





ACKNOWLEDGMENTS

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EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

The State of Illinois has a strong vision statement that "Illinois commits to the inclusion of each and every child with special needs with typically developing peers in all early childhood environments" and has taken steps over the years to make this vision a reality through hosting summits, providing professional development and technical assistance, and developing materials.

However, currently only half of preschool age children (age 3-5) with disabilities receive the majority of their special education and related services in inclusive regular early childhood programs alongside young children without disabilities. There is also a recognition that children enrolled in community-based early childhood education programs often have to leave that setting to receive their IEP services at a school district site, or, parents have to either disenroll their child from the community-based setting and have them enroll in the school district preschool program, or in some cases, forgo IEP services in order to have them remain in the community-based (often full-day and year-round) program. This is despite the requirement that children eligible for the Individuals with Disabilities Education Act (Part B) must receive a Free and Appropriate Public Education (FAPE) in the Least Restrictive Environment (LRE), as well as federal guidance that IEP placement decisions for children with disabilities already participating in community-based early childhood education programs "must consider any potential harmful effect on the child and on the quality of services that he or she needs before removing the child from the current regular public preschool setting" and "unless the child's IEP requires some other arrangement, the child is educated in the school that he or she would attend if nondisabled" U.S. Department of Education Office of Special Education and Rehabilitative Services. (2017)

This report was commissioned by the Illinois State Board of Education (ISBE) and supported by the Center for Early Learning Funding Equity and Start Early. The report builds upon prior work in Illinois focused on promoting inclusion and the project included research to develop recommendations for potential service and funding models to advance quality inclusive special education and related services to preschoolers (3-5 years old) with disabilities enrolled in community-based early childhood education programs. The research included reviewing national literature and resources, looking at examples from other states, and hearing from a wide range of key community constituents.

The recommendations in this report take a systems approach that recognizes the fact that providing early childhood special education (ECSE) and related services on the child's IEP in community-based early childhood education settings will require changes across a number of systems to ensure services are effective and high quality. The following is a summary of the recommendations:

1) Service Model

Develop policy and services guidelines regarding the itinerant early childhood special education (IECSE) model in inclusive community-based early childhood education programs

consistent with federal guidance. Require districts to develop a memorandum of understanding (MOUs) with community-based early childhood education programs where children are enrolled and revise the state MOU template to include federal guidance topics to support effective collaboration.

2) Funding

Develop funding policy guidance that includes how districts can use federal, state, and local funding sources to support itinerant ECSE. Address options for supporting the provision of IEP services to out-of-district children attending community-based early childhood education programs, including MOUs between districts, use of cooperatives, and potentially changing state rules to allow districts to include these children in their annual 'child count' for funding. Also recommended is a cost study to evaluate the costs and current revenue generated per child for ECSE and potentially recommending potential funding formula changes for ECSE.

3) Data and Accountability

Expand data collection to enable reporting at the state and community level regarding the early childhood education programs where preschool children with disabilities are enrolled and receive the majority of their IEP services. Enhance technical assistance and accountability for districts with a low percentage of preschool children with IEPs served in inclusive regular early childhood education programs.

4) Community Collaborations and Partnerships

Formalize the current state-level inclusion leadership team and establish and support 'Community Inclusion Teams' (CITs), based on Illinois' pilot of the National Indicators of High-Quality Inclusion in 3 communities. Continue to support the following: inclusion in early childhood education and care programs through the roadmap for inclusion as part of the Child Care Development Fund; ExceleRate quality rating and improvement standards, guidelines, resources and supports to promote quality inclusion; and the 'Illinois Commission Report of Findings and Recommendation on Equitable Early Childhood Education and Care Funding' (2021) that calls for expanded investments to ensure equitable access to quality early childhood education and care.

5) Support and Guidance

Expand the availability of preschool Inclusion TA specialists to support CITs, assist districts to increase inclusive ECSE services, and promote quality itinerant ECSE practices. Develop guidance for measuring the federal indicators for Early Childhood Outcomes for preschool children with IEPs in community-based early childhood education programs.

