

Part C – SPP/APR Related Requirements

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Note: This document includes a list of the Monitoring Priorities and Indicators and the requirements from the statutes and regulations that are related to each priority and indicator. The purpose of this document is to inform States of the statutory and/or regulatory requirements related to each indicator that will be reviewed by OSEP as part of Focused Monitoring. That is, if OSEP determines that it will do Focused Monitoring in a State because that State is low performing or in noncompliance with a specific indicator, OSEP will review the Related Requirements for that indicator as part of the Focused Monitoring. OSEP encourages States to examine their general supervision systems to determine how they address these Related Requirements. Please note that the Related Requirements listed in the right column are abridged statements of the actual language in the statute and regulations. Readers are encouraged to review the full language of the requirements in the statute and regulations to ensure a complete understanding of the requirement.

MONITORING PRIORITIES AND INDICATORS	RELATED REQUIREMENTS
<p>1. Percent of infants and toddlers with individualized family service plans (IFSPs) who receive the early intervention services on their IFSPs in a timely manner.</p> <p>[20 U.S.C. 1416(a)(3)(A) and 1442]</p>	<p style="text-align: center;"><u>Early Intervention Service Provisions</u></p> <p>The State lead agency shall ensure that an IFSP is developed and implemented for each eligible child, in accordance with the requirements of this part. If there is a dispute between agencies as to who has responsibility for developing or implementing an IFSP, the lead agency shall resolve the dispute or assign responsibility. [34 CFR §303.340(c)]</p> <p>The State lead agency shall ensure that the contents of the IFSP be fully explained to the parents and informed written consent from the parents must be obtained prior to the provision of early intervention services described in the plan. If the parents do not provide consent with respect to a particular early intervention service or withdraw consent after first providing it, that service may not be provided. The early intervention services to which parental consent is obtained must be provided. [34 CFR §303.342(e)]</p> <p>The IFSP shall be in writing and contain a statement of the specific early intervention services based on peer-reviewed research, to the extent practicable, necessary to meet the unique needs of the infant or toddler and the family, including the frequency, intensity, and method of delivering services; the projected dates for initiation of services and the anticipated length, duration, and frequency of the services; the identification of the service coordinator from the profession most immediately relevant to the infant's or toddler's or family's needs (or who is otherwise qualified to carry out all applicable responsibilities under this part) who will be responsible for the implementation of the plan and coordination with other agencies and persons, including transition services; and the steps to be taken to support the transition of the toddler with a disability to preschool or other appropriate services. [20 U.S.C. 1436(d); 34 CFR §303.344(d) and (f)]</p> <p>The contents of the IFSP shall be fully explained to the parents and informed written consent from the parents shall be obtained prior to the provision of early intervention services described in such plan. If the parents do not provide consent with respect to a particular early intervention service, then only the early intervention services to which consent is obtained shall be provided. [20 U.S.C. 1436(e)]</p>

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	<p><u>Additional Service Provisions and Coordination of Resources (Including Funding) Provisions</u></p> <p>The State lead agency must ensure the provision of early intervention services as defined in 20 U.S.C. 1432 are: provided under public supervision; and provided at no cost except where Federal or State law provides for a system of payments by families, including a schedule of sliding fees. [20 U.S.C. 1432(4)(A) and (B)]</p> <p>The State lead agency's application must include a description of the procedure used to ensure that resources are made available under this part for all geographic areas within the State. [20 U.S.C. 1437(a)(7); 34 CFR §303.147]</p> <p>The State lead agency must provide assurances that the State (1) has adopted a policy that appropriate early intervention services are available to all infants and toddlers with disabilities in the State and their families, including Indian infants and toddlers with disabilities and their families residing on a reservation geographically located in the State, infants and toddlers with disabilities who are homeless children and their families, and infants and toddlers with disabilities who are wards of the State; and (2) has in effect a statewide system that meets the requirements of 20 U.S.C. 1435. [20 U.S.C. 1434(1)]</p> <p>The State lead agency must have in effect a policy that ensures that appropriate early intervention services based on scientifically based research, to the extent practicable, are available to all infants and toddlers with disabilities and their families, including Indian infants and toddlers with disabilities and their families residing on a reservation geographically located in the State and infants and toddlers with disabilities who are homeless children and their families. [20 U.S.C. 1435(a)(2)]</p> <p style="text-align: center;"><u>Interagency Coordination Provisions</u></p> <p>The State lead agency has in effect a statewide system as described in 20 U.S.C. 1433 that includes procedures to ensure that services are provided to infants and toddlers with disabilities and their families in a timely manner pending the resolution of any disputes among public agencies or service providers. [20 U.S.C. 1435(a)(10)(D); 34 CFR §303.525]</p> <p>The State lead agency must have in effect a policy pertaining to the contracting or making of other arrangements with service providers to provide early intervention services in the State, consistent with the provisions of this part, including the contents of the application used and the conditions of the contract or other arrangements. The policy must include a requirement that all early intervention services must meet State standards and be consistent with the provisions of this part; the mechanisms that the lead agency will use in arranging for these services, including the process by which awards or other arrangements are made; and the basic requirements that must be met by any individual or organization seeking to provide these services for the lead agency. [20 U.S.C. 1435(a)(11); 34 CFR §303.526]</p> <p>Each State Interagency Coordinating Council (SICC) shall assist the State lead agency in the</p>

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	<p>effective implementation of the statewide system, by establishing a process that includes seeking information from service providers, service coordinators, parents, and others about any Federal, State, or local policies that impede timely service delivery; and taking steps to ensure that any policy problems identified under 34 CFR §303.650(a)(3)(i) are resolved. [34 CFR §303.650(a)(3)]</p> <p>The State lead agency must ensure the provision of early intervention services as defined in 20 U.S.C. 1432(4): are designed to meet the developmental needs of an infant or toddler with a disability, as identified by the individualized family service plan (IFSP) team, in any one or more of the following areas: physical development; cognitive development; communication development; social or emotional development; or adaptive development; meet the standards of the State in which the services are provided, including the requirements of this part; include family training, counseling, and home visits; special instruction; speech-language pathology and audiology services, and sign language and cued language services; occupational therapy; physical therapy; psychological services; service coordination services; medical services only for diagnostic or evaluation purposes; early identification, screening, and assessment services; health services necessary to enable the infant or toddler to benefit from the other early intervention services; social work services; vision services; assistive technology devices and assistive technology services; and transportation and related costs that are necessary to enable an infant or toddler and the infant's or toddler's family to receive another service described in this paragraph; are provided by qualified personnel, including: special educators; speech-language pathologists and audiologists; occupational therapists; physical therapists; psychologists; social workers; nurses; registered dietitians; family therapists; vision specialists, including ophthalmologists and optometrists; orientation and mobility specialists; and pediatricians and other physicians; to the maximum extent appropriate, are provided in natural environments, including the home, and community settings in which children without disabilities participate; and are provided in conformity with an IFSP adopted in accordance with 20 U.S.C. 1436. [20 U.S.C. 1432(4)(C) through (H)]</p> <p style="text-align: center;"><u>Service Coordination Provisions</u></p> <p>The State lead agency must ensure that each child eligible under this part and the child's family are provided with one service coordinator who is responsible for coordinating all services across agency lines and serving as the single point of contact in helping parents to obtain the services and assistance they need. Service coordination is an active, ongoing process that involves: assisting parents of eligible children in gaining access to the early intervention services and other services identified in the IFSP; coordinating the provision of early intervention services and other services (such as medical services for other than diagnostic and evaluation purposes) that the child needs or is being provided; facilitating the timely delivery of available services; and 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. Service coordination activities include coordinating the performance of evaluations and assessments; facilitating and participating in the development,</p>

