboratively in order to increase cost-effectiveness, reduce duplication of services, and maximize the joint utilization of existing resources.

## **OVERARCHING ASSUMPTIONS**

We recognize that collaboration among the parties to the agreement is essential to the delivery of quality services for children with disabilities and their parents. Similarly, collaboration among parents and providers is crucial for optimal child growth and development. The intent of collaboration is for children and parents to receive services that respond to the individualized needs of the child, as identified by *both* the parents and other members of the team.

We recognize that parents are responsible for their children and are their source of ongoing support. Head Start and Parts B and C of IDEA assist parents in fulfilling this responsibility. To make effective choices, it is important that family members understand the relevant regulations and policies of the agencies which are parties to this agreement. Parents should have genuine opportunities to receive information and training regarding the regulations, the needs of families of children with disabilities, and becoming an integral member of the team providing services to their families. Parent training is a vehicle to enhance parent involvement and provides a foundation for effective decision making.

Parties to the agreement recognize the need for a culturally diverse and competent service delivery system for children and families and for staff and volunteers to provide services in an acceptable and appropriate manner. To deliver competent services, it is agreed that we must move beyond considerations of ethnicity and national identity and focus on the cultural framework of the family. It is acknowledged that, among other characteristics, culture encompasses language, family traditions, spiritual experiences, attitudes about health, illness, and disabilities, and communication and interactional styles. We are committed to the concept that individuals providing services to children and families will seek to understand not only broad cultural differences but also the uniqueness of families. We are committed to reaching and serving families in their own cultural context and community.

## **AREAS OF AGREEMENT**

### ***U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, THE ADMINISTRATION FOR CHILDREN AND FAMILIES, HEAD START BUREAU***

As part of its responsibility under the Head Start Act, the Head Start Bureau shall:

- Ensure that Early Head Start and Head Start programs design comprehensive services which meet program standards for locating and serving children with disabilities and their families, including that at least 10 percent of the enrollment opportunities in Early Head Start and Head Start programs is made available to children with disabilities.
- Encourage Early Head Start and Head Start programs to include representation from local education agencies (LEAs) and early intervention local interagency coordinating councils (LICCs) as members of Head Start Policy Councils and Policy Committees.
- Ensure that Early Head Start and Head Start programs develop local interagency agreements among Early Head Start, Head Start, LEAs, and LICCs.
- Communicate to Early Head Start and Head Start programs the importance of implementing the recommended practices.
- Encourage Early Head Start and Head Start programs to identify needs and access available training and technical assistance for implementing the recommended practices.
- Collaborate with the other parties to this agreement in developing and providing training on the recommended practices.
- Provide for technical assistance to Early Head Start and Head Start programs in understanding and implementing the recommended practices.
- Review the interagency agreement biennially and recommend changes as necessary.

#### ***Financial Responsibility***

Federal funding from the Head Start Bureau is provided directly to Early Head Start and Head Start grantees and delegate agencies at the local level. In addition, the Head Start Bureau funds multi-state regional Disabilities Services Quality Improvement Centers to enhance the quality of services to children with disabilities and their families by providing training and technical assistance to local programs.

## ***VIRGINIA DEPARTMENT OF EDUCATION***

As part of its responsibility for implementing Part B of the Individuals with Disabilities Education Act, the Department of Education shall:

- Ensure that all persons with disabilities from two to 21, inclusive, are identified, evaluated, and have available a free and appropriate public education.
- Encourage LEAs to participate as members of local interagency coordinating councils under Part C of IDEA.
- Encourage LEAs to participate in the development of local interagency agreements among Early Head Start, Head Start, LEAs, and early intervention local interagency coordinating councils.
- Communicate to LEAs the importance of implementing the recommended practices.
- Encourage LEAs to identify needs and access available training and technical assistance for implementing the recommended practices.
- Collaborate with the other parties to this agreement in developing and providing training on the recommended practices.
- Provide for technical assistance to LEAs in understanding and implementing the recommended practices.
- Review the interagency agreement biennially and recommend changes as necessary.

### ***Financial Responsibility***

LEAs receive Part B Flow Through and Section 619 funds from the Department of Education (DOE) to assist in implementing requirements under Part B of IDEA. In addition, DOE funds eight regional centers which provide training and technical assistance to LEAs in special education.

***VIRGINIA DEPARTMENT OF MENTAL HEALTH, MENTAL RETARDATION, AND SUBSTANCE ABUSE SERVICES***

As Virginia's Lead Agency for Part C of the Individual with Disabilities Education Act, the Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS) shall:

- Ensure the location, identification, evaluation and provision of early intervention services to infants and toddlers with disabilities who meet Virginia's eligibility criteria under Part C of IDEA.
- Encourage local interagency coordinating councils to include representation from local Early Head Start and Head Start programs and LEAs as members of these councils.
- Encourage local interagency coordinating councils to facilitate the development of local interagency agreements among Early Head Start, Head Start, LEAs, and early intervention agencies.
- Communicate to local interagency coordinating councils the importance of implementing the recommended practices.
- Encourage local interagency coordinating councils to identify needs and access available training and technical assistance for implementing the recommended practices.
- Collaborate with the other parties to this agreement in developing and providing training on the recommended practices.
- Provide technical assistance to local interagency coordinating councils and local participating early intervention providers in understanding and implementing the recommended practices.
- Review the interagency agreement biennially and recommend changes as necessary.

***Financial Responsibility***

DMHMRSAS provides funding to local interagency coordinating councils for local council operations, Part C systems components and direct service delivery for infants and toddlers with disabilities who meet eligibility criteria for Virginia's Part C early intervention system. In addition, DMHMRSAS funds the provision of technical assistance and training for local interagency coordinating councils and local Part C participating agencies.



## **DESCRIPTION OF THE HEAD START PROGRAM**

Head Start is a federal grant program for young children whose family incomes fall below the federal poverty level. Although 10 percent of Head Start enrollment may be made up of families whose incomes exceeds that level, “about 95 percent of the children in Head Start programs are from low-income families; about 13 percent of the children have disabilities” (45 CFR Part 1301 et al., 1996, p. 57186). Head Start preschool programs are for children ranging from 3 to 5 years of age. Migrant Head Start programs serve children from birth to age 5. Early Head Start programs are for pregnant women and families with infants and toddlers from birth to age 3.

Federal funds go to local grantees and to their delegates who operate programs in almost every city and county in the state. Grantees include community action agencies, nonprofit agencies, local governments, and school divisions, among others.

Each Head Start and Early Head Start program is unique in reflecting the needs and resources of the community it serves and may include a variety of program options (e.g. home-based, center-based, combination, half-day, full-day, wrap-around with child care, etc.). A community assessment is conducted to assist in determining the program design.

Head Start and Early Head Start programs offer “comprehensive services, including high quality early childhood education, nutrition, health, and social services, along with a strong parent involvement focus. Local Head Start programs work in close partnerships with parents to develop and utilize parents’ individual strengths in order to successfully meet personal and family objectives. In addition, parents are encouraged to become involved in all aspects of Head Start, including direct involvement in policy and program decisions that respond to their interests and needs.” (45 CFR Part 1301 et al., 1996, p. 57186).

At least 10 percent of Head Start program enrollment opportunities must be made available for children with disabilities. Head Start is mandated to develop and implement local interagency agreements, and there is strong emphasis on working with local school divisions, early intervention service providers, and other agencies to coordinate services for children with disabilities.

## **DESCRIPTION OF PART B OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA OF 1997)**

The legislative authority for Early Childhood Special Education, Section 619 is Part B of the Individuals with Disabilities Education Act (IDEA) of 1997. Section 619 of IDEA provides preschool grant funding for children, ages 3 through 5, who are receiving special education and related services. Annual awards to Virginia are based on a census formula.

Virginia's State Improvement Plan for Special Education 1999-2004 is strategically designed to be an integrated plan to enable children and youth with disabilities to meet the performance goals established by the state. Strategic directions were developed which target three broad areas for improvement: I. To facilitate, in cooperation with local school divisions, an increase in the school completion rate of students with disabilities in the context of higher academic expectations. II. To improve the performance of children and youth with disabilities by enhancing the knowledge, skills, abilities, and performance of personnel who work with children and youth with disabilities. III. To improve meaningful parent/student involvement with special education services. Embedded within the strategic directions are twenty-nine (29) performance indicators which will provide a basis for changes in activities and will report progress. Virginia's State Improvement Plan links a wide array of activities to state performance goals for the purpose of improving results for children and youth with disabilities. Activities the state will use to address identified needs include, but are not limited to: technical assistance to improve results, professional and parent/student development opportunities, partnership agreements, policies and procedures, and accountability practices.

Seventy-eight percent of the federal preschool grant funding flows to school divisions. School divisions may choose from a range of expenditure categories including instructional materials, transportation, computers, parent services, adaptive equipment, summer programs, classroom furniture, teacher stipends, outdoor equipment, child find, therapy, local networking, diagnostic services, transition, teacher and paraprofessional salaries, integration, salaries for coordinators, and program evaluation.

Preschool grant funds are used for Department of Education administrative expenses. Thus, 4 percent of the grant is allocated for salaries, in-service training, advisory task forces, the Institutions of Higher Education Council for Early Education of Children with Disabilities, and printing and dissemination of documents and materials.

The remaining 18 percent of preschool grant funds are allocated for direct and support services and the development of a comprehensive service delivery system that includes support of regional technical assistance centers and tuition assistance for teachers. The July 1, 1998, award totaled \$8,977,259. Funding to school divisions is based on total school enrollment and poverty factors.

All public school divisions in Virginia offer services to preschoolers with disabilities and are eligible to apply for funding. Based upon the December 1, 1997, child count, 13,804 children ages 3 to 5 with disabilities were receiving services through school divisions. Also 880 additional children younger than age 3 with disabilities were receiving services from public school divisions.

## **DESCRIPTION OF PART C OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA OF 1997)**

Part C of the Individuals with Disabilities Education Act is a federal grant program for infants and toddlers with disabilities. Infants and toddlers with disabilities are children under 3 years of age who need early intervention services because they are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures in one or more of the areas of cognitive development, physical development, communication development, social or emotional development, and adaptive development; or have diagnosed physical or mental conditions which have a high probability of resulting in developmental delay.

Federal funds go to the Department of Mental Health, Mental Retardation and Substance Abuse Services, Virginia's designated lead agency for Part C. The Code of Virginia has established an Agencies Committee, composed of the heads of nine state agencies, to ensure the implementation of a comprehensive, interagency system of early intervention services. To ensure local agency coordination and local input into statewide planning and implementation of the Part C program, the lead agency distributes funds to local fiscal agents representing 40 local interagency coordinating councils. Each council is responsible for implementing a system that reflects the needs and resources of the community it serves.

Part C includes public awareness for child find, service coordination for all eligible children and their families, multidisciplinary evaluations to determine initial and ongoing eligibility, and development of Individualized Family Service Plans (IFSPs) at no charge to families. Fees are charged to parents for other services. Ability to pay mechanisms, including sliding fee scales, are available to ensure that inability of parents to pay for needed services does not result in the denial of services. Individualized family service plan teams determine outcomes for children and the services necessary to achieve those outcomes related to the developmental needs of the child. Services are provided by personnel who meet standards consistent with highest entry-level requirements. Services may include but are not limited to assistive technology devices and assistive technology services, audiology, family training and counseling, nutrition services, occupational therapy, physical therapy, speech instruction, transportation and related services, and vision services.

Parents are represented on a state advisory council, and one parent must be a member of each local interagency coordinating council. There is a state interagency agreement among the nine participating state agencies. Local interagency coordinating councils are required to have interagency agreements or memorandums of understanding to promote the interagency system, including provision of services.

## **CONFIDENTIALITY**

The parties to the agreement acknowledge the confidentiality requirements that each agency must follow regarding the sharing and release, with parental consent, of personally identifiable information about children and families. We encourage all three parties to this agreement to use the Consent to Exchange Information form developed by state agencies and approved by the Office of the Attorney General.