6) Workforce and Professional Development

Make available training and coaching on itinerant ECSE practices and collaborative training for early childhood educators on their role to partner with IECSE professionals and promoting IECSE within higher education. Address challenges to pipeline and pathways to grow the number of ECSE and related service providers and paraprofessionals that are representative of the children served.

7) Family Engagement

Provide materials for parents, including those whose child is transitioning from early intervention (EI) Part C, that clearly lays out inclusion options, explains the itinerant models and the parent's role in the IEP team in making the placement decision for their child.

Enhance training for EI service coordinators to explain inclusive preschool options and support parents in their role in the IEP team in making the placement decision for their child.

These recommendations provide the necessary system supports at the state, community, and provider level to promote evidence-based IECSE to preschool children with disabilities in inclusive community-based early childhood education programs. The recommendations for advancing IECSE should not be interpreted as meaning that districts cannot also provide ECSE to preschool children with IEPs in inclusive classrooms on the school campus.



I. BACKGROUND

Purpose of the Project

Federal Least Restrictive Environments (LRE) requirements and Guidance Regarding Inclusion

National Organization Position Statements

Preschool Inclusion Efforts in Illinois

I. BACKGROUND

PURPOSE OF THE PROJECT

The purpose of this project was to:

Build upon the groundwork that has been laid that includes researching and developing recommendations for potential service and funding models for consideration to provide quality inclusive special education and related services to preschoolers (3-5 years old) with special needs, focusing on models which include community-based programs as part of the service delivery system.

Illinois has done a significant amount of work over the past several years to promote the inclusion of preschool children with disabilities and who have an Individualized Education Program (IEP), including hosting summits, strategic planning, developing materials, providing training and technical assistance, and piloting improvements in several communities. However, while more preschool children have been provided Early Childhood Special Education (ECSE) and related therapy services in preschool settings as districts have opened more Preschool For All and Preschool for All Expansion (PFA/PFAE) classrooms, preschool children with IEPS who are enrolled in community-based early childhood education (ECE) settings (Head Start, child care and PFA/PFAE) are often still required to be transported to a school setting to receive services or parents have to disenroll their child from the community early childhood education program to receive ECSE and related services at the district school preschool setting. This report was commissioned to recommend service and funding models to promote the provision of ECSE and related services in inclusive community-based ECE settings for preschool-age children (3-5 years old) with IEPs.

The Illinois Commission on Equitable Early Childhood Education and Care Funding Report of Findings and Recommendations (Spring 2021) recommended that the state move forward immediately "with a study on providing ECSE services in the mixed delivery system and the funding mechanisms and governance structures that can best support such an inclusive system". The report goes on to say that because preschool children with disabilities are not receiving their IEP services in community-based early childhood education programs, "many children are transported from their child care location to the school district for services prescribed in the IEP, or families end up foregoing work opportunities to accommodate the limited schedule of school-based services, or children do not receive the services to which they are entitled" and "the system as it operates now is inherently not child-centered or responsive to family needs".

FEDERAL LEAST RESTRICTIVE ENVIRONMENTS (LRE) REQUIREMENTS AND GUIDANCE REGARDING INCLUSION

IDEA Requirements

The Individuals with Disabilities Education Act (IDEA) was reauthorized in 1990 with several key amendments that emphasized providing all students with access to the same curriculum and allowing states the authority to expand the definition of 'developmental delay' from birth up to age nine. This legislation began to open new opportunities for a greater number of young children with disabilities. Then in 2004, Part B of the IDEA (2004) was amended by Congress and included a significant emphasis on requiring children with disabilities ages 3-21 be educated with children without disabilities to the greatest extent possible. States must have policies and procedures to ensure the provision of a Free And Appropriate Education (FAPE) in the Least Restrictive Environment (LRE). Specifically Sec 300.114 says that states must ensure that:

- (i) To the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, are educated with children who are nondisabled: and
- (ii) Special classes, separate schooling, or other removal of children with disabilities from the regular educational environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

Federal Guidance

In 2012, the Office of Special Education Programs (OSEP) issued a Dear Colleague Letter (2012) affirming that the Least Restrictive Environment (LRE) requirements in the IDEA applies to preschool children with disabilities and are fully applicable to the placement of preschool children with disabilities.