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	<p>review, and evaluation of IFSPs; assisting families in identifying available service providers; coordinating and monitoring the delivery of available services; informing families of the availability of advocacy services; coordinating with medical and health providers; and facilitating the development of a transition plan to preschool services, if appropriate. [34 CFR §303.23(a)(2) and (b)]</p> <p style="text-align: center;"><u>Comprehensive System of Personnel Development Provisions</u></p> <p>The State lead agency must have in effect, a comprehensive system of personnel development, including the training of paraprofessionals and the training of primary referral sources with respect to the basic components of early intervention services available in the State that shall include: implementing innovative strategies and activities for the recruitment and retention of early education service providers; promoting the preparation of early intervention providers who are fully and appropriately qualified to provide early intervention services under this part; and training personnel to coordinate transition services for infants and toddlers served under this part from a program providing early intervention services under this part and under Part B (other than section 619), to a preschool program receiving funds under section 619, or another appropriate program; and may include: training personnel to work in rural and inner-city areas; and training personnel in the emotional and social development of young children. Policies and procedures relating to the establishment and maintenance of qualifications to ensure that personnel necessary to carry out this part are appropriately and adequately prepared and trained, including the establishment and maintenance of qualifications that are consistent with any State-approved or recognized certification, licensing, registration, or other comparable requirements that apply to the area in which such personnel are providing early intervention services, except that nothing in this part (including this paragraph) shall be construed to prohibit the use of paraprofessionals and assistants who are appropriately trained and supervised in accordance with State law, regulation, or written policy, to assist in the provision of early intervention services under this part to infants and toddlers with disabilities. [20 U.S.C. 1435(a)(8) and (9); 34 CFR §§303.22, 303.360 and 303.361]</p> <p>A State lead agency may adopt a policy that includes making ongoing good-faith efforts to recruit and hire appropriately and adequately trained personnel to provide early intervention services to infants and toddlers with disabilities, including, in a geographic area of the State where there is a shortage of such personnel, the most qualified individuals available who are making satisfactory progress toward completing applicable course work necessary to meet the standards consistent with 1435(a)(9). [20 U.S.C. 1435(b); 34 CFR §§303.22 and 303.361]</p> <p style="text-align: center;"><u>Additional IFSP Provisions</u></p> <p>Each infant or toddler with a disability in the State must have an IFSP in accordance with 20 U.S.C. 1436, including service coordination services in accordance with such service plan. [20 U.S.C. 1435(a)(4)]</p> <p>The State lead agency must ensure that each initial meeting and each annual meeting to evaluate</p>

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	<p>the IFSP includes the following participants: the parent or parents of the child; other family members, as requested by the parent, if feasible to do so; an advocate or person outside of the family, if the parent requests that the person participate; the service coordinator who has been working with the family since the initial referral of the child for evaluation, or who has been designated by the public agency to be responsible for implementation of the IFSP; and a person or persons directly involved in conducting the evaluations and assessments in 34 CFR §303.322; and as appropriate, persons who will be providing services to the child or family. If a person listed in 34 CFR §303.343 is unable to attend a meeting, arrangements must be made for the person's involvement through other means, including participating in a telephone conference call; having a knowledgeable authorized representative attend the meeting; or making pertinent records available at the meeting. Each periodic review must provide for the participation of persons listed in 34 CFR §303.343. If conditions warrant, provisions must be made for the participation of other representatives identified. [34 CFR §303.343]</p>
<p>2. Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or programs for typically developing children.</p> <p>[20 U.S.C. 1416(a)(3)(A) and 1442]</p>	<p>Infants and toddlers and their families to the maximum extent appropriate, are provided services in natural environments, including the home, and community settings in which children without disabilities participate. Natural environments means settings that are natural or normal for the child's age peers who have no disabilities. [20 U.S.C. 1432(4)(G); 34 CFR §§303.12(b) and 303.18].</p> <p>The State lead agency shall provide data each year to the Secretary of Education and the public on the number and percentage of children with disabilities, by race, ethnicity, limited English proficiency status, gender, and disability category, who are in settings other than the natural environment consistent with the provision of appropriate early intervention services to infants and toddlers with disabilities. [20 U.S.C. 1418(a)(1)(A)(iii); 1442(3)]</p> <p>The State lead agency must have interagency agreements in effect that define the financial responsibility, in accordance with 34 CFR §303.143, of the agency for paying for early intervention services (consistent with State law and the requirements of this part). [34 CFR §303.523(b)]</p> <p>The State lead agency has a statewide system that includes policies and procedures consistent with 20 U.S.C. 1436(d)(5) 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 with a disability occurs in a setting other than a natural environment that is most appropriate, as determined by the parent and the IFSP team, only when early intervention cannot be achieved satisfactorily for the infant or toddler in a natural environment. [20 U.S.C. 1435(a)(16)]</p> <p>The IFSP shall contain a statement of the natural environments in which early intervention services will appropriately be provided, including a justification of the extent, if any, to which the services will not be provided in a natural environment. [20 U.S.C. 1436(d)(5); 34 CFR §303.344(d)(ii)]</p>

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<p>3. Percent of infants and toddlers with IFSPs who demonstrate improved:</p> <ul style="list-style-type: none"> A. Positive social-emotional skills (including social relationships); B. Acquisition and use of knowledge and skills (including early language/communication); and C. Use of appropriate behaviors to meet their needs. <p>[20 U.S.C. 1416(a)(3)(A) and 1442]</p>	<p>The State lead agency must have a statewide system as described in 20 U.S.C. 1433 that provides for each infant or toddler with a disability, and the infant's or toddler's family, to receive: a multidisciplinary assessment of the unique strengths and needs of the infant or toddler and the identification of services appropriate to meet such needs. The IFSP shall be in writing and contain a statement of the infant's or toddler's present levels of physical development, cognitive development, communication development, social or emotional development, and adaptive development, based on objective criteria; a statement of the family's resources, priorities, and concerns relating to enhancing the development of the family's infant or toddler with a disability; a statement of the measurable results or outcomes expected to be achieved for the infant or toddler and the family, including pre-literacy and language skills, as developmentally appropriate for the child, and the criteria, procedures, and timelines used to determine the degree to which progress toward achieving the results or outcomes is being made and whether modifications or revisions of the results or outcomes or services are necessary. [20 U.S.C. 1436(a)(1), (d)(1) through (3)]</p> <p>The IFSP must contain information about the child's status. The IFSP must include a statement of the child's present levels of physical development (including vision, hearing, and health status), cognitive development, communication development, social or emotional development, and adaptive development. The statement in 34 CFR §303.344(a)(1) must be based on professionally acceptable objective criteria. With the concurrence of the family, the IFSP must include a statement of the family's resources, priorities, and concerns related to enhancing the development of the child. The IFSP must include a statement of the major outcomes expected to be achieved for the child and family, and the criteria, procedures, and timelines used to determine the degree to which progress toward achieving the outcomes is being made; and whether modifications or revisions of the outcomes or services are necessary. [34 CFR §303.344(a) through (c)]</p>
<p>4. Percent of families participating in Part C who report that early intervention services have helped the family:</p> <ul style="list-style-type: none"> A. Know their rights; B. Effectively communicate their children's needs; and C. Help their children develop and learn. <p>[20 U.S.C. 1416(a)(3)(A) and 1442]</p>	<p>The State lead agency must have a statewide system that provides for each infant or toddler with a disability and the infant's or toddler's family to receive a family-directed assessment of the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of the infant or toddler. The evaluation and assessment of each child must be conducted by personnel trained to utilize appropriate methods and procedures; be based on informed clinical opinion; and include the following: a review of pertinent records related to the child's current health status and medical history; an evaluation of the child's level of functioning in each of the following developmental areas: cognitive development; physical development, including vision and hearing; communication development; social or emotional development; adaptive development; and an assessment of the unique needs of the child in terms of each of the developmental areas in 34 CFR §303.322(c)(3)(ii), including the identification of services appropriate to meet those needs. Family assessments must be family-directed and designed to determine the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to</p>