## **DISPUTE RESOLUTION**

In the event of a dispute between or among the parties to the agreement related to the implementation of activities outlined in this agreement, the following steps will be taken to resolve the dispute.

- The parties to the agreement will first attempt to resolve the dispute between or among themselves.
- If within 60 days, the dispute is not resolved, a written request is made for assistance from the Secretary of Health and Human Resources and Secretary of Education.
- If the dispute cannot be resolved by the Secretaries within 30 days, the dispute is referred to the Governor who makes a final determination that is binding upon the state agencies involved.

Any other disputes not related to the implementation of activities in this agreement, such as disputes about payments for services or other matters related to service delivery, will be resolved in accordance with existing federal IDEA and Head Start regulations and each party's own internal agency dispute resolution procedures. When financial disputes occur, DMHMRSAS and DOE will adhere to federal regulations governing Parts B and C of IDEA for use of funds in the provision of services during a dispute.

## **REVIEW OF THE VIRGINIA INTERAGENCY AGREEMENT**

The Region III Disabilities Services Quality Improvement Center (DSQIC) will convene a biennial meeting of all agency representatives for the purpose of reviewing the interagency agreement and recommending any needed revisions.

## **TERM OF AGREEMENT**

This agreement becomes effective immediately when signed by all parties to the agreement and remains in effect until it is revised with the consent of all parties. Each agency by the signature below of its authorized representative, hereby acknowledges understanding of this agreement and agrees to be bound by its terms. This interagency agreement will remain binding on all successors of the parties to the agreement.

**Authorized representatives of the parties to the agreement:**

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Helen Taylor, Associate Commissioner  
Department of Health and Human Services,  
Administration for Children and Families,  
Representing the Migrant Branch

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Date

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David Lett, Regional Administrator  
Region III Department of Health and Human Services,  
Administration for Children and Families

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Date

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Lawanna Dowden, President  
Virginia Head Start Association

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Date

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Paul D. Stapleton  
Superintendent of Public Instruction  
State Department of Education

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Date

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Richard E. Kellogg, Commissioner  
Department of Mental Health, Mental  
Retardation, and Substance Abuse Services

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Date

## RECOMMENDED PRACTICES

Existing state and federal statutes and regulations govern programs and services at the local level (see Appendix A). In addition, the recommended practices that follow are intended for local consideration as programs are implemented and as interagency relationships and agreements, are developed.

### CHILD FIND AND SCREENING

- Conduct joint training to identify characteristics of children with disabilities, how to help parents cope with those disabilities, and distinguish typical from atypical development and/or behavior.
- Provide joint screening among the three systems, e.g., child check programs, health screening fairs.
- Collaborate to provide services based on recommendations from physicians and other providers, e.g., child care, transportation, feeding, referrals, and etc.
- Encourage service coordinator (Part C) to inform parents about the availability of Early Head Start and Head Start services if the family meets eligibility guidelines.
- Conduct joint child find and public awareness activities regarding children with disabilities.
- Provide joint education of primary referral sources.
- Provide training for staff from cooperating agencies about those aspects of various ethnic and cultural differences that may affect the provision of services.
- Avoid duplication of effort by adopting common screening instruments and procedures for accepting referrals from other agencies.
- Utilize parents as members of the child find team.
- Provide child find activities in natural environments including child care centers and family day care homes.
- Use parents to educate other parents about the opportunities for services within cooperating agencies.\*
- Encourage Early Head Start and Head Start programs to be active members of local interagency coordinating councils and early intervention and early childhood special education representatives to be included on local Early Head Start and Head Start Policy Councils and Policy Committees.
- Conduct joint training on screening instruments and techniques across cooperating agencies.

\*Note: Cooperating agencies include Early Head Start and Head Start and Migrant Head Start grantees, and Part B and Part C agencies under the IDEA.

## CHILD EVALUATION

- Develop and use interagency multidisciplinary teams to evaluate children in their natural settings.
- Use language and terms that are understandable to parents.
- Avoid duplication by using evaluation data from other agencies if done by personnel who meet the credentialing requirements as identified in the regulations of the agency responsible for determining eligibility.
- Encourage the use of the Consent to Exchange Information form by all three parties to this agreement.\*
- Share information regarding evaluation results among agencies with appropriate parent consent.
- Provide parents with the opportunity to identify other services, resources, and programs in which their children are participating in order to provide a complete picture of the children's skills and needs.
- Conduct joint training on timelines, evaluation instruments, and techniques across cooperating agencies.
- Assure joint participation of parents and staff of cooperating agencies in the multidisciplinary evaluation team.
- Provide parents with information regarding Virginia's parental choice policy for services for two-year old children with disabilities.
- Collaborate among agencies to coordinate logistics necessary for evaluation.

\*Note: Early Head Start and Head Start agencies can be added to the Consent to Exchange Information Form, developed by state agencies and approved by the Office of the Attorney General, by using the space for "other agencies."

### **DETERMINATION OF ELIGIBILITY FOR SERVICES**

- Share among local agencies eligibility criteria, regulations, and other information that affect where and how children receive services. These might include program curriculum, class sizes, space constraints, safety issues, transportation, accessibility, and etc.
- Assure joint participation of parents and staff of cooperating agencies (e.g. Early Head Start and Head Start staff would serve on child study and the eligibility teams with parents and Part C or Part B staff).

### **INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT**

- Encourage early intervention and school divisions to invite the Early Head Start/Head Start staff to participate in the development of the IFSP/IEP. If the child is already enrolled in Early Head Start or Head Start the Head Start teacher or the staff person who is most aware of the child's development should participate. If Early Head Start/Head Start is being considered as a location/placement option then the staff member who is responsible for the Early Head Start/Head Start disabilities services should participate.
- Consider alternate methods of participation for IFSPs and IEPs such as telephone, facsimile, and e-mail communication.
- Encourage parents to consider the inclusion of staff members from all programs serving their children in the IFSP/IEP development process.
- Provide opportunities for Early Head Start and Head Start personnel serving Part C eligible infants and toddlers who are enrolled in their program to participate in the IFSP development process.
- Encourage the IFSP/IEP team to consider the use of an Early Head Start or Head Start program as one of the options to meet child outcomes.
- Refer any Early Head Start and Head Start enrolled child who has moved into a new service area from another jurisdiction to the early intervention provider or local school division and advise the provider that a current IEP or IFSP may exist.
- Assist parents to compile and maintain complete and accurate records regarding their children. These might include results of screenings, evaluations, IFSPs, IEPs, and etc.
- Provide joint training to staff from cooperating agencies on the IFSP/IEP process to promote active, informed participation in the IFSP/IEP meetings.
- Provide training to parents on the IFSP/IEP process to promote active, informed participation in the IFSP/IEP process.

Note: IEPs are developed as part of Part B of IDEA, IFSPs are developed as part of Part C of IDEA



## **PLACEMENT AND PROVISION OF SERVICES**

- Allow children who meet the eligibility for Early Head Start and Head Start and either Parts B or C to be enrolled in both programs.
- Use the expertise of Early Head Start and Head Start, LEA and early intervention staff to achieve individual goals for children who are eligible for dual enrollment.
- Individualize the amount of time spent in either Early Head Start and Head Start and Part B or C programs according to the needs of the child.
- Create opportunities for staff of both Early Head Start and Head Start and either Part B or C programs to observe each other's work with children, and maintain communication about those who are dually enrolled.
- Provide therapies and related services as identified in the IEP to be delivered whenever appropriate, in the inclusive setting where the child is served.
- Provide early intervention direct services identified in the IFSP to be delivered in natural environments whenever appropriate.
- Provide opportunities and encourage parents to actively participate in their child's program and instruction.

## **TRANSITION**

- Provide training for staff from Part C, Part B, Early Head Start, and Head Start programs in transition planning, implementation, and evaluation of the transition process.
- Develop joint transition plans among Early Head Start, Head Start, Part C, and Part B programs, and from Head Start and Part B to school-age programs.
- Inform parents of the differences among systems in role, staffing patterns, costs or fees, schedules, and services.
- Share staff members across systems in order to facilitate a smooth transition.
- Provide early and mutually planned transfer of records with parent consent at times convenient for both systems.

## **FUNDING**

- Be aware of available state and federal resources for children from birth through age 5, the procedures for acquiring funding, and the procedures for counting children for funding as required by each agency.
- Allocate sufficient resources to meet training needs of parents and staff.
- Identify those services that are to be provided at no cost and those for which fees will be charged.
- Ensure that parents understand their financial responsibility, if any, for services provided to their children.
- Share personnel/services with or without an exchange of funds, depending upon the needs and resources of each provider.
- Use the local interagency coordinating councils to collaborate on issues related to funding.
- Identify and cultivate creative funding sources through grant writing and other endeavors to enhance services for young children in the community and to provide adequate child care and recreational options for children with disabilities and their families.
- Explore and use innovative methods for financing the costs of services, including dual enrollment, itinerant teacher arrangements, and other cost-effective coordinated service delivery arrangements.
- Develop rationale and recommendations needed to secure additional state funding to meet service delivery needs.

# APPENDICES

## **REGULATIONS AND RECOMMENDED PRACTICES**

The charts that follow summarize the pertinent regulations in specific stages of service delivery and highlights recommended practices at each stage. The recommended practices are intended for local consideration as interagency relationships and agreements are developed. For each stage, there are two parts. Part I includes highlights from existing state and federal statutes and regulations governing local programs and services. Only regulations related to the inter-relationships of the parties to the agreement are included. Part II includes recommendations for appropriate additional practices that enhance the implementation of local programs and services. Only recommended practices related to the inter-relationships of the parties to the agreement are included.

## CHILD FIND AND SCREENING

**PART I - REGULATIONS:** Part I includes highlights from existing state and federal statutes, **regulations, and policies and procedures which govern local programs and services. Only regulations related to the interrelationships of the parties to the agreement are included in the chart.**

## CHILD FIND AND SCREENING

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• Participate in the public agency’s Child Find plan under Part B of IDEA; [45-CFR 1308.4(1)(1)]</li> <li>• Incorporate into outreach and recruitment activities, specific actions to actively locate and recruit children with disabilities. [45-CFR 1308.5 (a)]</li> <li>• Address in the Disabilities Service Plan, when appropriate, strategies for the transition of children into Head Start from infant/toddler programs (birth to three years). [45- CFR 1308.4 (g)]</li> <li>• The Disabilities Service Plan must include preparation of staff and parents for the entry of children with severe disabilities into the Head Start program. [45-CFR 1308.4 (g)]</li> <li>• Grantees must provide for developmental, hearing and vision screenings of all Early Head Start and Head Start children within 45 days of the child’s entry into the program. This does not preclude starting screening in the spring, before program services begin in the fall. [45-CFR 1308.6 (b)(1)]</li> </ul>	<ul style="list-style-type: none"> <li>• All children with disabilities residing in the State, including children with disabilities attending private schools, regardless of the severity of their disabilities, and who are in need of special education and related services, are identified, located, and evaluated and a practical method is developed and implemented to determine which children with disabilities are currently receiving needed special education and related services. Sec.1412(a)(3)(A)</li> </ul>	<ul style="list-style-type: none"> <li>• Each local school division shall, at least annually, conduct a public awareness campaign to: inform the community of a person’s statutory right to a free appropriate education and the availability of special education programs and services; generate referrals; and explain the nature of disabilities, the early warning signs of disabilities, and the need for early intervention.</li> <li>• Procedures for informing the community shall show evidence of the use of a variety of materials and media, and shall: provide for personal contacts with community groups, public and private agencies and organizations; and provide information in the person’s native language or primary mode of communication.</li> </ul>	<ul style="list-style-type: none"> <li>• The Lead Agency assures that the child find process in Virginia is a comprehensive, interagency, ongoing effort.</li> <li>• The statewide public awareness program for child find provides for the involvement of, and communication with, major organizations throughout Virginia that have a direct interest in early intervention services including public agencies and other participating agencies at the State and local levels, private providers, professional associations, parent groups, advocate associations, and other organizations.  34 CFR 303.320, note</li> </ul>	<ul style="list-style-type: none"> <li>• Local councils maintain a list of agencies and individuals to be involved in public awareness for child find activities.</li> <li>• Local councils have procedures for referring the family to other resources.</li> </ul>