In 2015 the U.S. Department of Health and Human Services (DHHS) and the U.S. Department of Education (DOE) issued a joint <u>Policy Statement on Inclusion of Children with Disabilities in Early Childhood Programs</u> including the Departments' position that all young children with disabilities should have access to inclusive high-quality early childhood programs, where they are provided with individualized and appropriate support in meeting high expectations. This was reaffirmed again by a separate OSEP Dear Colleague Letter (2017).

The 2017 OSEP Dear Colleague Letter states:

"The public agency responsible for providing FAPE to a preschool child with a disability must ensure that FAPE is provided in the LRE where the child's unique needs (as described in the child's IEP) can be met, <u>regardless of whether the LEA operates public preschool</u>

programs for children without disabilities. An LEA may provide special education and related services to a preschool child with a disability in a variety of settings, including a regular kindergarten class, public or private preschool program, community-based child care facility, or in the child's home."

"If there is an LEA public preschool program available, the LEA may choose to make FAPE available to a preschool child with a disability in the LEA's public preschool program. While the number of public pre-kindergarten programs has increased, many LEAs do not offer, or offer only a limited range of, public preschool programs, particularly for three-year-olds. In these situations, the LEA must explore alternative methods to ensure that the LRE requirements are met for each preschool child with a disability. These methods may include: (1) providing opportunities for the participation of preschool children with disabilities in preschool programs operated by public agencies other than LEAs (such as Head Start or community-based child care); (2) enrolling preschool children with disabilities in private preschool programs for nondisabled preschool children; (3) locating classes for preschool children with disabilities in regular public elementary schools; or (4) providing home-based services. If a public agency determines that placement in a private preschool program is necessary for a child to receive FAPE, the public agency must make that program available at no cost to the parent."

"...preschool children with disabilities are often identified as children with disabilities while participating in regular public preschool programs, such as Head Start or a regular public prekindergarten program. The following requirements apply when determining placement options for a child with a disability who already participates in a regular public preschool program, including a community-based regular public preschool program operated by a public agency other than the LEA. Under 34 CFR §300.116(c), unless the child's IEP requires some other arrangement, the child is educated in the school that he or she would attend if nondisabled. In addition, under 34 CFR §300.116(d), the placement team, which includes the child's parent and may include the child's current teacher, must consider any potential harmful effect on the child and on the quality of services that he or she needs before removing the child from the current regular public preschool setting to another more restrictive setting. Consistent with these requirements, IDEA presumes that the first placement option considered for a preschool child with a disability is the regular public preschool program the child would attend if the child did not have a disability. Therefore, in determining the placement for a child with a disability who already participates in a regular public preschool program, the placement team must consider whether the LEA, in collaboration with the regular public preschool program, can ensure that the child receives all of the special education and related services and supplementary aids and services included in the child's IEP in order to meet the needs of the particular child with a disability."

Given these clarifying Dear Colleague Letters and Policy Statements, both Departments make it clear that they support FAPE being available and provided to preschool-age children with IEPs across a mixed delivery early childhood education system.

Figure 1. Joint Policy Statement on Inclusion of with Disabilities in Early Childhood Programs

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES U.S. DEPARTMENT OF EDUCATION POLICY STATEMENT ON INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD PROGRAMS

September 14, 2015

Children with disabilities and their families continue to face significant barriers to accessing inclusive highquality early childhood programs and too many preschool children with disabilities are only offered the option of receiving special education services in settings separate from their peers without disabilities. This lag in inclusive opportunities is troubling for many reasons:

- Being meaningfully included as a member of society is the first step to equal opportunity, one of America's most cherished ideals, and is every person's right – a right supported by our laws.
- Research indicates that meaningful inclusion is beneficial to children with and without disabilities across a variety of developmental domains.
- Preliminary research shows that operating inclusive early childhood programs is not necessarily more
 expensive than operating separate early childhood programs for children with disabilities.
- Meaningful inclusion in high-quality early childhood programs can support children with disabilities in reaching their full potential resulting in broad societal benefits.