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	<p>meet the developmental needs of the child. Any assessment that is conducted must be voluntary on the part of the family. If an assessment of the family is carried out, the assessment must be conducted by personnel trained to utilize appropriate methods and procedures; be based on information provided by the family through a personal interview; and incorporate the family's description of its resources, priorities, and concerns related to enhancing the child's development. [20 U.S.C. 1436(a)(2); 34 CFR §303.322(c) and (d)]</p> <p>The IFSP shall be in writing and contain a statement of the infant's or toddler's present levels of physical development, cognitive development, communication development, social or emotional development, and adaptive development, based on objective criteria; a statement of the family's resources, priorities, and concerns relating to enhancing the development of the family's infant or toddler with a disability; a statement of the measurable results or outcomes expected to be achieved for the infant or toddler and the family, including pre-literacy and language skills, as developmentally appropriate for the child, and the criteria, procedures, and timelines used to determine the degree to which progress toward achieving the results or outcomes is being made and whether modifications or revisions of the results or outcomes or services are necessary; a statement of specific early intervention services based on peer-reviewed research, to the extent practicable, necessary to meet the unique needs of the infant or toddler and the family, including the frequency, intensity, and method of delivering services. [20 U.S.C. 1436(d)]</p> <p>The contents of the IFSP shall be fully explained to the parents and informed written consent from the parents shall be obtained prior to the provision of early intervention services described in such plan. If the parents do not provide consent with respect to a particular early intervention service, then only the early intervention services to which consent is obtained shall be provided. [20 U.S.C. 1436(e)]</p> <p>The State lead agency shall have policies and procedures in effect that ensure that the provisions of procedural safeguards that are required to be included in a statewide system under 20 U.S.C. 1435(a)(13) and that meet the requirements in 20 U.S.C. 1439; 34 CFR §§303.400 through 303.460. [20 U.S.C. 1439 and 1415(e); 34 CFR §§303.400 through 303.460]</p>
<p>5. Percent of infants and toddlers birth to 1 with IFSPs compared to:</p> <p>A. Other States with similar eligibility definitions; and</p> <p>B. National data.</p> <p>[20 U.S.C. 1416(a)(3)(B) and 1442]</p> <p>6. Percent of infants and toddlers birth to 3 with IFSPs compared to:</p>	<p>The State lead agency shall provide data each year to the Secretary and the public on the following: the number and percentage of children with disabilities by race, gender, and ethnicity, who are receiving early intervention services; and the number and percentage of infants and toddlers, by race, and ethnicity, who are at risk of having substantial developmental delays (as defined in 20 U.S.C. 1432), and who are receiving early intervention services under Part C. [20 U.S.C. 1418(a)(1)(B) and (a)(2)]</p> <p style="text-align: center;"><u>Eligibility Criteria</u></p> <p>The State lead agency must have policies and procedures in effect that ensure a rigorous definition</p>

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<p>A. Other States with similar eligibility definitions; and</p> <p>B. National data.</p> <p>[20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p>of the term developmental delay that will be used by the State in carrying out programs under this part in order to appropriately identify infants and toddlers with disabilities that are in need of services under this part. [20 U.S.C. 1435(a)(1)]</p> <p>The statewide system of early intervention services must include the eligibility criteria and procedures, consistent with 34 CFR §303.16, that will be used by the State in carrying out programs under this part. The State shall define developmental delay by describing, for each of the areas listed in 34 CFR §303.16(a)(1), the procedures, including the use of informed clinical opinion, that will be used to measure a child's development; and stating the levels of functioning or other criteria that constitute a developmental delay in each of those areas. The State lead agency shall describe the criteria and procedures, including the use of informed clinical opinion, that will be used to determine the existence of a condition that has a high probability of resulting in developmental delay under 34 CFR §303.16(a)(2). If the State elects to include in its system children who are at risk under 34 CFR §303.16(b), the State shall describe the criteria and procedures, including the use of informed clinical opinion, that will be used to identify those children. [34 CFR §303.300]</p> <p style="text-align: center;"><u>Comprehensive Child Find System Provisions</u></p> <p>The State lead agency must have a comprehensive child find system, consistent with Part B, including a system for making referrals to service providers that includes timelines and provides for participation by primary referral sources and that ensures rigorous standards for appropriately identifying infants and toddlers with disabilities for services under this part that will reduce the need for future services. [20 U.S.C. 1435(a)(5)]</p> <p>The State lead agency, with the advice and assistance of the Interagency Coordinating Council, shall be responsible for implementing the child find system. The child find system must include the policies and procedures that the State will follow to ensure that: all infants and toddlers in the State who are eligible for services under this part are identified, located, and evaluated; and an effective method is developed and implemented to determine which children are receiving needed early intervention services. [34 CFR §303.321(a)(2) and (b)]</p> <p>The State lead agency, with the assistance of the Interagency Coordinating Council, shall ensure that the child find system under this part is coordinated with all other major efforts to locate and identify children conducted by other State agencies responsible for administering the various education, health, and social service programs relevant to this part, tribes and tribal organizations that receive payments under this part, and other tribes and tribal organizations as appropriate, including efforts in the: program authorized under Part B of the Act; Maternal and Child Health program under title V of the Social Security Act; Early Periodic Screening, Diagnosis and Treatment (EPSDT) program under title XIX of the Social Security Act; Developmental Disabilities Assistance and Bill of Rights Act; Head Start Act; and Supplemental Security Income program under title XVI of the Social Security Act. The State lead agency, with the advice and assistance of the Council, shall take steps to ensure that:</p>

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	<p>there will not be unnecessary duplication of effort by the various agencies involved in the State's child find system under this part; and the State will make use of the resources available through each public agency in the State to implement the child find system in an effective manner. [34 CFR §303.321(c)]</p> <p>The child find system must include procedures for use by primary referral sources for referring a child to the appropriate public agency within the system for: evaluation and assessment, in accordance with 34 CFR §§303.322 and 303.323; or as appropriate, the provision of services, in accordance with 34 CFR §§303.342(a) or 303.345. The procedures required in 34 CFR §303.322 (b)(1) must: provide for an effective method of making referrals by primary referral sources; ensure that referrals are made no more than two working days after a child has been identified; and include procedures for determining the extent to which primary referral sources, especially hospitals and physicians, disseminate the information, as described in 34 CFR §303.320, prepared by the State lead agency on the availability of early intervention services to parents of infants and toddlers with disabilities. Primary referral sources include: hospitals, including prenatal and postnatal care facilities; physicians; parents; day care programs; local educational agencies; public health facilities; other social service agencies; and other health care providers. [34 CFR §303.321(d)]</p> <p style="text-align: center;"><u>Public Awareness Provisions</u></p> <p>The Statewide system must include procedures for public agencies to act on referrals. Once the public agency receives a referral, it shall appoint a service coordinator as soon as possible. Within 45 days after it receives a referral, the public agency shall: complete the evaluation and assessment activities in 34 CFR §303.322; and hold an IFSP meeting, in accordance with 34 CFR §303.342. [34 CFR §303.321(e)]</p> <p>The Statewide system must include a public awareness program focusing on early identification of infants and toddlers with disabilities, including the preparation and dissemination by the lead agency designated or established under 20 U.S.C. 1435(a)(10) to all primary referral sources, especially hospitals and physicians, of information to be given to parents, especially to inform parents with premature infants, or infants with other physical risk factors associated with learning or developmental complications, on the availability of early intervention services under this part and of services under section 619, and procedures for assisting such sources in disseminating such information to parents of infants and toddlers with disabilities. [20 U.S.C. 1435(a)(6); 34 CFR §303.320]</p> <p>The Statewide system must include a central directory that includes information on early intervention services, resources, and experts available in the State and research and demonstration projects being conducted in the State. [20 U.S.C. 1435(a)(7)]</p> <p>The Statewide system must include a central directory of information about: public and private early intervention services, resources, and experts available in the State; research and demonstration</p>