## CHILD FIND AND SCREENING

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• In collaboration with each child’s parent, and within 45 calendar days of the child’s entry into the program, grantee and delegate agencies must perform or obtain linguistically and age appropriate screening procedures to identify concerns regarding a child’s developmental, sensory (visual and auditory), behavioral, motor, language, social, cognitive, perceptual, and emotional skills (see 45 CFR 1308.6(b)(3) for additional information). To the greatest extent possible, these screening procedures must be sensitive to the child’s cultural background. [45-CFR 1304.20(b)]</li> <li>• Make concerted efforts to reach and include the most in need and hardest to reach in the screening effort, providing assistance but urging parents to complete screening before the start of the program year. [45-CFR 1308.6 (b) (2)]</li> <li>• Promptly refer enrolled families with infants and toddlers suspected of having a disability to the local early intervention agency designated by the State Part H* plan to coordinate any needed evaluations, determine eligibility for Part H* services, and coordinate the development of an IFSP for children determined to be eligible under the guidelines of the State’s program. [45-CFR 1304.20 (f)(2) (ii)]</li> </ul> <p>*Now Part C.</p>		<ul style="list-style-type: none"> <li>• There shall be evidence of involvement of parents and community members in the required child find and community awareness campaign.</li> <li>• Each local school division shall maintain an active and continuing child find program designed to identify, locate and evaluate those children from birth to 21, inclusive, who are in need of special education and related services. Written procedures shall be established for collecting, reviewing and maintaining such data.</li> <li>• All children ages two to 21, inclusive, not enrolled in school and who are suspected of having a disability shall be referred to the division superintendent, or designee, who shall initiate the process of determining eligibility for special education services.</li> </ul>	<ul style="list-style-type: none"> <li>• The Lead Agency, with the assistance of the Virginia Interagency Coordinating Council, ensures that the child find system under this part is coordinated with all other major efforts to locate and identify children... including the Head Start Act. 34 CFR 303.321</li> </ul>	

## CHILD FIND AND SCREENING

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
		<ul style="list-style-type: none"> <li>• Where such children are determined to be eligible for special education services, school divisions are required to offer appropriate programs and placements consistent with each child's IEP from ages two to 21 inclusive.</li> <li>• Each local school division shall establish and maintain screening procedures to assure the identification of children with disabilities residing within its jurisdiction and requiring special education.</li> <li>• All children, within 60 administrative working days of initial enrollment in a public school, shall be screened in the following areas to determine if formal assessment is indicated:               <ul style="list-style-type: none"> <li>(1) Speech, voice, and language; and</li> <li>(2) Vision and hearing.</li> </ul> </li> <li>• All children (through grade three), within 60 administrative working days of initial enrollment in public schools, shall be screened for</li> <li>• All children (through grade three), within 60 administrative working days of initial enrollment in public schools, shall be screened for</li> <li>• All children (through grade three), within 60 administrative working days of initial enrollment in public schools, shall be screened for fine and gross motor functions to determine if formal assessment is indicated.</li> </ul>		



## CHILD FIND AND SCREENING

**PART II - RECOMMENDED PRACTICE.** Part II includes recommendations for appropriate additional practices which enhance the implementation of local programs and services. Only recommended practices related to the interrelationships of the parties to the agreement are included in the chart.

- Conduct joint training to identify characteristics of children with disabilities, how to help parents cope with those disabilities, and distinguish typical from atypical development and/or behavior.
- Provide joint screening among the three systems, e.g., child check programs, health screening fairs.
- Collaborate to provide services based on recommendations from physicians and other providers, e.g., child care, transportation, feeding, referrals, and etc.
- Encourage service coordinator (Part C) to inform parents about the availability of Early Head Start and Head Start services if the family meets eligibility guidelines.
- Conduct joint child find and public awareness activities regarding children with disabilities.
- Provide joint education of primary referral sources.
- Provide training for staff from cooperating agencies about those aspects of various ethnic and cultural differences that may affect the provision of services.
- Avoid duplication of effort by adopting common screening instruments and procedures for accepting referrals from other agencies.
- Utilize parents as members of the child find team.
- Provide child find activities in natural environments including child care centers and family day care homes.
- Use parents to educate other parents about the opportunities for services within cooperating agencies.<sup>3</sup>
- Encourage Early Head Start and Head Start programs to be active members of local interagency coordinating councils and early intervention and early childhood special education representatives to be included on local Early Head Start and Head Start Policy Councils and Policy Committees.
- Conduct joint training on screening instruments and techniques across cooperating agencies.

<sup>1</sup> Each local Head Start grantee is charged with implementing local plans consistent with the Head Start Performance Standards.

<sup>2</sup> These regulations will be amended to conform with Federal regulations when finalized.

<sup>3</sup> Cooperating agencies include Early Head Start and Head Start and Migrant Head Start Grantees, and Part B and Part C agencies under the IDEA.

## CHILD EVALUATION

**PART I - REGULATIONS: Part I includes highlights from existing state and federal statutes, regulations, and policies and procedures which govern local programs and services. Only regulations related to the interrelationships of the parties to the agreement are included in the chart**

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• Must refer a child to the LEA for evaluation as soon as the need is evident, starting as early as the child’s third birthday. [45-CFR 1308.6 (e)(1)]</li> <li>• Must obtain parental consent in writing before a child can have an initial evaluation to determine whether the child has a disability. [45-CFR 1308.6 (e)(3)]</li> <li>• Must use trained (State certified or licensed) personnel to administer testing and evaluation procedures. [45-CFR 1308.6 (e)(2)(ii)]</li> <li>• Arrange or provide an evaluation using its own resources and accessing others if the LEA does not evaluate the child. [45-CFR 1308.6 (e)(2)]</li> <li>• Must use a multidisciplinary team including at least one person with knowledge in the area of suspected disability to complete the evaluation. [45-CFR 1308.6 (e)(2)(iv)]</li> </ul>	<ul style="list-style-type: none"> <li>• A State education agency, other State agency, or local education agency shall conduct a full and individual initial evaluation, in accordance with this paragraph and subsection (b), before the initial provision of special education and related services to a child with a disability under this part Section 1414. (a) (1) (A)</li> <li>• Such initial evaluation shall consist of procedures -- (I) to determine whether a child is a child with a disability (as defined in section 1401(3)); and (ii) to determine the education needs of such child. Section 1414. (a) (1) (B)</li> <li>• The local educational agency shall provide notice to the parents of a child with a disability, in accordance with subsections (b)(3), (b)(4), and ©) of section 1415, that describes any evaluation procedures such agency proposes to conduct. Section 1414. (b) (1)</li> </ul>	<ul style="list-style-type: none"> <li>• Children suspected of having a disability shall be referred by the child study committee or other referring source to the special education administrator for formal assessment. If referral to the special education administrator is from the child study committee, it shall be made within five administrative working days following the determination by the child study committee that the child is suspected of having a disability. (17D)</li> <li>• Secure written permission of the parent for the formal assessment. (17D) (2c)</li> <li>• Initiate formal assessment procedures. (17D) (3)</li> <li>• The LEA shall establish policies and procedures to ensure the following tests and other evaluation materials are administered by trained personnel in conformance with the instructions provided by their producers. (17 E2a4)</li> </ul>	<ul style="list-style-type: none"> <li>• The evaluation and assessment includes (a) a review of pertinent records less than six months old related to the child’s current health status and medical history; (b) an evaluation of the child’s level of functioning or review of existing evaluation data less than six months old in the cognitive, physical, communication, social/emotional, and adaptive development areas; c) an assessment of the unique strengths and needs of the child in terms of each of the developmental areas above, including the identification of services appropriate to meet those needs. 34 CFR 303.322</li> </ul>	<ul style="list-style-type: none"> <li>• The multidisciplinary evaluation team must consider the results of an independent evaluation when such consideration is requested by the family. Independent evaluations must have been conducted no more than six months prior to determining eligibility because child development changes too quickly at this age.</li> <li>• The composition of the team may differ depending on a variety of factors including: (a) the purposes and activities of the team..., (b) the perceived resources, priorities and concerns of the child and family; and c) the choices of the family, including the family members they choose to participate, the professionals they choose to participate, and any other persons they invite, such as a family advocate or other evaluator.</li> </ul>

## CHILD EVALUATION

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
	<ul style="list-style-type: none"> <li>• In conducting the evaluation, the local education agency shall -- (A) use a variety of assessment tools and strategies to gather relevant functional and developmental information, including information provided by the parent, that may assist in determining whether the child is a child with a disability and the content of the child's individualized education program, including information related to enabling the child to be involved in and progress in the general curriculum or, for preschool children, to participate in appropriate activities; and (B) not use any single procedure as the sole criterion for determining whether a child is a child with a disability or determining an appropriate education program for the child. Section 1414. (b) (1 &amp; 2).</li> <li>• Each local education agency shall ensure that the child is assessed in all areas of suspected disability. Section 1414. (b)(3)(C)</li> </ul>	<ul style="list-style-type: none"> <li>• The evaluation shall be made by a multi-disciplinary team or group of persons, including at least one teacher or other specialist with knowledge in the area of suspected disability. (18 E2e)</li> </ul>		

## CHILD EVALUATION

**PART II - RECOMMENDED PRACTICE.** Part II includes recommendations for appropriate additional practices which enhance the implementation of local programs and services. Only recommended practices related to the interrelationships of the parties to the agreement are included in the chart.

- Develop and use interagency multidisciplinary teams to evaluate children in their natural settings.
- Use language and terms that are understandable to parents.
- Avoid duplication by using evaluation data from other agencies if done by personnel who meet the credentialing requirements as identified in the regulations of the agency responsible for determining eligibility.
- Encourage the use of the Consent to Exchange Information form by all three parties to this agreement.<sup>4</sup>
- Share information regarding evaluation results among agencies with appropriate parent consent.
- Provide parents with the opportunity to identify other services, resources, and programs in which their children are participating in order to provide a complete picture of the children's skills and needs.
- Conduct joint training on timelines, evaluation instruments, and techniques across cooperating agencies.
- Assure joint participation of parents and staff of cooperating agencies in the multidisciplinary evaluation team.
- Provide parents with information regarding Virginia's parental choice policy for services for two-year old children with disabilities.
- Collaborate among agencies to coordinate logistics necessary for evaluation.

<sup>4</sup>Early Head Start and Head Start agencies can be added to the Consent to Exchange Information form, developed by state agencies and approved by the Office of the Attorney General, by using the space for "other" agencies.