In October 2022, based on data that showed in part that placement decisions are not being made in accordance with IDEA requirements, OSEP and the US Office of Head Start (OHS) issued a Dear Colleague Letter on IDEA Services in Head Start and FAPE that states:

"OSEP and OHS strongly encourage SEAs, LEAs, and Head Start programs to prioritize building and maintaining collaborative relationships to ensure that young children with disabilities eligible under IDEA Part B and enrolled in Head Start programs receive FAPE in the LRE"

The joint letter makes it clear that state and local educational agencies and Head Start programs have the responsibility of educating preschool children with disabilities in the least restrictive environment.

OSEP and OHS also published <u>Guidance on Creating an Effective Memorandum of Understanding to Support High-Quality Inclusive Early Childhood Systems</u> that provides guidance for formalizing effective working partnerships through a Memorandum of Understanding both at the state and local level.

NATIONAL ORGANIZATION POSITION STATEMENTS

In 2009 the Division for Early Childhood and the National Association for the Education of Young Children published a <u>Joint Position Statement on Early Childhood Inclusion</u> that identified early childhood inclusion as a practice that provides young children with disabilities access to learning activities and environments in which they are supported for meaningful participation in all activities and there are adequate supports for children and programs to assist in meeting the needs of each child.

The DEC and NAEYC position statement includes the following definition of early childhood inclusion:

Early childhood inclusion embodies the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability, to participate in a broad range of activities and contexts as full members of families, communities, and society. The desired results of inclusive experiences for children with and without disabilities and their families include a sense of belonging and membership, positive social relationships and friendships, and development and learning to reach their full potential. The defining features of inclusion that can be used to identify high quality early childhood programs and services are access, participation, and supports.

The position statement goes on to say that inclusion can occur in various organizational and community contexts, such as homes, Head Start, child care, faith-based programs, recreational programs, preschool, public and private pre-kindergarten programs, and blended early childhood education/early childhood special education programs.

PRESCHOOL INCLUSION EFFORTS IN ILLINOIS

Inclusion Summit

The State of Illinois has put considerable effort toward supporting the inclusion of young children with disabilities in the Least Restrictive Environments (LRE) in recent years. In 2017, Early CHOICES, with funding from the Illinois Council on Developmental Disabilities, convened the Illinois Early Childhood Inclusion Summit with the identified purpose of:

- Creating a shared awareness of the state of early childhood inclusion policy in Illinois
- Developing priorities for improving policy to support inclusion of young children across all agencies and stakeholders in Illinois
- Facilitating a true working meeting among leaders in early childhood systems in Illinois

From that summit, the effort identified 10 "high opportunity areas" across three broad domains that impact the successful implementation of inclusion practices in the state. The three broad domains include *Workforce*. *Access and Collaboration*.

Vision Statement and Guiding Principles

As a result of the efforts of this summit and the collaborative efforts taking place in Illinois, leaders from the Illinois Department of Children and Families Services, Illinois State Board of Education, Early CHOICES, Governor's Office of Early Childhood Development, Illinois Department of Human Services and the Illinois Head Start Association came together to develop the Illinois Early Childhood Inclusion Vision Statement and guiding principles:

Illinois commits to the inclusion of each and every child with special needs with typically developing peers in all early childhood environments

Increase Equitable Opportunity: Inclusion of children with special needs is a priority in decision-making about program design and resource allocation in order to ensure equitable access and full participation in all early childhood environments.

Partner with Families: We ensure the meaningful and supported engagement of families in policy/guidance decisions, planning, and evaluation of programs, as well as in Individualized Family Service Plan, Individualized Education Program, transition, and other family/professional meetings.

Share Benefits of Inclusion: We recognize and intentionally raise public awareness of the well-researched benefits for all children of high-quality inclusion in all early childhood settings. Build and Support a Competent Workforce: All professionals who work with children should have the knowledge, competencies and supports to implement evidence-based practices. We deliberately shift policy to support elements critical to this effort: appropriate professional standards, embedded professional development, culturally and linguistically responsive practices, positive attitudes and beliefs about inclusion, and knowledge of disabilities. Unified Purpose: We intentionally and strategically engage in formal collaboration across agencies to make significant progress toward high quality inclusion across early childhood settings.