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	<p>projects being conducted in the State; and professional and other groups that provide assistance to children eligible under this part and their families. The information required in 34 CFR §303.301(a) must be in sufficient detail to: ensure that the general public will be able to determine the nature and scope of the services and assistance available from each of the sources listed in the directory; and enable the parent of a child eligible under this part to contact, by telephone or letter, any of the sources listed in the directory. The central directory must be: updated at least annually; and accessible to the general public. To meet the requirements in 34 CFR §303.301(c)(2), the State lead agency shall arrange for copies of the directory to be available in each geographic region of the State, including rural areas; and in places and a manner that ensure accessibility by persons with disabilities. [34 CFR §303.301]</p>
<p>7. Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline. [20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p>The Statewide system must include procedures for public agencies to act on referrals. Once the public agency receives a referral, it shall appoint a service coordinator as soon as possible. Within 45 days after it receives a referral, the public agency shall: complete the evaluation and assessment activities in 34 CFR §303.322; and hold an IFSP meeting, in accordance with 34 CFR §303.342. [34 CFR §303.321(e)(2)]</p> <p>Except as provided in 34 CFR §303.322(e)(2), the evaluation and initial assessment of each child (including the family assessment) must be completed within the 45-day time period required in 34 CFR §303.321(e). [34 CFR §303.322(e)(1)]</p> <p>The lead agency must have in effect procedures to ensure that for a child who has been evaluated for the first time and determined to be eligible, a meeting to develop the initial IFSP must be conducted within the 45-day time period in 34 CFR §303.321(e). [34 CFR §303.342(a)]</p> <p style="text-align: center;"><u>Referral, Evaluation and Assessment Provisions</u></p> <p>The State lead agency must have in effect policies and procedures to ensure that written prior notice is given to the parents of a child eligible under this part a reasonable time before a public agency or service provider proposes, or refuses, to initiate or change the identification, evaluation, or placement of the child, or the provision of appropriate early intervention services to the child and the child's family; the notice must be in sufficient detail to inform the parents about the action that is being proposed or refused; the reasons for taking the action; all procedural safeguards that are available under 34 CFR §303.401 through 303.460 of this part; and the State complaint procedures under 34 CFR §§303.510 through 303.512, including a description of how to file a complaint and the timelines under those procedures. The notice must be: written in language understandable to the general public; and provided in the native language of the parents, unless it is clearly not feasible to do so. If the native language or other mode of communication of the parent is not a written language, the public agency, or designated service provider, shall take steps to ensure that: the notice is translated orally or by other means to the parent in the parent's native language or other mode of communication; the parent understands the notice; and there is written evidence that the</p>

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	<p>requirements of this paragraph have been met. If a parent is deaf or blind, or has no written language, the mode of communication must be that normally used by the parent (such as sign language, braille, or oral communication). [34 CFR §303.403]</p> <p>The State lead agency must ensure that consent, native language and personally identifiable provisions as defined in 34 CFR §303.401 are implemented as follows: consent means the parent has been fully informed of all information relevant to the activity for which consent is sought, in the parent's native language or other mode of communication; the parent understands and agrees in writing to the carrying out of the activity for which consent is sought, and the consent describes that activity and lists the records (if any) that will be released and to whom; the parent understands that the granting of consent is voluntary on the part of the parent and may be revoked at any time; the native language where used with reference to persons of limited English proficiency, means the language or mode of communication normally used by the parent of a child eligible under this part; and personally identifiable information includes the name of the child, the child's parent, or other family member; the address of the child; a personal identifier, such as the child's or parent's social security number; or a list of personal characteristics or other information that would make it possible to identify the child with reasonable certainty. [34 CFR §303.401]</p> <p>The State lead agency must ensure that written parental consent is obtained before: conducting the initial evaluation and assessment of a child under 34 CFR §303.322; and initiating the provision of early intervention services (see 34 CFR §303.342(e)). If consent is not given, the public agency shall make reasonable efforts to ensure that the parent: is fully aware of the nature of the evaluation and assessment or the services that would be available; and understands that the child will not be able to receive the evaluation and assessment or services unless consent is given. [34 CFR §303.404]</p> <p>The State lead agency must have policies and procedures in effect to ensure that early intervention services for an eligible child and the child's family may commence before the completion of the evaluation and assessment in 34 CFR §303.322, if the following conditions are met: parental consent is obtained; an interim IFSP is developed that includes: the name of the service coordinator who will be responsible, consistent with 34 CFR §303.344(g), for implementation of the interim IFSP and coordination with other agencies and persons; and the early intervention services that have been determined to be needed immediately by the child and the child's family; and the evaluation and assessment are completed within the time period required in 34 CFR §303.322(e). [34 CFR §303.345]</p> <p>The State lead agency must ensure that evaluations and assessments are consistent with 34 CFR §303.322(b)(1). Evaluation means the procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility under this part, consistent with the definition of infants and toddlers with disabilities in 34 CFR §303.16, including determining the status of the child in each of the developmental areas in 34 CFR §303.322(c)(3)(ii). Assessment means the ongoing procedures used by appropriate qualified personnel throughout the period of a child's eligibility under</p>

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	<p>this part to identify the child's unique strengths and needs and the services appropriate to meet those needs; and the resources, priorities, and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their infant or toddler with a disability. [34 CFR §303.322(b)(1) and (2)]</p> <p>The evaluation and assessment of each child must be conducted by personnel trained to utilize appropriate methods and procedures; be based on informed clinical opinion; and include the following: a review of pertinent records related to the child's current health status and medical history; an evaluation of the child's level of functioning in each of the following developmental areas: cognitive development; physical development, including vision and hearing; communication development; social or emotional development; adaptive development; an assessment of the unique needs of the child in terms of each of the developmental areas in 34 CFR §303.322(c)(3)(ii), including the identification of services appropriate to meet those needs. Family assessments must be family-directed and designed to determine the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of the child. Any assessment that is conducted must be voluntary on the part of the family. If an assessment of the family is carried out, the assessment must be conducted by personnel trained to utilize appropriate methods and procedures; be based on information provided by the family through a personal interview; and incorporate the family's description of its resources, priorities, and concerns related to enhancing the child's development. [34 CFR §303.322(c) and (d)]</p> <p>The State lead agency shall develop procedures to ensure that in the event of exceptional circumstances that make it impossible to complete the evaluation and assessment within 45 days (e.g., if a child is ill), public agencies will document those circumstances; and develop and implement an interim IFSP, to the extent appropriate and consistent with 34 CFR §303.345(b)(1) and (b)(2). With the parents' consent, early intervention services may commence prior to the completion of the assessment. [20 U.S.C. 1436(c); 34 CFR §303.322(e)(2)]</p> <p>The State lead agency shall adopt nondiscriminatory evaluation and assessment procedures. The procedures must provide that public agencies responsible for the evaluation and assessment of children and families under this part shall ensure, at a minimum, that: tests and other evaluation materials and procedures are administered in the native language of the parents or other mode of communication, unless it is clearly not feasible to do so; any assessment and evaluation procedures and materials that are used are selected and administered so as not to be racially or culturally discriminatory; no single procedure is used as the sole criterion for determining a child's eligibility under this part; and evaluations and assessments are conducted by qualified personnel. [34 CFR §300.323]</p> <p>Each Interagency Coordinating Council shall assist the State lead agency in the effective implementation of the statewide system, by establishing a process that includes seeking information</p>

