

Part C to B Transition

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MISSISSIPPI STATE DEPARTMENT OF HEALTH

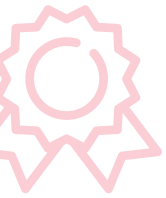


MISSISSIPPI
DEPARTMENT OF
EDUCATION

mdek12.org

Date





1

ALL Students Proficient and Showing Growth in All Assessed Areas



2

EVERY Student Graduates from High School and is Ready for College and Career



3

EVERY Child Has Access to a High-Quality Early Childhood Program

EVERY School Has Effective Teachers and Leaders

4



EVERY Community Effectively Uses a World-Class Data System to Improve Student Outcomes

5



EVERY School and District is Rated “C” or Higher

6



VISION

To create a world-class educational system that gives students the knowledge and skills to be successful in college and the workforce, and to flourish as parents and citizens



MISSION

To provide leadership through the development of policy and accountability systems so that all students are prepared to compete in the global community

Building A Healthier Mississippi from the Ground UP: The State Health Improvement Plan 2016

1. Create a Culture of Health
2. Improve Infant Health
3. Reduce Rates of Chronic Disease
4. Increase Educational Attainment



VISION

All Mississippians living healthier, longer lives due to a thriving public health effort that is supported by active and committed citizens and organizations

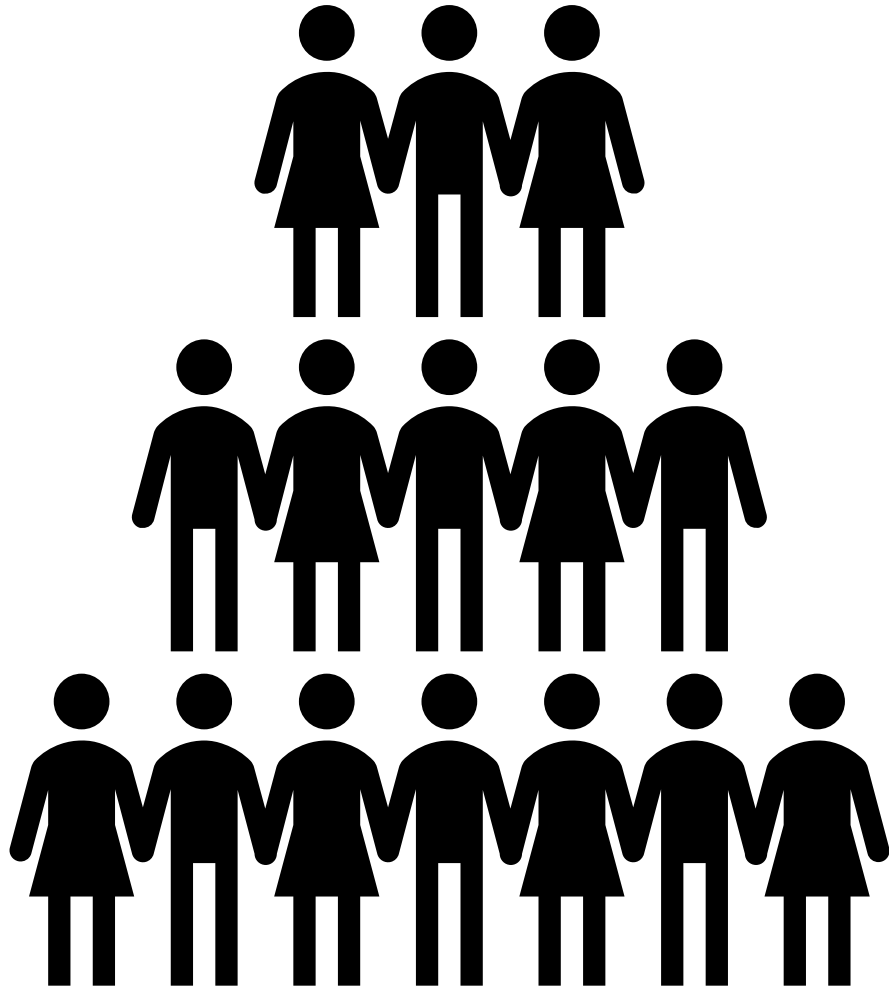
MISSION

To promote and protect the health of the citizens of Mississippi



Agenda





- Welcome and Introductions
- Overview of Part C to B Transition
- Part C to B Transition from the C and B sides
- Troubleshooting Barriers
- School District/EI Program Communication Plans
- Q&A/Evaluations