## DETERMINATION OF ELIGIBILITY FOR SERVICES

**PART I - REGULATIONS: Part I includes highlights from existing state and federal statutes, regulations, and policies and procedures which govern local programs and services. Only regulations related to the interrelationships of the parties to the agreement are included in the chart.**

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• <i>Children with disabilities</i> means, for children ages 3 to 5, those with mental retardation, hearing impairments including deafness, speech or language impairments, visual impairments including blindness, serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, specific learning disabilities, deaf-blindness, or multiple disabilities, and show, by reason thereof, need special education and related services. The term “children with disabilities” for children aged 3 to 5, inclusive, may, at a State’s discretion, include children experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and who, by reason thereof, need special education and related services. [45-CFR 1308.]</li> <li>• Infants and toddlers with disabilities are those from birth to three years, as identified under the Part H* Program (Individuals with Disabilities Education Act) in their State. [45-CFR 1304.3 (a)(1)]</li> </ul> <p>*Now Part C.</p>	<ul style="list-style-type: none"> <li>• The term “child with a disability” means a child --               <ul style="list-style-type: none"> <li>(I) with mental retardation, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance (hereinafter referred to as emotional disturbance), orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities; and</li> <li>(ii) who, by reason thereof, needs special education and related services.</li> </ul> </li> <li>(B) CHILD AGED 3 THROUGH 9- The term “child with a disability” for a child aged 3 through 9 may, at the discretion of the State and the local educational agency, include a child --</li> </ul>	<ul style="list-style-type: none"> <li>• “Children with disabilities” means those children evaluated, in accordance with these regulations, as having autism, deaf-blindness, a developmental delay, a hearing impairment which may include deafness, mental retardation, multiple disabilities, an orthopedic impairment, other health impairment, a serious emotional disturbance, a severe and profound disability, a specific learning disability, a speech or language impairment, a traumatic brain injury, or a visual impairment which may include blindness, who, because of these impairments, need special education and related services.</li> </ul>	<ul style="list-style-type: none"> <li>• Virginia’s definition of developmental delay and eligibility procedures ensure that all children from birth through age two who are developmentally delayed or have a diagnosed physical or mental condition that has a high probability of resulting in delay are eligible to participate in the Part H* program.</li> <li>• Definition of Developmental Delay:               <ol style="list-style-type: none"> <li>1. Infants and toddlers who are functioning at least 25% below their chronological or adjusted age, in one or more of the following areas:                   <ol style="list-style-type: none"> <li>a. Cognitive development;</li> <li>b. Physical development (including fine motor, gross motor, vision, and hearing);</li> </ol> </li> </ol> </li> </ul>	<ul style="list-style-type: none"> <li>• Service coordinator responsible for referring ineligible children to other resources with permission of parents.</li> </ul>

## DETERMINATION OF ELIGIBILITY FOR SERVICES

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• Eligibility criteria: (the criteria for determining that a child enrolled in Head Start requires special education and related services because of a disability.)</li> <li>(.7) Health impairment</li> <li>(.8) Emotional/behavioral disorders</li> <li>(.9) Speech or language impairments</li> <li>(.10) Mental retardation</li> <li>(.11) Hearing impairment including deafness</li> <li>(.12) Orthopedic impairment</li> <li>(.13) Visual impairment including blindness</li> <li>(.14) Learning disabilities</li> <li>(.15) Autism</li> <li>(.16) Traumatic brain injury</li> <li>(.17) Other impairments</li> <li>[45-CFR 1308.7-1308.17]</li> <li>• If the State Education Agency eligibility criteria for preschool children include an additional category which is appropriate for a Head Start child, children meeting the criteria for that category must receive services as children with disabilities in Head Start programs. [45-CFR 1308.17(b)]</li> <li>• The multidisciplinary team provides the results of the evaluation and determines that the child does or does not need special education and related services. [45-CFR 1308.6 (e)(5)]</li> </ul>	<p>(i) experiencing developmental delays, as defined by the State and as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and</p> <p>(ii) who, by reason thereof, needs special education and related services. SEC.1401(3)</p> <ul style="list-style-type: none"> <li>• As part of an initial evaluation (if appropriate) and as part of any reevaluation under this section, the IEP Team described in subsection (d)(1)(B) and other qualified professionals, as appropriate, shall -- (A) review existing evaluation data on the child, including evaluations and information provided by the parents of the child, current classroom-based assessments and observations, and teacher and related services providers observation; and</li> </ul>	<ul style="list-style-type: none"> <li>• <b>“Developmental delay”</b> means a significant delay in one or more of the following areas of development for a child below age 8:               <ol style="list-style-type: none"> <li>1. Cognitive ability</li> <li>2. Motor skills</li> <li>3. Social/adaptive behavior</li> <li>4. Perceptual skills</li> <li>5. Communication skills</li> </ol> </li> <li>• Eligibility of children for special education programs and related services shall be determined by an eligibility committee.               <ol style="list-style-type: none"> <li>1. Membership of the eligibility committee shall include, but not be limited to, school division personnel representing the disciplines providing assessments and the special education administrator, or designee. At least one school division representative serving on the eligibility committee must have either assessed or observed the child.</li> </ol> </li> </ul>	<p>c. Communication development;</p> <p>d. Social or emotional development;</p> <p>e. Adaptive development.</p> <p>(§34 CFR 303.16)</p> <p>OR</p> <p>Children who manifest atypical development or behavior, which is demonstrated by one or more of the following criteria (even when evaluation does not document a 25% developmental delay):</p> <ol style="list-style-type: none"> <li>a. Abnormal or questionable sensory-motor responses, such as:           <ol style="list-style-type: none"> <li>(1) abnormal muscle tone;</li> <li>(2) limitations in joint range of motion;</li> <li>(3) abnormal reflex or postural reactions;</li> <li>(4) poor quality of movement patterns or quality of skill performance;</li> <li>(5) oral-motor skills dysfunction, including feeding difficulties.</li> </ol> </li> </ol>	

## DETERMINATION OF ELIGIBILITY FOR SERVICES

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• When Head Start provides for the evaluation, the multidisciplinary team makes the determination whether the child meets the Head Start eligibility criteria. [45-CFR 1308.19(a)]</li> </ul>	<p>(B) on the basis of that review, and input from the child’s parents, identify what additional data, if any, are needed to determine -- (i) whether the child has a particular category of disability, as described in section 1401(3), or, in case of a reevaluation of a child, whether the child continues to have such a disability; (ii) the present levels of performance and educational needs of the child; (iii) whether the child needs special education and related services, or in the case of a reevaluation of a child, whether the child continues to need special education and related services; and (iv) whether any additions or modifications to the special education and related services are needed to enable the child to meet the measurable annual goals set up in the individualized education program of the child and to participate, as appropriate, in the general curriculum.</p>	<ol style="list-style-type: none"> <li>2. The eligibility committee shall review the assessments, any pertinent information reported by an agency assigned legal custody of the child, and any other special reports to determine if the child has a disability which requires special education and related services. Once eligibility has been determined, adding a related service to an existing IEP is an IEP committee function. The assessments or other relevant data that are required or necessary for the proposed related services is forwarded to the IEP committee in order that appropriate goals and objectives can be developed.</li> <li>3. The eligibility committee shall follow due process procedures in the determination of eligibility and in ensuring the confidentiality of records.</li> </ol>	<p>For infants and toddlers born prematurely (gestation &lt;34 weeks), the child’s <u>actual</u> adjusted age is used to determine developmental status. Chronological age is used once the child is 18.</p> <p>b. Identified affective disorders, such as:</p> <ol style="list-style-type: none"> <li>(1) delay or abnormality in achieving expected emotional milestones;</li> <li>(2) persistent failure to initiate or respond to most social interactions;</li> <li>(3) fearfulness or other distress that does not respond to comforting by caregivers;</li> </ol> <p>c. Behavioral disorders that interfere with the acquisition of developmental skills.</p>	

## DETERMINATION OF ELIGIBILITY FOR SERVICES

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
	<ul style="list-style-type: none"> <li>• The local education agency shall administer such tests and other evaluation materials as may be needed to produce the data identified by the IEP Team under paragraph (1)(B).</li> <li>• Each local educational agency shall obtain informed parental consent, in accordance with subsection (a)(1)(C), prior to conducting any reevaluation of a child with a disability, except that such informed parent consent need not be obtained if the local educational agency can demonstrate that it had taken reasonable measures to obtain such consent and the child's parent has failed to respond. Section 1414 C)</li> </ul>	<p>4. The eligibility committee shall have a written summary that consists of essential deliberations supporting its findings as to the eligibility of each child for a special education program and related services. This summary shall be signed by each eligibility committee member present. (19F 1-4)</p>	<p>- Children who have a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay, even though no delay currently exists. 34 CFR 303.16</p>	

Note: Parts B and C of IDEA require that all children who have been identified as meeting eligibility requirements cannot be denied services. Each local Early Head Start and Head Start Program is funded to provide services to a specified number of children and families.



## DETERMINATION OF ELIGIBILITY FOR SERVICES

**PART II - RECOMMENDED PRACTICE.** Part II includes recommendations for appropriate additional practices which enhance the implementation of local programs and services. Only recommended practices related to the interrelationships of the parties to the agreement are included in the chart.

- Share among local agencies eligibility criteria, regulations, and other information that affect where and how children receive services. These might include program curriculum, class sizes, space constraints, safety issues, transportation, accessibility, and etc.
- Assure joint participation of parents and staff of cooperating agencies (e.g. Early Head Start and Head Start staff would serve on child study and the eligibility teams with parents and Part C or Part B staff).

## INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT

**PART I - REGULATIONS:** Part I includes highlights from existing state and federal statutes, regulations, and policies and procedures which govern local programs and services. Only regulations related to the interrelationships of the parties to the agreement are included in the chart.

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• Ensure every child receiving services in Head Start who has been evaluated and found to have a disability and in need of special education has an IEP before special education and related services are provided. [45-CFR 1308.19(b)]</li> <li>• Attempt to participate in the IEP meeting and placement decision for any child meeting Head Start eligibility requirements when the LEA develops the IEP. [45-CFR 1308.19(c)]</li> <li>• If Head Start develops the IEP, the IEP must take into account the child's unique needs, strengths, developmental potential and the family strengths and circumstances as well as the child's disabilities. [45-CFR 1308.19(d)]</li> </ul> <p><u>Note:</u> In cases where children do not meet LEA special education criteria, an IEP can be developed by a Head Start multidisciplinary team and Head Start IEP forms and procedures are used.</p>	<ul style="list-style-type: none"> <li>• Upon completion of administration of tests and other evaluation materials -- the determination of whether the child is a child with a disability as defined in section 1401(3) shall be made by a team of qualified professionals and the parent of the child in accordance with paragraph (5); and 1414(b)(4)(A)</li> <li>• The term 'individualized education program team' or 'IEP Team' means a group of individuals composed of-               <ul style="list-style-type: none"> <li>(I) the parents of a child with a disability;</li> <li>(ii) at least one regular education teacher of such child (if the child is, or may be, participating in the regular education environment);</li> <li>(iii) at least one special education teacher, or where appropriate, at least one special education provider of such child;</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• The LEA shall ensure that an IEP is developed and implemented for each child with a disability in its jurisdiction, including such children placed in private schools or facilities.</li> <li>• a. The LEA shall ensure that each meeting includes participants as follows:               <ul style="list-style-type: none"> <li>(1) A representative of the LEA, other than the child's teacher, who is qualified to provide or supervise the provision of special education;</li> <li>(2) The child's teacher;</li> <li>(3) One or both of the child's parents (see Parent Participation, §3.3 B.4);</li> <li>(4) The child, if appropriate;</li> <li>(5) Other individuals, at the discretion of the parents or LEA.</li> </ul> </li> <li>• b. For a child with a disability who has been evaluated for the first time, the LEA shall ensure that:               <ul style="list-style-type: none"> <li>(1) A member of the evaluation team participates in the meeting; or</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Each initial meeting and each annual meeting to evaluate the IFSP must include the parent or parents of the child; other family members, as requested by the parent; an advocate or person outside of the family at family request, the service coordinator; a person or persons directly involved in conducting the evaluations and assessments; and as appropriate, persons who will be providing services to the child or family.</li> </ul> <p>34 CFR 303.343</p>	<ul style="list-style-type: none"> <li>• IFSP meetings must be conducted in settings and at a time convenient to families Sec. 303.342</li> <li>• To the maximum extent appropriate, early intervention services are provided in natural environments; and the provision of early intervention services for any infant or toddler occurs in a setting other than a natural environment only if early intervention cannot be achieved satisfactorily for the infant or toddler in a natural setting. Sec. 303.167</li> </ul>

## INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• Ensure the IEP includes:               <ol style="list-style-type: none"> <li>(1) A statement of the child’s present level of functioning in the socio-emotional, motor, communication, self-help, and cognitive areas of development and the identification of needs in those areas requiring specific programming.</li> <li>(2) A statement of annual goals including short term objectives for meeting these goals.</li> <li>(3) A statement of services to be provided by each Head Start component that are in addition to those services provided for all Head Start children, including transition services.</li> <li>(4) A statement of specific special education services to be provided to the child and those related services necessary for the child to participate in a Head Start program. This includes services provided by Head Start and services provided by other agencies and non-Head Start professionals.</li> <li>(5) The identification of the personnel responsible for the planning and supervision of services and for the delivery of services.</li> <li>(6) The projected date for the initiation and the anticipated duration of services.</li> <li>(7) A statement of objective criteria and evaluation procedure for determining at least annually whether the short-term objectives are being achieved or need to be revised.</li> </ol> </li> </ul>	<p>(iv) a representative of the local educational agency who --</p> <p>(I) is qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of children with disabilities;</p> <p>(II) is knowledgeable about the general curriculum; and</p> <p>(III) is knowledgeable about the availability of resources of the local educational agency;</p> <p>(v) an individual who can interpret the instructional implications of evaluation results, who may be a member of the team described in clauses (ii) through (vi);</p> <p>(vi) at the discretion of the parent or the agency, other individuals who have knowledge or special expertise regarding the child, including related services personnel as appropriate; and</p> <p>(vii) whenever appropriate, the child with a disability.</p> <p>1414(d)(1)(B)</p>	<p>(2) The representative of the LEA, the child’s teacher, or some other person is present at the meeting who is knowledgeable about the evaluation procedures used with the child and is familiar with the results of the evaluation.</p> <ul style="list-style-type: none"> <li>• The IEP for each child must include:             <ol style="list-style-type: none"> <li>a. A statement of the child’s present level of educational performance;                 <ol style="list-style-type: none"> <li>(1) The statement should accurately describe the effect of the child’s disability on the child’s performance in any area of education that is affected including academic areas and non-academic areas.</li> <li>(2) The statement should be written in objective measurable terms, to the extent possible. Test scores, if appropriate, should be self-explanatory or an explanation should be included.</li> </ol> </li> </ol> </li> </ul>	<ul style="list-style-type: none"> <li>• Individualized family service plans must include information about the child’s present levels of development; family resources, priorities, and concerns related to the child’s development, with concurrence of the family; outcomes expected to be achieved for the infant or toddler and the family; a statement of specific early intervention services necessary to meet the unique needs of the infant or toddler and family; a statement of the natural environments in which early intervention services shall appropriately be provided , including a justification of the extent, if any, to which the services will not be provided in a natural environment; other services; projected dates for initiation of the services and duration of services;</li> </ul>	

## INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<p>(8) Family goals and objectives related to the child’s disabilities when they are essential to the child’s progress. [45-CFR 1308.19(e)]</p> <ul style="list-style-type: none"> <li>• When Head Start develops the IEP, the team must include the Head Start disabilities coordinator, the child’s teacher, one or both of the parents, and at least one member of the multidisciplinary team which evaluated the child. [45-CFR 1308.19(f)]</li> <li>• Invite in writing an LEA representative if Head Start is initiating a request for a meeting. [45-CFR 1308.19(g)]</li> <li>• Invite other individuals at the request of the parents and other individuals. [45-CFR 1308.19(h)]</li> <li>• Hold a meeting at a time convenient for the parents and staff to develop the IEP within thirty calendar days of determination that the child needs special education and related services. Services must begin as soon as possible after the development of the IEP. [45-CFR 1308.19(i)]</li> </ul>	<ul style="list-style-type: none"> <li>• The term 'individualized education program' or 'IEP' means a written statement for each child with a disability that is developed, reviewed, and revised in accordance with this section and that includes --               <ul style="list-style-type: none"> <li>(I) a statement of the child's present levels of educational performance, including --                   <ul style="list-style-type: none"> <li>(I) how the child's disability affects the child's involvement and progress in the general curriculum; or</li> <li>(II) for preschool children, as appropriate, how the disability affects the child's participation in appropriate activities;</li> </ul> </li> <li>(ii) a statement of measurable annual goals, including benchmarks or short-term objectives, related to --                   <ul style="list-style-type: none"> <li>(I) meeting the child's needs that result from the child's disability to enable the child to be involved in and progress in the general curriculum; and</li> <li>(II) meeting each of the child's other educational needs that result from the child's disability;</li> </ul> </li> </ul> </li> </ul>	<p>(3) There should be a direct relationship between the present level of performance and the other components of the IEP.</p> <ul style="list-style-type: none"> <li>b. A statement of annual goals, including short-term instructional objectives;</li> <li>c. A statement of the specific special education and related services to be provided for the child, and the extent to which the child will be able to participate in regular educational programs.</li> <li>d. The projected dates for initiation of services and the anticipated duration of the services (month, day, and year); and</li> <li>e. Appropriate objective criteria and evaluation procedures and schedules for determining, at least annually, whether the short-term instructional objectives are being achieved.</li> </ul>	<ul style="list-style-type: none"> <li>• name of service coordinator; payment arrangement if any; and steps to support transition. Sec. 303.344</li> <li>• The Lead Agency ensures that service coordination is an active, ongoing process that involves: (1) assisting parents of eligible children in gaining access to the early intervention services and other services identified in the individualized family service plan; (2) coordinating the provision of early intervention services and other services... that the child needs or is being provided; (3) facilitating the timely delivery of available services; and (4) continuously seeking the appropriate services and situations necessary to benefit the development of each child being served for the duration of the child’s eligibility. 34 CFR 303.6</li> </ul>	

**INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT**

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>Initiate the implementation of the IEP as soon as possible after the IEP meeting by modifying the child’s program in accordance with the IEP and arranging for the provision of related services. If a child enters Head Start with an IEP completed within two months prior to entry, services must begin within the first two weeks of program attendance. [45-CFR 1308.19(k)]</li> <li>Support parent participation in the evaluation and IFSP development process for infants and toddlers enrolled in their program. [45-CFR 1304.20(f)(2)(ii)]</li> </ul>	<p>(iii) a statement of the special education and related services and supplementary aids and services to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided for the child --</p> <p>(I) to advance appropriately toward attaining the annual goals;</p> <p>(II) to be involved and progress in the general curriculum in accordance with clause (I) and to participate in extracurricular and other non-academic activities; and (III) to be educated and participate with other children with disabilities and non-disabled children in the activities described in this paragraph;</p> <p>(iv) an explanation of the extent, if any, to which the child will not participate with non-disabled children in the regular class and in the activities described in clause (iii);</p>	<ul style="list-style-type: none"> <li>Each LEA shall take steps to ensure that one or both of the parents of the child with a disability are present at each meeting or are afforded the opportunity to participate, including notifying the parents of the meeting early enough to ensure that they will have an opportunity to attend, and scheduling the meeting at a mutually agreed on time and place. The notice given the parents must indicate the purpose, time and location of the meeting, and who will be in attendance. The LEA shall take whatever action is necessary to ensure that the parent understands the proceedings at a meeting, including arranging for an interpreter for parents who are deaf or whose native language is other than English. (25)(a,b,f,g)</li> </ul>		

**INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT**

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
	<p>(v) (I) a statement of any individual modifications in the administration of State or district wide assessments of student achievement that are needed in order for the child to participate in such assessment; and</p> <p>(II) if the IEP Team determines that the child will not participate in a particular State or district wide assessment of student achievement (or part of such an assessment), a statement of --</p> <p>(aa) why that assessment is not appropriate for the child; and</p> <p>(bb) how the child will be assessed;</p> <p>(vi) the projected date for the beginning of the services and modifications described in clause (iii), and the anticipated frequency, location, and duration of those services and modifications; and</p> <p>(viii) a statement of --</p> <p>(I) how the child's progress toward the annual goals described in clause (ii) will be measured; and</p>	<ul style="list-style-type: none"> <li>An IEP must: be in effect before special education and related services are provided to a child; and be developed within 30 calendar days of a determination that the child needs special education and related services, and be implemented as soon as possible following the IEP meeting.</li> </ul>		

**INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT**

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
	(II) how the child's parents will be regularly informed (by such means as periodic report cards), at least as often as parents are informed of their non-disabled children's progress, of -- (aa) their child's progress toward the annual goals described in clause (ii); and (bb) the extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year. Sec. 1414(d)(1)(A)			

## INDIVIDUALIZED EDUCATION PROGRAM/INDIVIDUALIZED FAMILY SERVICE PLAN DEVELOPMENT/PLACEMENT

**PART II - RECOMMENDED PRACTICE.** Part II includes recommendations for appropriate additional practices which enhance the implementation of local programs and services. Only recommended practices related to the interrelationships of the parties to the agreement are included in the chart.

- Encourage early intervention and school divisions to invite the Early Head Start/Head Start staff to participate in the development of the IFSP/IEP. If the child is already enrolled in Early Head Start or Head Start the Head Start teacher or the staff person who is most aware of the child's development should participate. If Early Head Start/Head Start is being considered as a location/placement option then the staff member who is responsible for the Early Head Start/Head Start disabilities services should participate.
- Consider alternate methods of participation for IFSPs and IEPs such as telephone, facsimile, and e-mail communication.
- Encourage parents to consider the inclusion of staff members from all programs serving their children in the IFSP/IEP development process.
- Provide opportunities for Early Head Start and Head Start personnel serving Part C eligible infants and toddlers who are enrolled in their program to participate in the IFSP development process.
- Encourage the IFSP/IEP team to consider the use of an Early Head Start or Head Start program as one of the options to meet child outcomes.
- Refer any Early Head Start and Head Start enrolled child who has moved into a new service area from another jurisdiction to the early intervention provider or local school division and advise the provider that a current IEP or IFSP may exist.
- Assist parents to compile and maintain complete and accurate records regarding their children. These might include results of screenings, evaluations, IFSPs, IEPs, and etc.
- Provide joint training to staff from cooperating agencies on the IFSP/IEP process to promote active, informed participation in the IFSP/IEP meetings.
- Provide training to parents on the IFSP/IEP process to promote active, informed participation in the IFSP/IEP process.

Note: IEPs are developed as part of Part B of IDEA, IFSPs are developed as part of Part C of IDEA.



## PLACEMENT AND PROVISION OF SERVICES

**PART I - REGULATIONS: Part I includes highlights from existing state and federal statutes, regulations, and policies and procedures which govern local programs and services. Only regulations related to the interrelationships of the parties to the agreement are included in the chart.**

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• Include provisions for children with disabilities to be included in the full range of activities and services normally provided to all Head Start children and provisions for any modifications necessary to meet the special needs of children with disabilities. [45-CFR 1308.4(c)]</li> <li>• Grantee and delegate agencies must assist with the provision of related services addressing health concerns in accordance with the Individualized Education Program (IEP) and the Individualized Family Service Plan (IFSP). [45-CFR 1304.20(c)(4)]</li> <li>• (ii) Be inclusive of children with disabilities, consistent with their Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP). [45-CFR 1304.21(a)(ii)]</li> </ul>	<ul style="list-style-type: none"> <li>• EDUCATIONAL PLACEMENTS- Each local educational agency or State educational agency shall ensure that the parents of each child with a disability are members of any group that makes decisions on the educational placement of their child. Sec. 1414(f)</li> </ul>	<ul style="list-style-type: none"> <li>• Each LEA shall establish and implement procedures which satisfy requirements as follows:                             <ul style="list-style-type: none"> <li>(1) To the maximum extent appropriate, children with disabilities, including those in public or private institutions or other care facilities, are educated with children who are not disabled; and</li> <li>(2) Special class placement, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• To the maximum extent appropriate, early intervention services are provided in natural environments. The provision of early intervention services for any infant or toddler occurs in a setting other than a natural environment only when early intervention cannot be achieved satisfactorily for the infant or toddlers in a natural setting. 34 CFR 303.167</li> <li>• The Individualized Family Service Plan (IFSP) includes a statement of the natural environment in which early intervention services will be provided and a justification of the extent, if any, to which the services will not be provided in a natural environment. 34 CFR 303.344</li> </ul>	<ul style="list-style-type: none"> <li>• The membership of local interagency coordinating councils shall include designees from the following agencies who are authorized to make funding and policy decisions: community services board, department of health, department of social services, and local school division. These designees shall designate additional council members as follows: at least one parent representative who is not an employee of any public or private program which serves infants and toddlers with disabilities; representatives from community providers of early intervention services; and representatives from other service providers as deemed necessary. <i>Code of Virginia, Sec. 2.1-766</i></li> </ul>