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	<p>from service providers, service coordinators, parents, and others about any Federal, State, or local policies that impede timely service delivery; and taking steps to ensure that any policy problems identified under 34 CFR §303.650(a)(3)(i) are resolved. [34 CFR §303.650(a)(3)]</p> <p style="text-align: center;"><u>IFSP Provisions</u></p> <p>Each infant or toddler with a disability in the State must have an IFSP in accordance with 20 U.S.C. 1436, including service coordination services in accordance with such service plan. [20 U.S.C. 1435(a)(4)]</p> <p>The State lead agency must have a statewide system as described in 20 U.S.C. 1433 that provides for each infant or toddler with a disability, and the infant's or toddler's family, to receive: a multidisciplinary assessment of the unique strengths and needs of the infant or toddler and the identification of services appropriate to meet such needs; a family-directed assessment of the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of the infant or toddler; and a written IFSP developed by a multidisciplinary team, including the parents, as required by 20 U.S.C. 1436(e), including a description of the appropriate transition services for the infant or toddler. The IFSP shall be evaluated once a year and the family shall be provided a review of the plan at 6-month intervals (or more often where appropriate, based on infant or toddler and family needs). The IFSP shall be developed within a reasonable time after the assessment required by 20 U.S.C. 1436(a)(1) is completed. With the parents' consent, early intervention services may commence prior to the completion of the assessment [20 U.S.C. 1436(a) through (c)]</p> <p>The State lead agency must have policies and procedures in effect to ensure that early intervention services for an eligible child and the child's family may commence before the completion of the evaluation and assessment in 34 CFR §303.322, if the following conditions are met: parental consent is obtained; an interim IFSP is developed that includes: the name of the service coordinator who will be responsible, consistent with 34 CFR §303.344(g), for implementation of the interim IFSP and coordination with other agencies and persons; and the early intervention services that have been determined to be needed immediately by the child and the child's family; and the evaluation and assessment are completed within the time period required in 34 CFR §303.322(e). [34 CFR §303.345]</p> <p>The IFSP shall be in writing and contain a statement of the infant's or toddler's present levels of physical development, cognitive development, communication development, social or emotional development, and adaptive development, based on objective criteria; a statement of the family's resources, priorities, and concerns relating to enhancing the development of the family's infant or toddler with a disability; a statement of the measurable results or outcomes expected to be achieved for the infant or toddler and the family, including pre-literacy and language skills, as developmentally appropriate for the child, and the criteria, procedures, and timelines used to determine the degree to</p>

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	<p>which progress toward achieving the results or outcomes is being made and whether modifications or revisions of the results or outcomes or services are necessary; a statement of specific early intervention services based on peer-reviewed research, to the extent practicable, necessary to meet the unique needs of the infant or toddler and the family, including the frequency, intensity, and method of delivering services; a statement of the natural environments in which early intervention services will appropriately be provided, including a justification of the extent, if any, to which the services will not be provided in a natural environment; the projected dates for initiation of services and the anticipated length, duration, and frequency of the services; the identification of the service coordinator from the profession most immediately relevant to the infant's or toddler's or family's needs (or who is otherwise qualified to carry out all applicable responsibilities under this part) who will be responsible for the implementation of the plan and coordination with other agencies and persons, including transition services; and the steps to be taken to support the transition of the toddler with a disability to preschool or other appropriate services. [20 U.S.C. 1436(d); 34 CFR §303.344]</p> <p>The contents of the IFSP shall be fully explained to the parents and informed written consent from the parents shall be obtained prior to the provision of early intervention services described in such plan. If the parents do not provide consent with respect to a particular early intervention service, then only the early intervention services to which consent is obtained shall be provided. [20 U.S.C. 1436(e)]</p> <p>The State lead agency must ensure that an IFSP is developed and implemented for each eligible child, in accordance with the requirements of this part. If there is a dispute between agencies as to who has responsibility for developing or implementing an IFSP, the State lead agency shall resolve the dispute or assign responsibility. [34 CFR §303.340(c)]</p> <p>The State lead agency must ensure that each initial meeting and each annual meeting to evaluate the IFSP includes the following participants: the parent or parents of the child; other family members, as requested by the parent, if feasible to do so; an advocate or person outside of the family, if the parent requests that the person participate; the service coordinator who has been working with the family since the initial referral of the child for evaluation, or who has been designated by the public agency to be responsible for implementation of the IFSP; a person or persons directly involved in conducting the evaluations and assessments in 34 CFR §303.322; as appropriate, persons who will be providing services to the child or family. If a person listed in 34 CFR §303.343(a)(1)(v) is unable to attend a meeting, arrangements must be made for the person's involvement through other means, including participating in a telephone conference call; having a knowledgeable authorized representative attend the meeting; or making pertinent records available at the meeting. Each periodic review must provide for the participation of persons listed in 34 CFR §303.343. If conditions warrant, provisions must be made for the participation of other representatives identified. [34 CFR §303.343]</p>

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	<p style="text-align: center;"><u>Service Coordination Provisions</u></p> <p>The State lead agency has policies and procedures in effect to ensure that service coordination activities are carried out by a service coordinator to assist and enable a child eligible under this part and the child's family to receive the rights, procedural safeguards, and services that are authorized to be provided under the State's early intervention program. [34 CFR §303.23(a)]</p> <p>The State lead agency must ensure that each child eligible under this part and the child's family are provided with one service coordinator who is responsible for coordinating all services across agency lines and serving as the single point of contact in helping parents to obtain the services and assistance they need. Service coordination is an active, ongoing process that involves: assisting parents of eligible children in gaining access to the early intervention services and other services identified in the IFSP; coordinating the provision of early intervention services and other services (such as medical services for other than diagnostic and evaluation purposes) that the child needs or is being provided; facilitating the timely delivery of available services; and 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. Service coordination activities include coordinating the performance of evaluations and assessments; facilitating and participating in the development, review, and evaluation of IFSPs; assisting families in identifying available service providers; coordinating and monitoring the delivery of available services; informing families of the availability of advocacy services; coordinating with medical and health providers; and facilitating the development of a transition plan to preschool services, if appropriate. [34 CFR §303.23(a)(2) and (b)]</p> <p style="text-align: center;"><u>Comprehensive System of Personnel Development Provisions</u></p> <p>The State lead agency must have in effect, a comprehensive system of personnel development, including the training of paraprofessionals and the training of primary referral sources with respect to the basic components of early intervention services available in the State that shall include: implementing innovative strategies and activities for the recruitment and retention of early education service providers; promoting the preparation of early intervention providers who are fully and appropriately qualified to provide early intervention services under this part; and training personnel to coordinate transition services for infants and toddlers served under this part from a program providing early intervention services under this part and under Part B (other than section 619), to a preschool program receiving funds under section 619, or another appropriate program; and may include: training personnel to work in rural and inner-city areas; and training personnel in the emotional and social development of young children. Policies and procedures relating to the establishment and maintenance of qualifications to ensure that personnel necessary to carry out this part are appropriately and adequately prepared and trained, including the establishment and maintenance of qualifications that are consistent with any State-approved or recognized certification, licensing, registration, or other comparable requirements that apply to the area in which such personnel are providing early intervention services, except that nothing in this part (including this</p>