Part C to B Overview

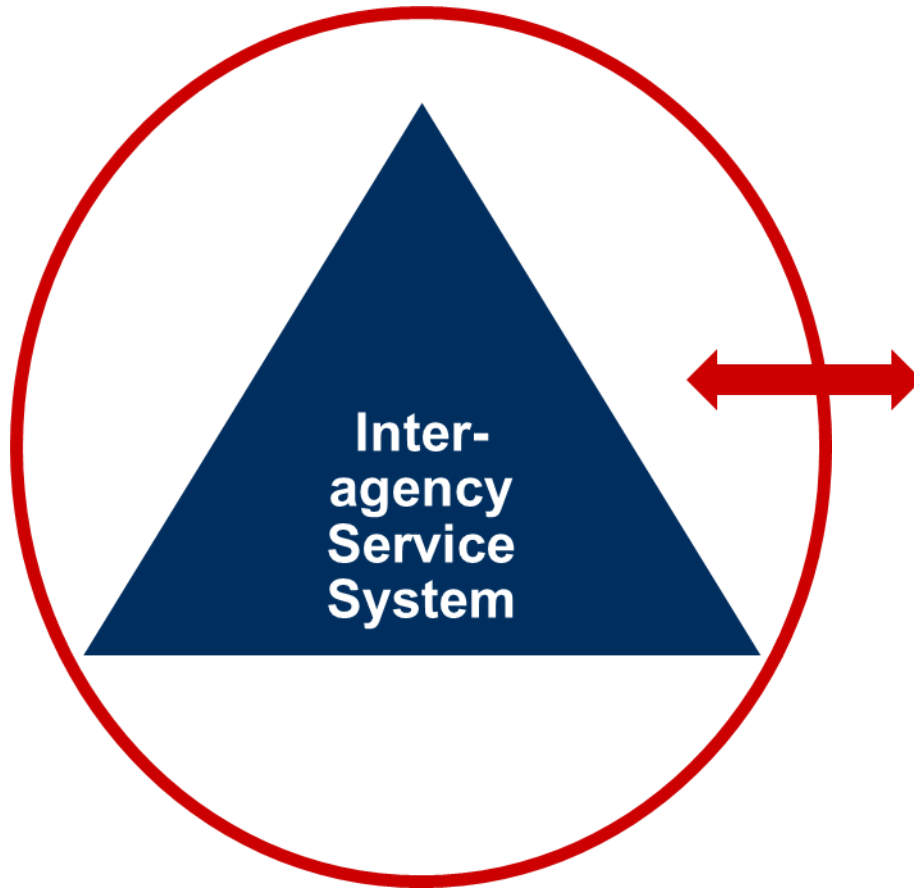


The State must have policies and procedures to ensure that children receiving Part C early intervention services have a smooth and effective transition to Part B preschool services (or other appropriate services).