## PLACEMENT AND PROVISION OF SERVICES

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• The grantee or delegate agency must arrange or provide special education and related services necessary to foster the maximum development of each child’s potential and to facilitate participation in the regular Head Start program unless the services are being provided by the LEA or other agency. The plan must specify the services to be provided directly by Head Start and those provided by other agencies. The grantee or delegate agency must arrange for, provide, or procure special education and related services. [45-CFR 1308.4(h)]</li> <li>• Shall be responsible for providing special education and related services for those children enrolled in Head Start who qualify for services based on Head Start eligibility criteria, but who are not served by the LEA. [45-CFR 1308.4(h)]</li> <li>• Shall include the options of:               <ol style="list-style-type: none"> <li>(1) Joint placement of children with other agencies;</li> <li>(2) Shared provision of services with other agencies;</li> <li>(3) Shared personnel to supervise special education services, when necessary to meet State requirements on qualifications;</li> <li>(4) Administrative accommodations such as having two children share one enrollment slot when each child’s IEP calls for part-time service because of their individual needs; and</li> </ol> </li> </ul>		<p>b. In providing or arranging for the provision of non-academic and extracurricular services and activities, including meals, recess periods, and other services and activities provided for non-disabled children, each LEA shall ensure that each child with a disability participates with non-disabled children in those services and activities, to the maximum extent appropriate to the needs of the child with a disability.</p> <p>c. For children in public or private institutions, the LEA shall, where necessary, make arrangements with public and private institutions to ensure that requirements for least restrictive environment are met. (See Placements, §3.3 B.8.)</p>	<ul style="list-style-type: none"> <li>• Early intervention services (1) are designed to meet the developmental needs of each child eligible under this part and the needs of the family related to enhancing the child’s development; (2) are selected in collaboration with the parents; (3) are provided (i) under public supervision; (ii) by “qualified personnel...; (iii) in conformity with an individualized family service plan; (iv) at no cost, unless...Federal or State law provides for a system of payments by families, including a schedule of sliding fees. 34 CFR 303.12</li> <li>• The Lead Agency has established a system of payments for early intervention services. The inability of the parents of an eligible child to pay for services does not result in the denial of services to the child or the child’s family. 34 CFR 303.520</li> </ul>	<p>The duties of local interagency coordinating councils shall include:</p> <ol style="list-style-type: none"> <li>1. Identifying existing early intervention services and resources;</li> <li>2. Identifying gaps in the service delivery system and developing strategies to address these gaps;</li> <li>3. Identifying alternative funding sources;</li> <li>4. Facilitating the development of interagency agreements and supporting the development of service coalitions;</li> <li>5. Assisting in the implementation of policies and procedures that will promote interagency collaboration; and</li> </ol>

## PLACEMENT AND PROVISION OF SERVICES

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<p>(5) Any other strategies to be used to insure that special needs are met. These may include:</p> <p>(I) Increased staff;</p> <p>(ii) Use of volunteers; and</p> <p>(iii) Use of supervised students in such fields as child development, special education, child psychology, various therapies and family services to assist the staff. [45-CFR 1308.4(j)(1-5)]</p>		<ul style="list-style-type: none"> <li>In interpreting evaluation data and in making eligibility and placement decisions, each LEA shall: draw upon information from a variety of sources, including aptitude and achievement tests, teacher recommendations, physical condition, social or cultural background, and adaptive behavior; ensure that information obtained from all of these sources is documented and carefully considered; ensure that the placement decision is made by a group of persons, including persons knowledgeable about the child, the meaning of the evaluation data, and the placement options; and ensure that the placement decision is made in conformity with the least restrictive environment. (See Least Restrictive Environment, §3.3 A.3.)</li> </ul>	<ul style="list-style-type: none"> <li>The Lead Agency is responsible for the identification and coordination of all available resources for early intervention services... including the Head Start Act and Part B of IDEA. 34 CFR 303.522</li> </ul>	<p>6. Developing local procedures and determining mechanisms for implementing policies and procedures in accordance with state and federal statutes and regulations. <i>Code of Virginia Sec. 2.1-766</i></p>

## PLACEMENT AND PROVISION OF SERVICES

Head Start	Individuals with Disabilities Education Act (IDEA)			
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		<ul style="list-style-type: none"> <li>• Each LEA placing the child shall ensure that: the educational placement of each child with a disability:               <ul style="list-style-type: none"> <li>(1) Is determined at least annually;</li> <li>(2) Is based on his IEP; and</li> <li>(3) Is as close as possible to the child's home.</li> </ul> </li> <li>• Unless a child with a disability's IEP requires some other arrangement, the child is educated in the school which he would attend if non-disabled.</li> </ul>		

## PLACEMENT AND PROVISION OF SERVICES

**PART II - RECOMMENDED PRACTICE.** Part II includes recommendations for appropriate additional practices which enhance the implementation of local programs and services. Only recommended practices related to the interrelationships of the parties to the agreement are included in the chart.

- Allow children who meet the eligibility for Early Head Start and Head Start and either Parts B or C to be enrolled in both programs.
- Use the expertise of Early Head Start and Head Start, LEA and early intervention staff to achieve individual goals for children who are eligible for dual enrollment.
- Individualize the amount of time spent in either Early Head Start and Head Start and Part B or C programs according to the needs of the child.
- Create opportunities for staff of both Early Head Start and Head Start and either Part B or C programs to observe each other's work with children, and maintain communication about those who are dually enrolled.
- Provide therapies and related services as identified in the IEP to be delivered whenever appropriate, in the inclusive setting where the child is served.
- Provide early intervention direct services identified in the IFSP to be delivered in natural environments whenever appropriate.
- Provide opportunities and encourage parents to actively participate in their child's program and instruction.

## TRANSITION

**PART I - REGULATIONS:** Part I includes highlights from existing state and federal statutes, regulations, and policies and procedures which govern local programs and services. Only regulations related to the interrelationships of the parties to the agreement are included in the chart.

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• Address strategies for the transition of children into Head Start from infant/toddler programs (0-3 years), as well as the transition from Head Start into the next placement. [45-CFR 1308.4(g)]</li> <li>• Participate in and support efforts for a smooth and effective transition for children who, at age three, will need to be considered for services for preschool age children with disabilities [45-CFR 1304.20(f)(2) iii]</li> <li>• Support parents of children with disabilities entering from infant/toddler programs. [45-CFR 1308.21(a)(1)]</li> <li>• Include in the Head Start IEP information on Head Start transition services. [45-CFR 1308.19(e)(4)]</li> <li>• Assist parents in the transition of children from Head Start to public school or other placement, beginning early in the program year. [45-CFR 1308.21(b)]</li> <li>• In cooperation with the child’s parents, notify the school of the child’s planned enrollment prior to the date of enrollment. [45-CFR 1308.21 C.)]</li> </ul>	<ul style="list-style-type: none"> <li>• (9) TRANSITION FROM PART C TO PRESCHOOL PROGRAMS- Children participating in early-intervention programs assisted under part C, and who will participate in preschool programs assisted under this part, experience a smooth and effective transition to those preschool programs in a manner consistent with section 1437(a)(8). By the third birthday of such a child, an individualized education program or, if consistent with sections 1414(d)(2)(B) and 1436(d), an individualized family service plan, has been developed and is being implemented for the child. The local educational agency will participate in transition planning conferences arranged by the designated lead agency under section 1437(a)(8). Sec.1412(a)(9)</li> </ul>	<ul style="list-style-type: none"> <li>• <i>(There is no language in current Virginia SPED Regulations [effective January 1994] which addresses “Transition” services for young children with disabilities.)</i></li> </ul>	<ul style="list-style-type: none"> <li>• The Lead Agency ensures that the IFSP addresses “transition at age three” including steps to support transition of children and family at ages two and three to preschool services under IDEA-B to the extent appropriate and to other services available if appropriate. 34 CFR 303.344</li> <li>• Requirements for the transition component of the IFSP include the steps to be taken to support the transition of the child, upon reaching age two (by September 30) or by three years to (1) preschool services under Part B of the Act, to the extent that those services are considered appropriate; or (2) other services that may be available, if appropriate. 34 CFR 303.344</li> </ul>	<ul style="list-style-type: none"> <li>• Upon referral to early intervention services, the temporary service coordinator is responsible for providing information to the child’s family on Virginia’s system of services for children with disabilities birth to age five and their families. This information must include Virginia mandates for the provision of special education (Part B) services for children with disabilities who turn two prior to September 30 of a school year.</li> <li>• The temporary service coordinator is responsible for ensuring that transition planning begins with the development of the initial IFSP.</li> </ul>

## TRANSITION

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
			<ul style="list-style-type: none"> <li>• The Lead Agency ensures the continuation of appropriate early intervention services until the third birthday for children who are:                             <ul style="list-style-type: none"> <li>(1) eligible for services under Part C but not eligible under Part B and</li> <li>(2) eligible for Part B services but whose parents do not consent to an evaluation or placement under Part B and choose to delay transition to a later point in the school year. The IFSPs for these children include the identification of possible future placements as a transition step.</li> </ul> </li> <li>• For children referred to the local school system, with parent approval, the service coordinator is responsible for notifying the LEA in which the child and family reside to convene a conference between the sending Part C providers, the family and the LEA that occurs at least 90 days prior to the child's eligibility under Part B (age two on or before September 30) or to the first day of the school year, whichever date comes first.</li> </ul>	<ul style="list-style-type: none"> <li>• The service coordinator is responsible for notifying local school systems of the number and birth dates of children potentially eligible for Part B services no later than April 1 in a given year to ensure that the schools are able to implement their eligibility and Individual Education Program (IEP) process in time for children to begin services as close to the opening of school as appropriate.</li> <li>• For children referred to the local school system, with parent approval, the service coordinator is responsible for notifying the LEA in which the child and family reside to convene a conference between the sending Part C providers, the family and the LEA that occurs at least 90 days prior to the child's eligibility under Part B (age 2 on or before September 30) or to the first day of the school year, whichever date comes first. The service coordinator ensures that: (1) during this transition conference the child's program options from the time of eligibility for Part B through the remainder of the school year are reviewed; and (2) a transition plan is established.</li> </ul>

## TRANSITION

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
				<ul style="list-style-type: none"> <li>• With the consent of the parent(s) or legal guardian(s), transition services can include, but are not limited to (1) referral and timely transfer and exchange of records and other information; (2) preparation of the child for the new environment; (3) transition information, training, and support for the family; and (4) changes in the new environment to ease the child's or family's transition.</li> <li>• The service coordinator or other designated person is responsible for assisting families in investigating a range of alternative placements for children not eligible for Part B services who spend their final year of Part C eligibility in a local service agency other than an LEA.</li> </ul>



## TRANSITION

Head Start	Individuals with Disabilities Education Act (IDEA)			
	Part B of IDEA		Part C of IDEA	
Local Early Head Start and Head Start Grantee <sup>1</sup>	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
				<ul style="list-style-type: none"> <li>• For children under age 3 who are no longer eligible for Part C services, transition steps should include assisting the family (with their consent) in investigating a range of alternative placement options (e.g. Head Start, integrated nursery schools, or other education or family support programs).</li> <li>• With parent consent, the service coordinator is responsible for facilitating inclusion of representatives of the receiving program on the child's IFSP team prior to the transitioning from local service agencies to those services offered by the local education agency or other agencies.</li> </ul>

## TRANSITION

**PART II - RECOMMENDED PRACTICE.** Part II includes recommendations for appropriate additional practices which enhance the implementation of local programs and services. Only recommended practices related to the interrelationships of the parties to the agreement are included in the chart.

- Provide training for staff from Part C, Part B, Early Head Start, and Head Start programs in transition planning, implementation, and evaluation of the transition process.
- Develop joint transition plans among Early Head Start, Head Start, Part C, and Part B programs, and from Head Start and Part B to school-age programs.
- Inform parents of the differences among systems in role, staffing patterns, costs or fees, schedules, and services.
- Share staff members across systems in order to facilitate a smooth transition.
- Provide early and mutually planned transfer of records with parent consent at times convenient for both systems.