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	<p>paragraph) shall be construed to prohibit the use of paraprofessionals and assistants who are appropriately trained and supervised in accordance with State law, regulation, or written policy, to assist in the provision of early intervention services under this part to infants and toddlers with disabilities. [20 U.S.C. 1435(a)(8) and (9); 34 CFR §§303.22, 303.360 and 303.361]</p> <p>A State lead agency may adopt a policy that includes making ongoing good-faith efforts to recruit and hire appropriately and adequately trained personnel to provide early intervention services to infants and toddlers with disabilities, including, in a geographic area of the State where there is a shortage of such personnel, the most qualified individuals available who are making satisfactory progress toward completing applicable course work necessary to meet the standards consistent with 1435(a)(9). [20 U.S.C. 1435(b); 34 CFR §303.22]</p>
<p>8. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:</p> <ul style="list-style-type: none"> A. IFSPs with transition steps and services; B. Notification to LEA, if child potentially eligible for Part B; and C. Transition conference, if child potentially eligible for Part B. <p>[20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p>The Statewide system shall ensure for each infant or toddler with a disability, and the infant's or toddler's family, that a written IFSP is developed by a multidisciplinary team, including the parents, as required by 20 U.S.C. 1436(e), including a description of the appropriate transition services for the infant or toddler. The IFSP shall include the steps to be taken to support the transition of the toddler with a disability to preschool or other appropriate services, to the extent that those services are appropriate. The steps required must include discussions with, and training of, parents regarding future placements and other matters related to the child's transition; procedures to prepare the child for changes in service delivery, including steps to help the child adjust to, and function in, a new setting; and with parental consent, the transmission of information about the child to the local educational agency, to ensure continuity of services, including evaluation and assessment information required in 34 CFR §303.322, and copies of IFSPs that have been developed and implemented in accordance with 34 CFR §§303.340 through 303.346. [20 U.S.C. 1436(a)(3) and (d)(8); 34 CFR §303.344(h)]</p> <p>The State lead agency must have policies and procedures in effect to ensure a smooth transition for toddlers receiving early intervention services under this part (and children receiving those services under 20 U.S.C. 1435(c)) to preschool, school, other appropriate services, or exiting the program, including a description of how the families of such toddlers and children will be included in the transition plans required by 20 U.S.C. 1437(a)(9)(C); and the lead agency designated or established under 20 U.S.C. 1435(a)(10) will notify the local educational agency for the area in which such a child resides that the child will shortly reach the age of eligibility for preschool services under Part B, as determined in accordance with State law; in the case of a child who may be eligible for such preschool services, with the approval of the family of the child, convene a conference among the lead agency, the family, and the local educational agency not less than 90 days (and at the discretion of all such parties, not more than 9 months) before the child is eligible for the preschool services, to discuss any such services that the child may receive; and in the case of a child who may not be eligible for such preschool services, with the approval of the family, make reasonable efforts to convene a conference among the lead agency, the family, and providers of other appropriate</p>

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	<p>services for children who are not eligible for preschool services under Part B, to discuss the appropriate services that the child may receive; to review the child's program options for the period from the child's third birthday through the remainder of the school year; and to establish a transition plan, including, as appropriate, steps to exit from the program. [20 U.S.C. 1437(a)(9); 34 CFR §303.148]</p> <p>If the State educational agency, which is responsible for administering preschool programs under Part B of the Act, is not the lead agency under this part, the State lead agency must have an interagency agreement between the two agencies to ensure coordination on transition matters. [34 CFR §303.148(c)]</p> <p style="text-align: center;"><u>Service Coordination Provisions</u></p> <p>The State lead agency has policies and procedures in effect to ensure that service coordination activities are carried out by a service coordinator to assist and enable a child eligible under this part and the child's family to receive the rights, procedural safeguards, and services that are authorized to be provided under the State's early intervention program. [34 CFR §303.23(a)]</p> <p>The State lead agency must ensure that each child eligible under this part and the child's family are provided with one service coordinator who is responsible for coordinating all services across agency lines and serving as the single point of contact in helping parents to obtain the services and assistance they need. [34 CFR §303.23(a)(2)] Service coordination includes facilitating the development of a transition plan to preschool services, if appropriate. [34 CFR §303.23(b)]</p> <p style="text-align: center;"><u>Comprehensive System of Personnel Development Provisions</u></p> <p>The State lead agency must have in effect, a comprehensive system of personnel development, including the training of paraprofessionals and the training of primary referral sources with respect to the basic components of early intervention services available in the State that shall include training personnel to coordinate transition services for infants and toddlers served under this part from a program providing early intervention services under this part and under Part B (other than section 619), to a preschool program receiving funds under section 619, or another appropriate program. [20 U.S.C. 1435(a)(8)(iii); 34 CFR §§303.22 and 303.361]</p>
<p>9. General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.</p> <p>[20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p>The State lead agency must monitor the implementation of Part C by early intervention service providers; and enforce Part C in accordance with 20 U.S.C. 1416(a)(3) and subsection (e). [20 U.S.C. 1416(a)(1)(C); 34 CFR §§303.500 and 303.501]</p> <p>The primary focus of State monitoring activities described in 20 U.S.C. 1416(a)(1) shall be on improving results and functional outcomes for all children with disabilities; and ensuring that States meet the program requirements under Part C, with a particular emphasis on those requirements that are most closely related to improving developmental results for children with disabilities. [20 U.S.C.</p>

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	<p>1416(a)(2) and 1442; 34 CFR §303.3]</p> <p>The State lead agency shall monitor the early intervention service providers located in the State (except the State exercise of general supervisory responsibility), agencies located in the State, using quantifiable indicators in each of the following priority areas, and using such qualitative indicators as are needed to adequately measure performance in the following priority areas: provision of services in the natural environment; State exercise of general supervisory authority, including child find, effective monitoring, the use of resolution sessions, mediation, voluntary binding arbitration; and a system of transition services as defined in section 637(a)(9). The Secretary shall consider other relevant information and data, including data provided by States under section 618. [20 U.S.C. 1416(a)(3) and (4) and 1442]</p> <p>The State lead agency must submit a State Performance Plan (SPP) that evaluates the State’s efforts to implement the requirements and purposes of Part C and describes how the State will improve such implementation. Each State shall submit the SPP to the Secretary for approval in accordance with the approval process described in 20 U.S.C. 1416(C). Each State shall review its SPP at least once every 6 years and submit any amendments to the Secretary. The State lead agency shall establish measurable and rigorous targets for the indicators established under the priority areas described in 20 U.S.C. 1416 (a)(3). The State lead agency shall collect valid and reliable information as needed to report annually to the Secretary on the priority areas described in 20 U.S.C. 1416(a)(3). [20 U.S.C 1416(b)(1) and (b)(2)(A) and (B)(i) and 1442]</p> <p>The State lead agency shall use the targets established in the SPP and priority areas described in 20 U.S.C. 1416(a)(3) to analyze the performance of each early intervention service provider in the State in implementing Part C. The State lead agency shall report annually to the public on the performance of each early intervention service provider located in the State on the targets in the SPP. The State lead agency shall make the SPP available through public means, including by posting on the website of the State lead agency, distribution to the media, and distribution through public agencies. The State lead agency shall report annually to the Secretary on the performance of the State under the SPP. The State lead agency shall not report to the public or the Secretary any information on performance that would result in the disclosure of personally identifiable information about individual children or where the available data is insufficient to yield statistically reliable information. [20 U.S.C. 1416(b)(2)(C) and 1442; 34 CFR §80.40]</p> <p>The State lead agency must ensure that a single line of responsibility is designated or established by the Governor for carrying out: the general administration and supervision of programs and activities receiving assistance under 20 U.S.C. 1433, and the monitoring of programs and activities used by the State to carry out this part, whether or not such programs or activities are receiving assistance made available under 1433, to ensure that the State complies with this part. The State lead agency must ensure that the identification and coordination of all available resources within the State from Federal, State, local, and private sources; the assignment of financial responsibility in accordance</p>