- *34 C.F.R. §300.124(a); §303.209(a)*



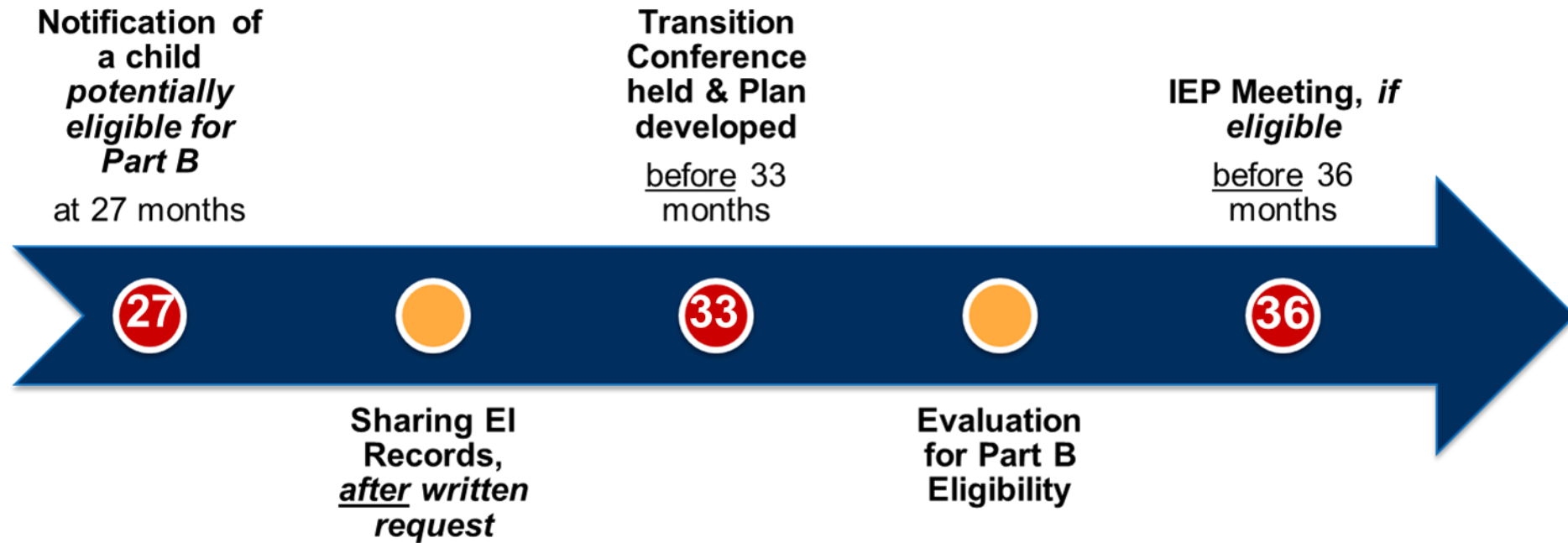
State Level

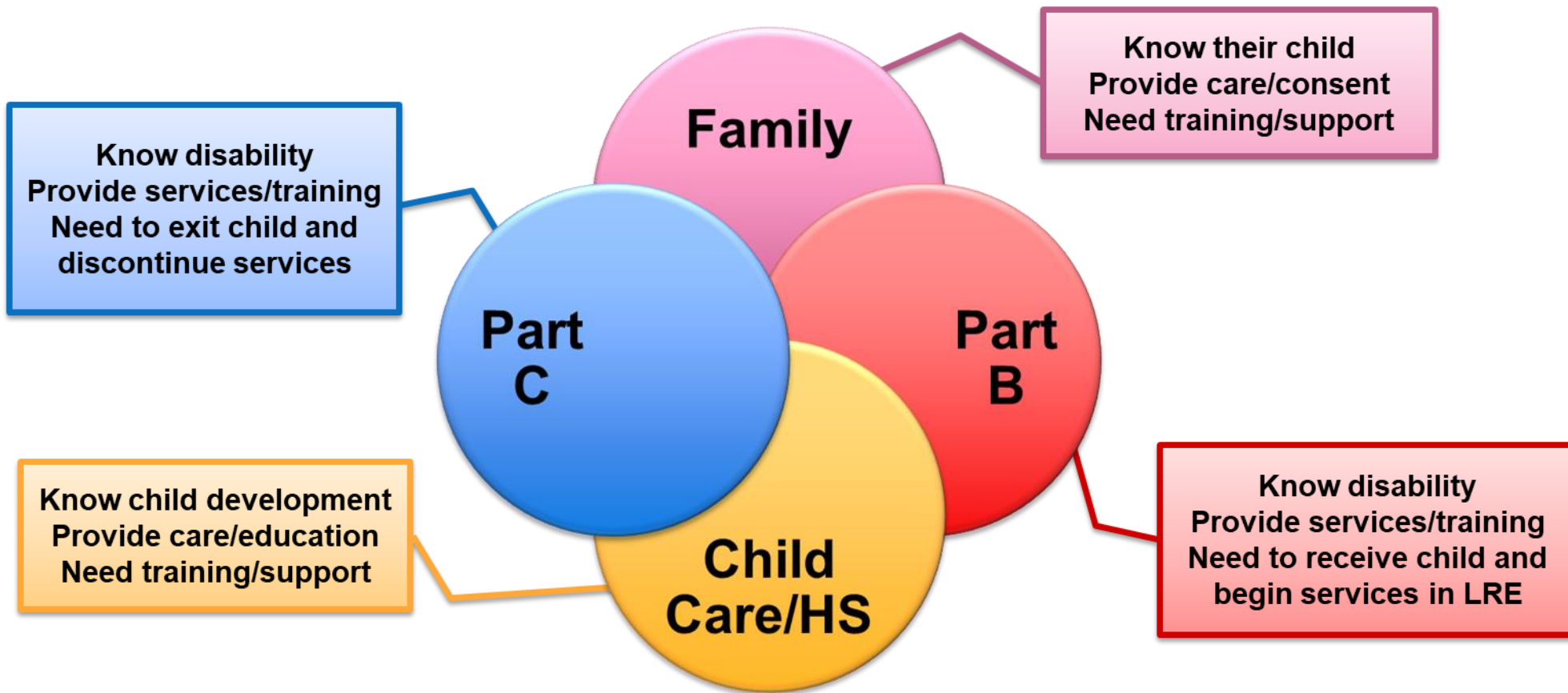


Local Level

- **Interagency Structure:** how the programs and/or agencies are organized, funded, staffed, etc.
- **Alignment & Continuity:** how similar the sending and receiving programs' and/or agencies' policies, procedures, and practices are
- **Communication & Relationships:** how the programs' and/or agencies' personnel communicate and interact







Health Care Providers

Doctors

Nurses

Rehabilitation Therapists

Physical Therapists

Occupational Therapists

Dental Surgeons

Ophthalmologists

Mental Health Care Providers

Psychologists

Psychiatrists

Clinical Social Workers

Applied Behavior Therapists



Transition from Part C