## FUNDING

**PART I - REGULATIONS: Part I includes highlights from existing state and federal statutes, regulations, and policies and procedures which govern local programs and services. Only regulations related to the interrelationships of the parties to the agreement are included in the chart.**

Head Start	Individuals with Disabilities Education Act (IDEA)			
Local Early Head Start and Head Start Grantee <sup>1</sup>	Part B of IDEA		Part C of IDEA	
	Federal Statute	Current Virginia Regulations <sup>2</sup>	Virginia Dept of MH/MR/SAS	Local Interagency Coordinating Councils
<ul style="list-style-type: none"> <li>• The grantee or delegate agency must arrange or provide special education and related services necessary to foster the maximum development of each child’s potential and to facilitate participation in the regular Head Start program unless the services are being provided by the LEA or other agency. [45-CFR 1308.4(h)]</li> </ul>	<ul style="list-style-type: none"> <li>• Free Appropriate Public Education - The term ‘free appropriate public education’ means special education and related services that - (A) have been provided at public expense, under public supervision and direction, and without charge; (B) meet the standards of the State Education Agency; (C) include an appropriate preschool, elementary, or secondary school education in the State involved; and (D) are provided in conformity with the individualized education program required under section 1414(d). Sec. 1401(8)</li> </ul>	<ul style="list-style-type: none"> <li>• The Code of Virginia provides that all handicapped persons from ages two to twenty-one, inclusive ... residing in the Commonwealth of Virginia are identified, evaluated and have available a free and appropriate public education. (From the Preamble of <i>Regulations Governing Special Education Programs for Children with Disabilities in Virginia</i>. Effective January, 1994)</li> </ul>	<ul style="list-style-type: none"> <li>• “The Lead Agency, through Community Services Boards and other public agencies, has established... a system of payments for early intervention services.” 34 CFR 303.521(a)</li> <li>• “The Lead Agency ensures that resources have been identified and coordinated. The Federal funding sources the Lead Agency is responsible for identifying and coordinating include... The Head Start Act.” 34 CFR 303.522</li> </ul>	<ul style="list-style-type: none"> <li>• “For each eligible child, the local interagency coordinating councils determine which local service agency is responsible for providing specific services and determining the resources for payment for such services.”</li> </ul>

## FUNDING

**PART II - RECOMMENDED PRACTICE.** Part II includes recommendations for appropriate additional practices which enhance the implementation of local programs and services. Only recommended practices related to the interrelationships of the parties to the agreement are included in the chart.

- Be aware of available state and federal resources for children from birth through age 5, the procedures for acquiring funding, and the procedures for counting children for funding as required by each agency.
- Allocate sufficient resources to meet training needs of parents and staff.
- Identify those services that are to be provided at no cost and those for which fees will be charged.
- Ensure that parents understand their financial responsibility, if any, for services provided to their children.
- Share personnel/services with or without an exchange of funds, depending upon the needs and resources of each provider.
- Use the local interagency coordinating councils to collaborate on issues related to funding.
- Identify and cultivate creative funding sources through grant writing and other endeavors to enhance services for young children in the community and to provide adequate child care and recreational options for children with disabilities and their families.
- Explore and use innovative methods for financing the costs of services, including dual enrollment, itinerant teacher arrangements, and other cost-effective coordinated service delivery arrangements.
- Develop rationale and recommendations needed to secure additional state funding to meet service delivery needs.

## GLOSSARY

**CFR** - Code of Federal Regulations. Each government regulatory agency has its regulations published in this code.

**CHILD FIND** - All children with disabilities residing in the State, including children with disabilities attending private schools, regardless of the severity of their disabilities, and who are in need of special education and related services, are identified, located, and evaluated and a practical method is developed and implemented to determine which children with disabilities are currently receiving needed special education and related services.

**DELEGATE AGENCY** - An agency to which responsibility is delegated by the grantee for the operation of a total Early Head Start or Head Start program or a significant portion thereof.

**DUALLY ENROLLED** - As used in this document, the term \*dually enrolled\* means that a child is enrolled in two programs simultaneously. Examples include enrollment in an Early Head Start Program and an Early Intervention Program for a two year old or enrollment in a Head Start Program and an Early Childhood Special Education Program.

**FEDERAL INTERAGENCY COORDINATING COUNCIL** - established by the Secretary (U.S. Department of Education) to minimize duplication of programs and activities across Federal, State, and local agencies, relating to early intervention services for infants and toddlers with disabilities (including at-risk infants and toddlers) and their families; and preschool or other appropriate services for children with disabilities; to ensure the effective coordination of Federal early intervention and preschool programs and policies across Federal agencies; to coordinate the provision of Federal technical assistance and support activities to States; to identify gaps in Federal agency programs and services; and to identify barriers to Federal interagency cooperation. Appointments to the FICC are made by the Secretary in consultation with other appropriate Federal agencies.

**FREE APPROPRIATE PUBLIC EDUCATION** - The term “free appropriate public education” means special education and related services that have been provided at public expense, under public supervision and direction, and without charge; meet the standards of the State educational agency; include an appropriate preschool, elementary, or secondary school education in the State involved; and are provided in conformity with the required individualized education program.

**GRANTEE** - A public or private nonprofit agency that receives funds directly from the Administration for Children and Families to operate a Head Start program.

**INDIVIDUALS WITH DISABILITIES EDUCATION ACT** - In June 1997, Individuals with Disabilities Education Act was amended by Public Law 105-17. The new law is called Individuals with Disabilities Education Act Amendments of 1997 or, as it is coming to be known, IDEA 97. IDEA 97 is the fifth set of amendments to the Education of All Handicapped Children Act, better known as EHA or 94-142. EHA was passed in 1975 and went into effect in 1977. IDEA 97 is composed of four sections; Parts A, B, C, and D. Part A contains \*General Provisions\* which outlines definitions, employment of people with disabilities, and the requirements for federal regulations. Part B, \*Assistance to States\* deals with the use of funds by states and then lists conditions states must meet to receive these funds. **Part B includes services to all children with disabilities between the ages of three and 21, inclusive; section 619 of part B is the preschool grants. Part C was added to the Act when amended in 1986 and contains provisions for \*Infants and Toddlers with Disabilities\*.** Part D is the section dealing with \*National Activities to Improve Education of Children with Disabilities\* and includes the State Improvements Grants, Research and Technical Assistance, and Improving Early Intervention, Education, and Transitional Services and Results.

The Act provides that all children with disabilities have available to them a free appropriate public education; children with disabilities must be educated in the least restrictive environment, based on their individual needs; the rights of children with disabilities and their parents are protected; and that the federal government will provide some financial assistance to state and local school districts to help them carry out the requirements of the Act.

***INDIVIDUALIZED EDUCATION PROGRAM*** - The term “individualized education program” or “IEP” means a written statement for each child with a disability that is developed, reviewed, and revised in accordance with regulations. (Used for children served under Part B of IDEA).

***INDIVIDUALIZED FAMILY SERVICE PLAN*** - The term “individualized family service plan” or “IFSP” has the means a written individualized family service plan developed in accordance with regulations by a multidisciplinary team, including the parents. (Used for children and families served under Part C of IDEA).

***LEAST RESTRICTIVE ENVIRONMENT*** - The term “Least Restrictive Environment” or “LRE” means that to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are not disabled, and that special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

***LOCAL EDUCATIONAL AGENCY*** - The term “local educational agency” or “LEA” means a public board of education or other public authority legally constituted within a State for either administrative control or direction of, or to perform a service function for, public elementary or secondary schools in a city, county, township, school district, or other political subdivision of a State, or for such combination of school districts or counties as are recognized in a State as an administrative agency for its public elementary or secondary schools.

***LOCAL INTERAGENCY COORDINATING COUNCIL*** - Membership composition and duties of LICCs are prescribed by the States and are similar to those of the FICC and SICCs.

***POLICY COMMITTEE*** - A committee set up at the delegate agency level when the program is administered in whole or in part by such a grantee agency. At least 50 percent of the membership of the committee must be parents of children enrolled in that delegate agency program. The policy committee may also include representative from the community.

***POLICY COUNCIL*** - A policy-making body set up at the grantee level. At least 50 percent of the members must be parents of Early Head Start or Head Start children currently enrolled in the grantee Early Head Start or Head Start program. The policy council may also include representatives of the community.

***RELATED SERVICES*** - The term “related services” means transportation, and such developmental, corrective, and other supportive services (including speech-language pathology and audiology services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, social work services, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes the early identification and assessment of disabling conditions in children.

***SPECIAL EDUCATION*** - The term “special education” means specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability, including --

(A) instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and

(B) instruction in physical education.

***STATE EDUCATIONAL AGENCY***- The term “State educational agency” or “SEA” means the State board of education or other agency or officer primarily responsible for the State supervision of public elementary and secondary schools, or, if there is no such officer or agency, an officer or agency designated by the Governor or by State law.

***STATE INTERAGENCY COORDINATING COUNCIL*** - A State that desires to receive financial assistance under the Individuals with Disabilities Education Act shall establish a State interagency coordinating council. Appointments are made by the Governor who ensures that the membership of the council reasonably represents the population of the State. The Governor designates a member of the council to serve as the chairperson of the council, or requires the council to so designate such a member.

## CONSENT TO EXCHANGE INFORMATION

I understand that different agencies provide different services and benefits. Each agency must have specific information in order to provide services and benefits. By signing this form, I am allowing agencies to exchange certain information so it will be easier for them to work together effectively to provide or coordinate these services or benefits.

I, \_\_\_\_\_, am signing this form for  
(FULL PRINTED NAME OF CONSENTING PERSON OR PERSONS)

\_\_\_\_\_  
(FULL PRINTED NAME OF CLIENT)

\_\_\_\_\_  
(CLIENT'S ADDRESS)

\_\_\_\_\_  
(CLIENT'S BIRTHDATE)

\_\_\_\_\_  
(CLIENT'S SSN – OPTIONAL)

My relationship to the client is:  Self  Parent  Power of Attorney  Guardian  
 Other Legally Authorized Representative

I want the following confidential information about the client (except drug or alcohol abuse diagnoses or treatment information) to be exchanged:

Yes	No	Yes	No	Yes	No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessment Information		Medical Diagnosis		Educational Records	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial Information		Mental Health Diagnosis		Psychiatric Records	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Benefits/Services Needed, Planned, and/or Received		Medical Records		Criminal Justice Records	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Psychological Records		Employment Records	

Other Information (write in):

I want: \_\_\_\_\_

\_\_\_\_\_  
(NAME AND ADDRESS OF REFERRING AGENCY AND STAFF CONTACT PERSON)

And the following other agencies to be able to exchange this information:

Are More Agencies Listed on Back? YES  NO

I want this information to be exchanged ONLY for the following purpose(s):

Service Coordination and Treatment Planning  Eligibility Determination

Other (write in): \_\_\_\_\_

I want information to be shared: (check all that apply)

Written Information  In Meetings or By Phone  Computerized Data

I want to share additional information received after this consent is signed:  YES  NO

This consent is good until: \_\_\_\_\_

I can withdraw this consent at any time by telling the referring agency. This will stop the listed agencies from sharing information after they know my consent has been withdrawn.

I have the right to know what information about me has been shared, and why, when, and with whom it was shared. If I ask, each agency will show me this information.

I want all the agencies to accept a copy of this form as a valid consent to share information.