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	<p>with 20 U.S.C. 1437(a)(2) to the appropriate agencies; the development of procedures to ensure that services are provided to infants and toddlers with disabilities and their families under this part in a timely manner pending the resolution of any disputes among public agencies or service providers; the resolution of intra- and interagency disputes; and the entry into formal interagency agreements that define the financial responsibility of each agency for paying for early intervention services (consistent with State law) and procedures for resolving disputes and that include all additional components necessary to ensure meaningful cooperation and coordination. [20 U.S.C. 1435(a)(10)]</p> <p>In the case of any State which applies, contracts, or submits a plan for participation in any applicable program in which Federal funds are made available for assistance to early intervention service providers through, or under the supervision of, the lead agency of that State, the State provides assurances to the Secretary that the State will adopt and use proper methods of administering each applicable program, including: monitoring of agencies, institutions, and organizations responsible for carrying out each program, and the enforcement of any obligations imposed on those agencies, institutions, and organizations under law; providing technical assistance, where necessary, to such agencies, institutions, and organizations; encouraging the adoption of promising or innovative educational techniques by such agencies, institutions, and organizations; the dissemination throughout the State of information on program requirements and successful practices; and the correction of deficiencies in program operations that are identified through monitoring or evaluation. [20 U.S.C. 1232d(b)(3)(GEPA); 34 CFR §§303.500 and 303.501]</p> <p>The State lead agency shall, before submitting to the Secretary its application under Part C, and before adopting a new or revised policy that is not in its current application, ensure that the provisions at 34 CFR §§303.110 through 303.113 are met. These provisions require holding public hearings, providing adequate notice of the hearings, and an opportunity for comment available to the general public, including individuals with disabilities and parents of infants and toddlers with disabilities. [34 CFR §§303.110 through 303.113]</p> <p>The council shall advise and assist the lead agency designated or established under 20 U.S.C. 1435(a)(10) in the performance of the responsibilities set forth in 20 U.S.C. 1435(a)(10), particularly the identification of the sources of fiscal and other support for services for early intervention programs, assignment of financial responsibility to the appropriate agency, and the promotion of the interagency agreements; advise and assist the lead agency in the preparation of applications and amendments thereto; advise and assist the State educational agency regarding the transition of toddlers with disabilities to preschool and other appropriate services; and prepare and submit an annual report to the Governor and to the Secretary on the status of early intervention programs for infants and toddlers with disabilities and their families operated within the State. The council may advise and assist the lead agency and the State educational agency regarding the provision of appropriate services for children from birth through age 5. The council may advise appropriate agencies in the State with respect to the integration of services for infants and toddlers with</p>

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	<p>disabilities and at-risk infants and toddlers and their families, regardless of whether at-risk infants and toddlers are eligible for early intervention services in the State. No member of the council shall cast a vote on any matter that is likely to provide a direct financial benefit to that member or otherwise give the appearance of a conflict of interest under State law. [20 U.S.C. 1441(e) and (f); 34 CFR §§303.650 through 303.654]</p>
<p>10. Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint. [20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p>The State lead agency shall adopt written procedures consistent with 34 CFR §303.510 for resolving any complaint,¹ including a complaint filed by an organization or individual from another State, that any public agency or private service provider is violating a requirement of Part C of the Act or this part by providing for the filing of a complaint with the lead agency; and at the lead agency's discretion, providing for the filing of a complaint with a public agency and the right to have the lead agency review the public agency's decision on the complaint. [34 CFR §303.510]</p> <p>The State lead agency shall have policies and procedures in effect that ensure that an individual or organization may file a written signed complaint under 34 CFR §303.510. The complaint must include: a statement that the State has violated a requirement of Part C of the Act or the regulations in this part; and the facts on which the complaint is based. The alleged violation must have occurred not more than one year before the date that the complaint is received by the public agency unless a longer period is reasonable because: the alleged violation continues for that child or other children; or the complainant is requesting reimbursement or corrective action for a violation that occurred not more than three years before the date on which the complaint is received by the public agency. [34 CFR §303.511]</p> <p>The State lead agency shall include in its complaint procedures a time limit of 60 calendar days after a complaint is filed under 34 CFR §303.510(a) to: carry out an independent on-site investigation; issue a written decision to the complainant that addresses each allegation in the complaint and contains findings of fact and conclusions; and the reasons for the lead agency's final decision. The State lead agency's procedures described in 34 CFR §303.511(a) also must: permit an extension of the time limit under 34 CFR §303.511(a) of this section only if exceptional circumstances exist with respect to a particular complaint; and include procedures for effective implementation of the lead agency's final decision, if needed, including: technical assistance activities; negotiations; and corrective actions to achieve compliance. If a written complaint is received that is also the subject of a due process hearing under 34 CFR §303.420, or contains multiple issues, of which one or more are part of that hearing, the State must set aside any part of the complaint that is being addressed in the due process hearing until the conclusion of the hearing. However, any issue in the complaint that is not a part of the due process action must be resolved within the 60-calendar-day timeline using the complaint procedures described in paragraphs (a) and (b) of this section. If an issue is raised in a</p>

¹ The Part C regulations and this document use the term "complaint" when referring to State administrative complaint procedures in 34 CFR §§303.510 through 303.512. The term "request for due process hearing" or "due process hearing complaint" is used when referring to the due process hearing procedures under 34 CFR §303.420.

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	<p>complaint filed under this section that has previously been decided in a due process hearing involving the same parties: the hearing decision is binding; and the lead agency must inform the complainant to that effect. A complaint alleging a public agency's or private service provider's failure to implement a due process decision must be resolved by the lead agency. [34 CFR §303.512]</p>
<p>11. Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline. [20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p>The procedural safeguards shall include the timely administrative resolution of requests for due process hearing by parents. [20 U.S.C. 1439]</p> <p>The State lead agency must include written procedures including procedures for the timely administrative resolution of individual child complaints by parents concerning any of the matters in 34 CFR §303.403(a). A State lead agency may meet this requirement by adopting the mediation and due process procedures under Part B and developing procedures that meet the requirements of 34 CFR §303.425; or developing procedures that meet the requirements in 34 CFR §§303.419 and 303.421 through 303.425 and provide parents a means of filing a complaint. [34 CFR §303.420]</p> <p style="text-align: center;"><u>Part C Procedures</u></p> <p>The State lead agency must have policies and procedures in effect that ensures that an impartial person must be appointed consistent with 34 CFR §303.421(a)(1) and (b) to implement the due process hearing complaint resolution process in 34 CFR §303.421. The person must: have knowledge about the provisions of this part and the needs of, and services available for, eligible children and their families; and perform the duties consistent with 34 CFR §303.421(a)(2). [34 CFR §303.421]</p> <p>The State lead agency shall ensure that the parents of children eligible under this part are afforded the rights in 34 CFR §303.422(b) in any administrative proceedings carried out under 34 CFR §303.420. Any parent involved in an administrative proceeding has the right to: be accompanied and advised by counsel and by individuals with special knowledge or training with respect to early intervention services for children eligible under this part; present evidence and confront, cross-examine, and compel the attendance of witnesses; prohibit the introduction of any evidence at the proceeding that has not been disclosed to the parent at least five days before the proceeding; obtain a written or electronic verbatim transcription of the proceeding; and obtain written findings of fact and decisions. [34 CFR §303.422]</p> <p>Any proceeding for implementing the complaint resolution process must be carried out at a time and place that is reasonably convenient to the parents. The State lead agency shall ensure that, not later than 30 days after the receipt of a parent's complaint, the impartial proceeding required under 34 CFR §303.423 is completed and a written decision mailed to each of the parties. [34 CFR §303.423]</p> <p>Any party aggrieved by the findings and decision regarding an administrative complaint has the right to bring a civil action in State or Federal court under section 639(a)(1) of the Act. [34 CFR §303.424]</p>