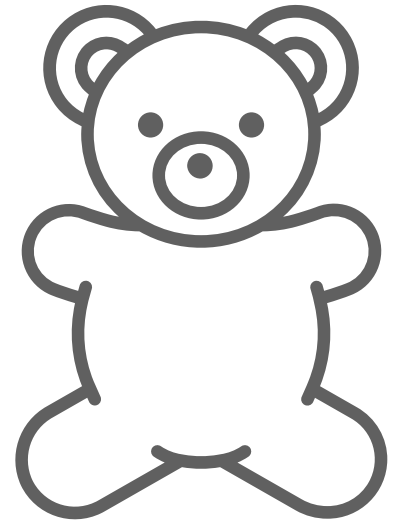


Enrollment: Transition planning begins at the beginning.

Service Coordinators must explain the transition process to families and note their discussion of transition on the child's Individual Family Service Plan (IFSP).

Service Coordinators must provide families with information to advocate for their child including a list of advocacy organizations and Family Rights/Procedural Safeguards.





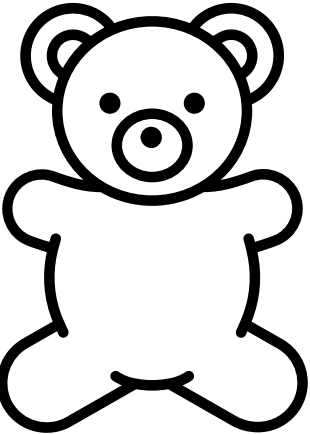
27 Months of Age: Data/IT personnel share data weekly on all children ages 27-36 months who are actively receiving Part C services and who will transition to Part B preschool services. The notification contains the child's name and date of birth and the parent's name and contact information.