Set Goals and Track Data: Across agencies we set concrete goals for expanding access to inclusive and high quality early learning opportunities, including a baseline number of children with and without disabilities in all early childhood settings, and benchmarks that track progress toward the goal.

Inclusion Strategic Plan

In 2020, the Illinois Governor's Office of Early Childhood Development, with funding through the Preschool Development Grant Birth – 5 (PDG B-5) and the Illinois Council on Developmental Disabilities (ICDD), convened a number of public and private partners from across the state, for a planning process lead by <u>Early CHOICES</u>. The group created and published the <u>Strategic Plan for Supporting Inclusion of Young Children with Disabilities in Early Care and Education Settings</u>.

Figure 2. IL Inclusion Strategic Plan - summary of goals and objectives.

Public Outreach

- · Effort to support families and providers at the very first opportunity to understand inclusion
- · Must reach all sectors and be in small accessible learning objects
- · Use of social media and other strategies to reach across the state

Supports to CBOs to increase access

- · Expand access to enhanced public funding to more programs
- Increase child care capacity to provide high-quality inclusive childcare through TA & PD
- · Revise quality standards related to inclusion within ExceleRate
- · Increase funding to ensure high quality structures are in place

Guidance, incentives and accountability to support LEAs

- Create and implement guidance and models for LEAs to provide specialized services in the LRE which includes child care, Head Start or private preschool
- · Assure state rules and regulations are in place to allow LEAs flexibility to provide services and supports

Guidance, incentives and accountability to support EI

- Build infrastructure to support providers to provide services in CBO's with the intent of maximizing inclusive opportunities
- · Continue to expand Natural Partners work to build communication and Models across EI and CBOs

ExceleRate Illinois Quality Framework with indicators of high-quality inclusion built in throughout each circle of quality.

Strategic Plan Goal 3 is applicable to the work of this project which is to "provide guidance, incentives, and accountability to support Local Education Agencies (LEAs) to ensure that special services are provided to young children with disabilities within the mixed delivery service model".

To continue to advance this work, the Illinois Council for Developmental Disabilities (ICDD) invested additional funding with Start Early, which supported focus groups with school district leaders (done in partnership with Early CHOICES and others) to continue to build awareness of early childhood inclusion and identify the levers needed to support school districts to deliver services within community settings. The report Strengthening Early Childhood Inclusion (2021) summarizes activities and findings from this work that highlight feedback from school district leaders on key considerations for implementing models of collaboration between LEAs and community early learning partners to serve children with IEPs across the mixed delivery system.

Road Map for Inclusion in Child Care

In 2017, the All Families Served (AFS) and the Inclusion Subcommittees of the Early Learning Council (ELC), as part of a public-private collaboration with the Illinois Department of Human Services (IDHS), created the <u>'Recommended Strategies for Addressing Inclusion in Child Care in CCDF Plan, Policies, and Procedures'</u>, which was considered a roadmap to address inclusion in the state's Child Care Development Fund (CCDF) plan.

This effort highlights the need to support child care providers to be ready to welcome and serve preschool-age children with developmental delays and disabilities and to collaborate with their school district partners. The roadmap includes a number of identified strategies aligned to the following inclusion elements: *Access, Participation, Supports, and Data*. The subcommittees identified the lift and cost burdens to the state for each strategy recommendation and what cost levers would be needed within the state to develop and implement the recommendations.

Inclusion Information and Materials

The Illinois State Board of Education (ISBE) has produced several resource documents that outline ISBE's position and support for early childhood inclusion as well as provide districts and community-based organizations with useful information on strategies, funding options, and inclusive model approaches, including guidance to local school districts on inclusion strategies and practices. Documents such as the ISBE Inclusion Models and Guidance document provides helpful information on what model options are available to districts and Community-Based Organizations (CBOs).

Inclusion Training and Technical Assistance

The Illinois State Board of Education (ISBE) funds <u>Early CHOICES</u>, which is an inclusion initiative that works to increase the number of children with disabilities receiving specialized services in regular early care and education settings through a variety of training and technical assistance (TA) efforts. Early CHOICES is currently funded with IDEA 619 discretionary funds and Preschool Development Grant Birth – 5 funds.