**If I do not sign this form, information will not be shared and I will have to contact each agency individually to give them information about me that they need.**

Signatures(s): \_\_\_\_\_

(CONSENTING PERSON OR PERSONS)

Date: \_\_\_\_\_

Person Explaining Form: \_\_\_\_\_

(Name)

(Title)

(Phone Number)

Witness (If Required): \_\_\_\_\_

(Signature)

(Address)

(Phone Number)



**UNIFORM CONSENT TO EXCHANGE INFORMATION FORM**

FULL PRINTED NAME OF CLIENT: \_\_\_\_\_

FOR AGENCY USE ONLY

CONSENT HAS BEEN:

- Revoked in entirety
- Partially revoked as follows:

NOTIFICATION THAT CONSENT WAS REVOKED WAS BY:

Letter (Attach Copy)     Telephone     In Person

DATE REQUEST RECEIVED: \_\_\_\_\_

AGENCY REPRESENTATIVE RECEIVING REQUEST:

\_\_\_\_\_  
(AGENCY REPRESENTATIVE'S FULL NAME AND TITLE)

\_\_\_\_\_  
(AGENCY ADDRESS AND TELEPHONE NUMBER)

## Procedures for the Consent to Exchange Information Form

### Introduction

The Consent to Exchange Information form was developed for use by:

- Area Agencies on Aging
- Community Action Agencies
- Community Services Boards
- Department of Correctional Education
- Department of Youth and Family Services' Court Service Units and Block Grant Programs
- Health Department Clinics and Programs
- Service Delivery Areas for the Job Training Partnership Act
- Local Department of Rehabilitative Services
- Local Department of Social Services
- Local School Systems
- Regional Offices, Department of Corrections
- Regional Outreach Office, Department for the Deaf and Hard of Hearing
- Regional Offices, Department for the Visually Handicapped
- Virginia Employment Commission Offices

The "referring agency" is defined as the agency that initiates the completion of the "Consent to Exchange Information" form with the individual. The referring agency may use the form to request or to transmit information to other agencies. Agencies may be considered either a "referring" or an "other" agency, depending upon which agency is contacted first by the client. If all parties agree, additional public and private agencies, facilities and organizations may be included.

WHEN PROPERLY EXECUTED, THIS IS A LEGALLY VALID DOCUMENT FOR EXCHANGING CLIENT INFORMATION. The *Consent to Exchange Information* form has been reviewed by the Office of the Attorney General to assure compliance with federal and state confidentiality requirements. Agencies may choose to use a different uniform release form that addresses their individual needs if it meets the state and federal confidentiality and release of information statutory and regulatory requirements of ALL involved agencies.

To ensure compliance with federal alcohol and drug abuse confidentiality requirements, this form excludes the general sharing of information about clients in drug and alcohol programs. A separate release of information form specifically for alcohol and drug abuse records should be used each time information is shared between agencies (see attached form).

### *Instructions for Completing the Consent to Exchange Information Form*

- The *Consent to Exchange Information* form is designed for use along with the referring agency's specific procedures for obtaining a valid release to change information.
- Agency staff and the consenting person will first determine whether the client might be eligible for services or benefits provided by other agencies. This determination should be based upon the needs, interests and circumstances of the client as well as staff' knowledge of other agencies' services or benefits and eligibility requirements
- Referring agency staff will explain the following:
  - potential services and benefits that might be available from other agencies;
  - what information these agencies might need and for what purpose;
  - the purpose of the form;
  - the consequences of signing or not signing this release;
  - key provisions and protections (e.g. revocation, access to agencies' written record).
- Staff should make every attempt to ensure that the consenting person(s) understands the provisions of the form and should make appropriate efforts to accommodate the special needs of the consenting person(s). If the consenting person(s) is unable to read or is blind or visually impaired, staff should read the form. Interpreters should be made available for people who do not speak English and for those who are deaf and hearing impaired. If the consenting person(s) does not appear to comprehend the meaning of the form, it should be explained.

NOTE: If staff have ANY doubts that the consenting person(s) is not comprehending the purpose and provisions of the form, they should ask the consenting person(s) questions about the form (what the form allows the agency to do and what the various provisions mean).

Based upon these answers, if staff determine that the consenting person(s) is NOT comprehending the purpose and provisions of the form, staff should follow their agency's procedures for assuring that the form is signed by a legally authorized consenting person who fully comprehends the purpose and provisions of the form. THE SIGNATURE OF A CONSENTING PERSON WHO DOES NOT COMPREHEND WHAT HE OR SHE IS SIGNING IS NOT VALID.

- If the consenting person(s) agrees, the form should be completed. This should be done by the consenting person(s), wherever possible. Requested information follows:
  - ▶ print the name of the consenting (or authorizing) person(s);
  - ▶ print the name of the person about whom the information will be shared (client);
  - ▶ print the client's address, date of birth and social security number (SSN)  
NOTE: Section 2.1-385 of the Code of Virginia, as amended, makes it unlawful to REQUIRE a person's Social Security number in order to obtain benefits or services unless a specific law allows the agency to require it;
  - ▶ check the consenting person's relationship to the client.  
NOTE: A legally valid consent requires that one of the listed relationships be present;
  - ▶ check the box in the "YES" column beside information that the client wants to exchange among the listed agencies; check the box in the "NO" column beside information for which consent is NOT given or which is NOT APPLICABLE; and, if necessary, write in any other information the client wants to exchange.  
NOTE: A client may want to exchange most but not ALL of the specific information checked "Yes" (e.g., a reference to past psychiatric hospitalization contained in psychiatric records). If the client wants some specific parts of a record to remain confidential, the referring agency MUST exclude this information when that record is shared with the other agencies.
  - ▶ Print the name of the referring agency and staff contact person;
  - ▶ Print the names of the other agencies with which information will be shared  
NOTE: Additional agencies may be listed on the back of the form if there is insufficient space on the front. The consenting person(s) must place his or her signature or initials beside the names of these agencies. These additional agencies MUST be listed on the back of EACH copy of the form
  - ▶ check the box indicating if additional agencies ARE or ARE NOT listed on the back;
  - ▶ check the specific purpose(s) for exchanging the information items that have been checked "YES" or inserted in the designated space;
  - ▶ check the listed method(s) that the client authorizes for exchanging the information: in meetings or by phone, by written information, by computerized data;
  - ▶ check whether or not the client wants to share information put in the record after the date the consent is signed
  - ▶ insert an agreed upon date or condition upon which the consent will expire;  
NOTE: Conditions upon which the consent will expire may include: "when the treatment plan has been finalized," or "upon discharge."
- The consenting person(s) must sign the form and insert the date in the indicated place.  
FOR SPECIAL EDUCATION RECORDS: Confidentiality regulations governing special education records require the signature of a parent for release of records, even when the child is between the ages of 18 to 22. The same regulations do not prohibit obtaining the child's in addition to the parent's signature. In cases in which special education records are included in information consented to be released, obtaining both the parent's and the child's signature will permit the intended exchange of information among those other agencies which require the signature of a person over 18 for release of personal information.
- Staff explaining the form to the consenting person must sign the form in the indicated place.
- For those agencies with procedures requiring a witness (e.g., for a person who cannot write), space is provided for a witness to sign the form. The witness must observe the consenting person(s) sign or place a mark on the form and then must sign as indicated.
- The referring agency must give a copy of the completed form to the consenting person(s).

### ***Sharing Information with Other Agencies***

It is important for the referring agency to notify the other listed agencies that they are parties to this agreement to exchange information. This notification can be by telephone or through written correspondence. This notification must be entered into to the client's record.

If the referring agency wants to receive information from other agencies, it must provide a copy of the signed consent form with its initial request for information from each listed agency.

### ***Privacy Protection Act Requirements***

To ensure compliance with the requirements of the Privacy Protection Act, EACH time information is disclosed by ANY of the listed agencies, staff of the DISCLOSING AGENCY must enter the following information into the client's record:

- name of the agency and the name, title, telephone number of individual receiving the information;
- type and source of the information disclosed;
- reason or purpose for the disclosure; and
- date the information was disclosed.

This requirement can be met by using a disclosure log (a sample log is provided) or through the agency's own record keeping policies and procedures.

NOTE: The consenting person(s) has the right to review the records of disclosure of the referring and other agencies upon request during the agencies' business hours.

### ***Agency Record Keeping Policies and Procedures***

- Referring Agency: The original signed copy of the *Consent to Exchange Information* form, disclosure record and any related materials shall be maintained in accordance with the agency's record keeping policies and procedures.
- Other Agencies: A copy of the *Consent to Exchange Information* form, disclosure record and any related materials shall be maintained in accordance with their record keeping policies and procedures.

### ***Renewing or Amending the Consent Form***

The referring agency can renew or amend (e.g. by adding additional agencies) the original signed copy of the *Consent to Exchange Information* form by having the consenting person(s) sign and insert the date beside the amendment(s) on the original form. The referring agency must give a copy of the amended form to the consenting person(s) and forward a copy of the amended form to each of the listed agencies.

### ***Revocation of Consent***

Consent to exchange information will expire on the date or condition agreed to by the consenting person(s). However, anytime prior to the expiration, the consenting person(s) may choose to revoke or cancel this consent either with all or with selected agencies.

The consenting person(s) may revoke his or her consent by informing any of the involved agencies in writing, by telephone, or in person. This notification must be noted on the back of the *Consent to Exchange Information* form.

### ***Notification of Revocation of Consent***

If the consenting person(s) exercises the option of revoking his or her consent (in entirety or with selected agencies) to share information under the agreement, the agency receiving this notice shall inform all other listed agencies that are authorized to exchange information under the agreement.

## **Regulations and Opportunities for Collaboration**

### **Head Start and the Local Education Agency (LEA)**

- A disabilities service plan must include commitment to specific efforts to develop interagency agreements with the LEAs (and other agencies within the grantee and delegate agency's service area).

The agreement must address:

1. Head Start participation in the public agency's Child Find plan under Part B of IDEA;
  2. Joint training of staff and partners;
  3. Procedures for referral for evaluations, IEP meetings and placement decisions;
  4. Transition;
  5. Resource sharing;
  6. Head Start commitment to provide the number of children receiving services under IEPs to the LEA for the LEA Child Count report by December 1 annually; and
  7. Any other items agreed to by both parties. Grantees must make efforts to update the agreements annually.
- The disabilities coordinator must refer a child to the LEA for evaluation as soon as the need is evident, starting as early as the child's third birthday.
  - When the LEA develops the IEP, a representative from Head Start must attempt to participate in the IEP meeting and placement decision for any child meeting Head Start eligibility requirements.
  - An LEA representative must be invited in writing if Head Start is initiating the request for a (IEP) meeting.
  - A disabilities service plan must include strategies for the transition of children from Head Start into their next placement.

### **Head Start and Part C**

- The disabilities service plan, when appropriate, must address strategies for the transition of children into Early Head Start from infant/toddler programs (0-3 years).

### **Early Head Start and Part C**

- Grantee and delegate agencies must assure that services for infants and toddlers with disabilities and their families support the attainment of the expected outcomes contained in the IFSP for children identified under Part C of IDEA.
- Grantee and delegate agencies must assure that enrolled families with infants and toddlers suspected of having a disability are promptly referred to the local early intervention agency designated by the State Part C plan to coordinate any needed evaluations, determine eligibility for Part C services, and coordinate the development of an IFSP for children determined to be eligible under the guidelines of the States's program.
- Grantee and delegate agencies must support parent participation in the evaluation and IFSP development process for infants and toddlers enrolled in their program.
- Grantee and delegate agencies must assure that they participate in and support efforts for a smooth transition for children who, at age three, will need to be considered for services for preschool children with disabilities. To ensure the most appropriate placement and services following participation in Early Head Start, transition planning must be undertaken for each child and family at least six months prior to the child's third birthday.
- Grantee and delegate agencies must assure that they participate in the development and implementation of the IEP for preschool age children with disabilities, consistent with the requirements of 45 CFR 1308.19.

*References: Head Start Program Performance Standards on Services for Children with Disabilities (45-CFR 1308) and Program Performance Standards for the Operation of Head Start Programs by Grantee and Delegate Agencies (45-CFR 1304)*

## **DEVELOPMENT OF THE AGREEMENT**

This agreement was developed by a workgroup representing all parties to the agreement. A select group of advisors representing multiple agencies and parents provided feedback and input on content. The agreement was then field reviewed by key constituents including both providers and consumers of services to young children with disabilities and their families.

## **WORKGROUP PARTICIPANTS**

The interagency agreement workgroup included representatives of all parties to the agreement. These individuals committed their time and expertise to the year-long process of developing the interagency agreement. Their names and affiliations follow:

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