34 C.F.R. § 303.209(b); MSDH-MDE Interagency Agreement A.5, 10 & B.4.



- **27 Months of Age:** Service Coordinators send a letter to the Special Education Director of the school district of residence to notify them of a child receiving Part C services who may be potentially eligible for Part B preschool services.
- This notification contains the child's name and date of birth, the parent's name and contact information, and the Service Coordinator's name and contact information. This is all the information that can be provided to Part B without parental consent.

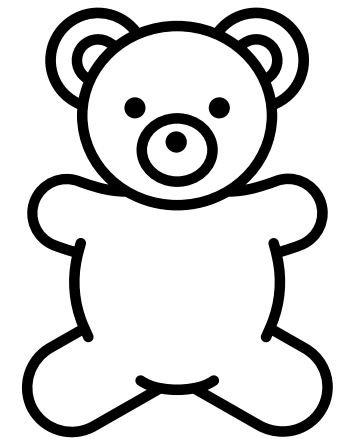
34 C.F.R. § 303.209(b); MSDH-MDE Interagency Agreement A.5,10 & B.4



- **Late Referrals to Part C: *90-45 days before the child's third birthday***

- **Option 1: Part C and Part B conduct a joint evaluation.**
- **Option 2: Part C will determine eligibility and notify Part B afterwards. This would be a late referral to Part B.**

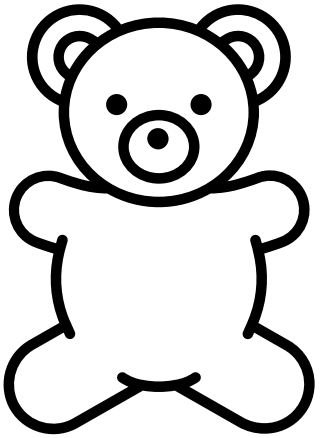
34 C.F.R. §303.209(b); MSDH-MDE Interagency Agreement A.10, B.4, & D.2



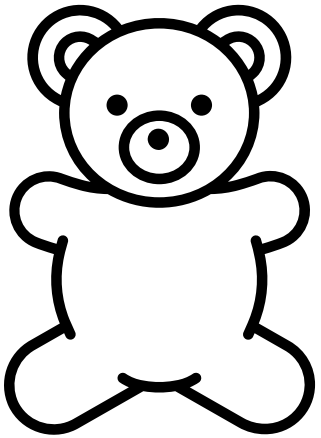
- **Late Referrals to Part C: *less than 45 days before the child's third birthday***

- **Part C will not evaluate or determine eligibility. Instead, after obtaining parental consent, Part C would refer the child to Part B for Child Find (not Transition).**

34 C.F.R. §303.209(b); MSDH-MDE Interagency Agreement A.9 & B.6



- Part B must request to receive Early Intervention records in writing.
- Written permission must be obtained from the parent before sharing any early intervention records with the school district.
- EI records may include:
 - Medical records that are part of the child's educational records
 - Child and family assessments, including developmental histories
 - Individualized Family Service Plans (IFSPs)
 - Service Provider progress notes





All children in Part C receive a Transition Conference to discuss current and future services.



The Transition Conference may be combined with the meeting to develop a Transition Plan.



The Service Coordinator will invite school district staff, if the family wishes, and other community program staff as needed.



The Transition Conference will be scheduled between ages 27-32 months, considerate of all parties.



Invitations will be sent in writing to participants, including parents, service providers, school district, and/or childcare staff.



First, Service Coordinators work with families to determine the people to involve in planning for transition:

- Special Education Director of the school district of residence or designee;
- Service providers and other professionals based on the child's and families' needs;
- Head Start/childcare personnel where the child is/may be enrolled; and
- Advocates to support the family (e.g., peer families).



Second, Service Coordinators set the meeting according to IFSP requirements.

- The Transition Conference must be scheduled more than 90 days before the child's third birthday.
- The meeting time and location must be accessible and convenient for all attendees but ***especially for the family.***
- The meeting should enable phone or other virtual access.



Third, Service Coordinators will send written invitations to all attendees the Transition Conference to the LEA .

- The invitation should be sent to all attendees at least one week before the Transition Conference date.
- A copy of the invitation should be kept in the child's records.