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	<p>The State lead agency must ensure that during the pendency of any proceeding involving a complaint under this subpart, unless the public agency and parents of a child otherwise agree, the child must continue to receive the appropriate early intervention services currently being provided; and if the complaint involves an application for initial services under this part, the child must receive those services that are not in dispute. [34 CFR §303.425]</p> <p style="text-align: center;"><u>Part B Procedures</u></p> <p>Under 34 CFR §303.420(a), the State lead agency may adopt the Part B due process hearing procedures in lieu of the due process hearing procedures in 34 CFR §§303.420 through 303.424 and it must also adopt provisions consistent with 34 CFR §303.425. [34 CFR §303.420]</p>
<p>12. Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted by the lead agency under 34 CFR §303.420(a)).</p> <p>[20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p style="text-align: center;"><u>Part B Procedures</u></p> <p>Prior to the opportunity for an impartial due process hearing under 20 U.S.C. 1415(f)(1)(A), the local educational agency shall convene a meeting with the parents and the relevant member or members of the IEP team who have specific knowledge of the facts identified in the request for a due process hearing. The resolution session shall occur within 15 days of receiving notice of the parents' request for a due process hearing, include a representative of the agency who has decision-making authority, and may not include an attorney of the local educational agency unless the parent is accompanied by an attorney. In the resolution session parents of the child discuss their request for a due process hearing and the facts that form the basis of the request for a due process hearing, and the local educational agency is provided the opportunity to resolve the issues raised in the request for a due process hearing, unless the parents and the local educational agency agree in writing to waive such meeting, or agree to use the mediation process described in 20 U.S.C. 1415(e). [20 U.S.C. 1415(f)(1)(B)(i) and 1439 and 34 CFR §303.420(a)]</p> <p>If the local educational agency has not resolved the issues raised in the request for a due process hearing to the satisfaction of the parents within 30 days of the receipt of the request for a due process hearing, the due process hearing may occur, and all of the applicable timelines for a due process hearing under Part B shall commence. [20 U.S.C. 1415(f)(1)(B)(ii)]</p> <p>In a case where a resolution is reached, the parties shall execute a legally binding agreement that is signed by both the parent and a representative of the agency who has the authority to bind such agency and is enforceable in any State court of competent jurisdiction or in a district court of the United States. [20 U.S.C. 1415(f)(1)(B)(iii)]</p> <p>If the parties execute a legally binding agreement, a party may void such agreement within 3 business days of the agreement's execution. [20 U.S.C. 1415(f)(1)(B)(iv)]</p>
<p>13. Percent of mediations held that resulted in</p>	<p>The State lead agency shall ensure that procedures are established and implemented to allow</p>

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MONITORING PRIORITIES AND INDICATORS	RELATED REQUIREMENTS
<p>mediation agreements. [20 U.S.C. 1416(a)(3)(B) and 1442]</p>	<p>parties to disputes involving any matter, including matters arising prior to the filing of a complaint pursuant to 20 U.S.C. 1439(a), to resolve such disputes through mediation. [20 U.S.C. 1415(e) and 1439(a); 34 CFR §303.419]</p> <p>The mediation process shall be voluntary on the part of the parties, shall not be used to deny or delay a parent's right to a due process hearing, or to deny any other rights afforded under Part C, and shall be conducted by a qualified and impartial mediator who is trained in effective mediation techniques. [20 U.S.C. 1415(e)(2)(A) and 1439(a)(8); 34 CFR §303.419(b)]</p> <p>The State lead agency shall maintain a list of individuals who are qualified mediators and knowledgeable in laws and regulations relating to the provision of special education and related services. [20 U.S.C. 1415(e)(2)(C) and 1439(a)(8); 34 CFR §303.419(b)(2)]</p> <p>The State lead agency shall bear the cost of the mediation process. [20 U.S.C. 1415(e)(2)(D) and 1439(a)(8); 34 CFR §303.419(b)(3)]</p> <p>Each session in the mediation process shall be scheduled in a timely manner and shall be held in a location that is convenient to the parties to the dispute. [20 U.S.C. 1415(e)(2)(E) and 1439(a)(8); 34 CFR §303.419(b)(4)]</p> <p>If the parties resolve the dispute through the mediation process, the parties shall execute a legally binding agreement that sets forth such resolution and that states that all discussions that occurred during the mediation process shall be confidential and may not be used as evidence in any subsequent due process hearing or civil proceeding. The agreement shall be signed by both the parent and a representative of the agency who has the authority to bind such agency; and is enforceable in any State court of competent jurisdiction or in a district court of the United States. [20 U.S.C. 1415(e)(2)(F) and 1439(a)(8); 34 CFR §303.419(b)(5) and (6)]</p> <p>Discussions that occur during the mediation process shall be confidential and may not be used as evidence in any subsequent due process hearing or civil proceeding. [20 U.S.C. 1415(e)(2)(G)]</p> <p>The State lead agency may establish procedures to require parents who elect not to use the mediation process to meet, at a time and location convenient to the parents, with a disinterested party: who is under contract with a parent training and information center or community parent resource center in the State established under sections 682 or 683 of the Act, or an appropriate alternative dispute resolution entity; and who would explain the benefits of the mediation. [34 CFR §303.419(c)]</p>
<p>14. State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.</p>	<p>Each State lead agency must submit the State's performance plan to the Secretary for approval in accordance with the approval process described in 20 U.S.C. 1416(c). [20 U.S.C. 1416(b)(1)(B); 34 CFR §§303.540 and 80.40 (EDGAR)]</p>

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MONITORING PRIORITIES AND INDICATORS	RELATED REQUIREMENTS
[20 U.S.C. 1416(a)(3)(B) and 1442]	<p>The State lead agency shall report annually to the Secretary on the performance of the State under the State's performance plan. [20 U.S.C. 1416(b)(2)(C)(ii)(II); 34 CFR §§303.540 and 80.40(EDGAR)]</p> <p>Each State lead agency shall collect valid and reliable information as needed to report annually to the Secretary on the priority areas described in 20 U.S.C. 1416(a)(3). [20 U.S.C. 1416(b)(2)(B); 34 CFR §§303.540 and 80.40]</p> <p>Each State that receives assistance under Part B, and the Secretary of the Interior, shall provide data each year to the Secretary of Education and the public. The data shall be publicly reported by the State lead agency in a manner that does not result in the disclosure of data identifiable to individual children. [20 U.S.C. 1418(a) and (b)(1); 34 CFR §§303.540 and 80.40(EDGAR)]</p>