To prepare for the Transition Conference:

- Service Coordinators should help the family prepare for the meeting by sharing information with them in home visits and helping them collect information during program visits.
- LEAs should request and review the data shared with them from the early intervention records and information from home or program visits and prepare materials to bring (e.g., program information, enrollment forms).



Part C information –
exiting process,
transition steps,
family
rights/procedural
safeguards

Part B information –
evaluation process
including consent,
eligibility definitions,
services available,
procedural
safeguards

Community Program
information –
enrollment, service
available



Confirmation of notification of the school district of residence

Sharing of records with the school district or other community programs, with parental consent

Transition services and activities necessary to support the transition of the child, including steps to prepare the family to transition and adjust afterward

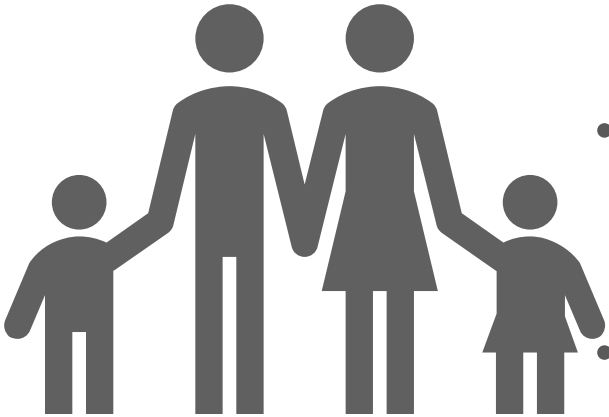


The Service Coordinator works with the family and service providers to determine what skills the family and child need for transition, e.g.,:

- Child needs to practice using a zipper and buttons to be more independent when toileting.
- Child needs to practice holding and using a toothbrush.
- Family needs to learn positive communication skills including how to negotiate successfully.
- Family needs to learn to wait and to let their child try something independently before offering to help.



Families need to be able to:



- Learn and gather information about their child, their child's disability, and their child's rights;
- Assist their child develop skills and behaviors to help her or him be successful in new settings during and after the transition process.
- Make decisions for their child on their own;
- Know how to contact and visit the school district or Head Start/other childcare programs, especially to address any concerns they have.

11. Transition to School and Community Services:***Transition Education:**

(<1000 characters) *Required*

***Program Options (after exiting Part C services):**

(<1000 characters) *Required*

***Transition Steps and Services/Activities:**

(<4000 characters)



TRANSITION TO SCHOOL & COMMUNITY SERVICES

Transition Education: Record any education provided or to be provided to the family about transition from the Mississippi First Steps Early Intervention Program.

- All general information about transition
- Confirmation of notification of the school district of residence

Program Options After Exiting Part C Early Intervention Services: Record any potential provider of services the family may consider after exiting the Mississippi First Steps Early Intervention Program.

First, Service Coordinators work with families to determine the people to involve in planning for transition:

- Special Education Director of the school district of residence or designee;
- Service providers and other professionals based on the child’s and families’ needs;
- Head Start/childcare personnel where the child is/may be enrolled; and
- Advocates to support the family (e.g., peer families).

Transition Steps and Services/Activities: Record the services and activities the Team has determined are needed to help the child and family prepare for transition and adjust to new services after transition.


Start talking to family about the transition steps and process at the initial contact and every review and 27mth child find to the child's local school district.

The Service Coordinator works with the family and service providers to determine what skills the family and child need for transition, e.g.:

- Child needs to practice using a zipper and buttons to be more independent when toileting.
- Child needs to practice holding and using a toothbrush.
- Family needs to learn positive communication skills including how to negotiate successfully.
- Family needs to learn to wait and to let their child try something independently before offering to help.

IFSP MEETING / TRANSITION CONFERENCE NOTE





Fully explained to the family;

Signed by all parties who helped create it; and

Implemented as soon as the parent provides consent.



Transition to Part B





Be invited to and attend the Transition Conference, whether in person or via technology.



Bring information about what the district has to offer for preschool students. Make sure to include contact information.



Explain the criteria for eligibility, as it is not the same in Part B as it is in Part C.



Talk about the evaluation process, without jargon, and the timeline for it.



Listen to the family's needs and concerns.



Parent must give informed written consent for evaluation.

Once consent is obtained, the district has 60 (sixty) days to complete the evaluation.

The evaluation should be comprehensive. All developmental areas should be addressed, and areas of concern should be investigated further.

The comprehensive evaluation must indicate the need for special education services, identify all educational needs to be addressed in development of the IEP, and consistently support the presence of a disability.



Teacher Narrative and/or Developmental History

Documentation about the student's functioning in the home and/or early childhood setting

Information about the child's physical condition, including fine and gross motor skills, general physical condition, hearing, vision, orofacial exam (if necessary)

Information about the child's social, behavioral, emotional, and adaptive functioning



Information regarding the students' pre-academic performance

Information about how the child communicates

Indicators of cognitive abilities

Evaluations and other information provided by parent



Information regarding developmental and preschool experiences

Information about the impact of social and cultural background and limited English proficiency on educational performance.



Lack of early education experiences

Limited English proficiency

Social/Cultural differences



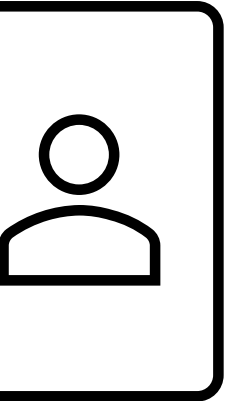
Hearing, vision, and/or developmental screenings conducted by First Steps may be used, if available and current.

Information from teacher/therapist regarding how the child functions in class/therapy is important to include.

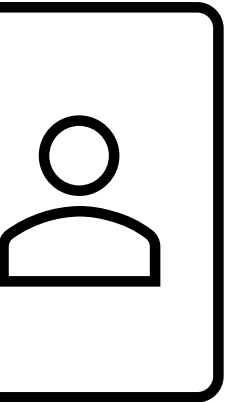
Information from the parent regarding how the child functions at home is important.

Evaluation process is time-sensitive.





- **Multidisciplinary Evaluation Team (MET) must be put together based on the specific concerns of the referral.**
- **The MET must include the parent and other qualified professionals, such as:**
 - **General education teacher, if the child attends a childcare program or Early Head Start**
 - **Special education teacher**
 - **Speech/Language pathologist/therapist**
 - **School psychologist/psychometrist**
 - **School health nurse**
 - **School counselor/social worker**
 - **Behavior specialist**
 - **Representatives of other agencies, as needed**



- The MET will determine, based on the results of the comprehensive evaluation, if the child is eligible for services.
- If the child is determined eligible, the next process is to develop an Individualized Education Program (IEP) for the child.
- The school district has 30 (thirty) calendar days to convene an IEP committee to develop an IEP for the child. The same people on the MET can serve on the IEP committee, if appropriate.



IEP must be completed within 30 (thirty) days of the student being determined eligible for services and should be in place by the student's third birthday.



Parent must give written consent for the student to receive services.



IEP Committee:

- Parent
- General ed teacher(s)
- Special ed teacher(s)
- Agency Representative
- Related service providers
- Others




IEP committee must determine what goals and services the student needs based on all available data.



Troubleshooting Barriers






“I don’t even know who my Part C/B person is.”

“I’m not the person who gets the notifications for my district.”

“I don’t have MSIS access to see who is on the No Match Report.”



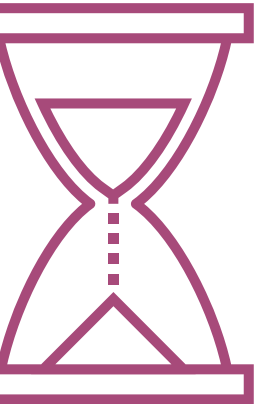


“*They* have so much turnover I don’t even know who to talk to.”

“I can’t get *them* to return my calls or reply to my emails.”

“*They* never want to meet with us.”





The timing is flexible (between 27-32 months of age) to encourage participants to decide on the best timing for the family and child and to work around summer months and/or child/family issues (e.g., surgery, trips), if necessary.

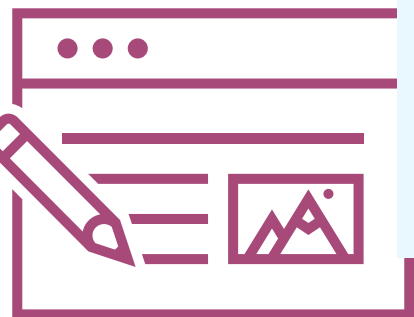
Don't wait until the last minute!



Ensure notifications and records are being received for all children – MITI??

Ensure all the information on the notification is complete and accurate.

Ensure information is not being mishandling or lost to prevent unnecessary duplication.



El Program – District Communication Plans





The
Transition
Team



Notification



Sharing
Early
Intervention
Records

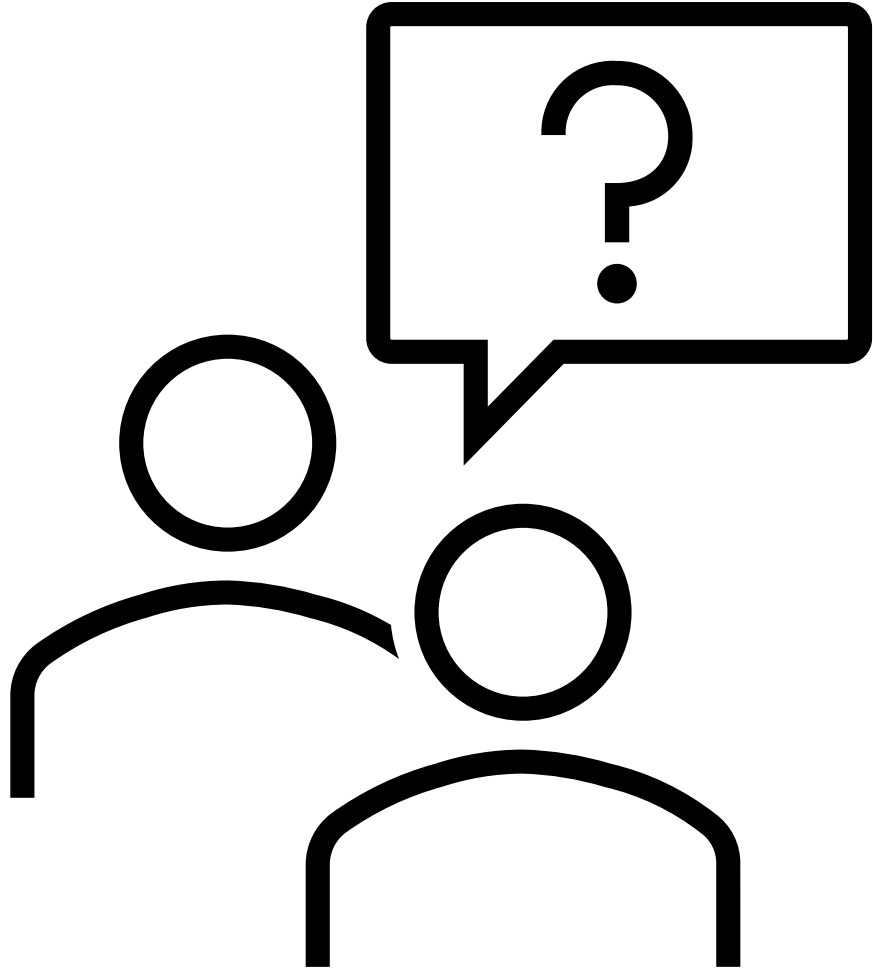


Transition
Conference
and Plan



Evaluations
and the
IEP
Meeting





- Preschool in MS – www.mdek12.org/EC
- Early Childhood Special Education – www.mdek12.org/OSE/EC
- First Steps Early Intervention - https://msdh.ms.gov/msdhsite/_static/41,0,74.html
- First Steps to Next Steps document – available soon???





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