Early CHOICES utilizes three key strategies:

- 1) Providing technical assistance and facilitating professional learning for teams that support children and families,
- 2) Engaging and empowering families to access resources and information, and
- 3) Collaborating with other Illinois early care and education entities.

Since 2020, Early CHOICES has led the effort in Illinois as one of three states selected by the Early Childhood Technical Assistance Center (ECTA) to receive support to pilot implementation of the national Indicators of High-Quality Inclusion in Illinois. This work involved convening 1) a state leadership team 2) a professional development network of coaches, and 3) the formation of Community Inclusion Teams in 3 communities (Collinsville CUSD 10, Mannheim District 83, and Springfield 186). Each community was supported to implement action plans based on the national Indicators of High-Quality Inclusion and the use of the Inclusive Classroom Profile indicators. This pilot and the lessons learned are included in the Community Inclusion Team Report (2021).

ISBE also funds <u>STAR NET</u> to provide workshops, webinars, and conferences supporting ECSE and inclusion.

Current Accountability Regarding Inclusion

Indicator 6 (preschool environments) is one of several federal annual performance report indicators that are included in the ISBE's 'Accountability and Support System Risk Assessment' that includes a tiered approach to support improvement by districts. If the cumulative score of the rubric is less than 75%, the district has to develop a corrective action plan. There are currently no action plans required for individual indicator components.

Since 2013 ISBE has invited districts based on their performance data on Indicator 6a (percent of preschool children with IEPs who receive the majority of ECSE and related services in inclusive regular early childhood education programs) to improve their performance in this indicator by attending professional development and completing an improvement plan. The plan is broken into six steps with a series of due dates across the year, and each step has a technical assistance session that supports the completion of that part of the plan. The plans submitted are used to help identify professional development needs. The invitation to participate in the TA and to complete the plan is voluntary, and there are no consequences if a program does not submit the plan.

There is currently no required improvement planning for districts serving a low percentage of preschool children with IEPs in regular early childhood education programs.

Inclusion Efforts in Chicago

Start Early and the other Chicago Head Start recipients, the Chicago Mayor's Office, and Chicago Public Schools are working to develop, implement, assess, and institutionalize feasible strategies and approaches for delivering special education services to children with Individualized Education Plans (IEPs) onsite in the Head Start programs in which they are enrolled. A new report from Start Early, 'Providing Early Childhood Special Education in Community-Based Settings: Considerations for Chicago', includes a look at inclusion efforts in several communities across the nation (see Section IV 'Inclusion Approaches by Municipalities').



II. PROJECT OVERVIEW & METHODOLOGY

Inclusion Project Team

Role of the Advisory Group

Methodology

II. PROJECT OVERVIEW & METHODOLOGY

INCLUSION PROJECT TEAM

The Illinois State Board of Education (ISBE) contracted with Public Consulting Group LLC (PCG) to collect data and information and develop recommended service and funding models to support the inclusion of preschool children with disabilities in community-based early childhood education settings.

PCG subcontracted with Start Early to 1) serve as a liaison to key stakeholders/informants in Illinois familiar with the previous work done on serving preschoolers in inclusive settings/early childhood special education, 2) help navigate previous studies, research, and findings on early childhood special education services in Illinois, and 3) assist and support the Illinois State Board of Education (ISBE) as needed to execute the project successfully.

To guide the project, a core project team consisting of representatives from ISBE, Start Early, and the Center for Early Learning Funding Equity (Northern Illinois University) met regularly with PCG to guide the overall project and help access resources and data as needed.

ROLE OF THE ADVISORY GROUP

An advisory group was established to provide input on the project methodology and recommendations.

Membership included representatives from a number of different constituency groups, including:

- Parents and parent organizations
- School district personnel (teachers, special education directors, principals, COOP directors)
- Early childhood education programs and organizations (Head Start, child care, PFA / PFAE school and community-based grantees)
- Higher Education & training and TA providers
- Philanthropic and advocacy organizations

In selecting advisory group membership regional representation, race and ethnicity, language, and gender we considered in order to promote diversity of voices and ideas.

The project team met with the advisory group several times during this relatively short project. Meetings were generally via web conference, with one hybrid meeting consisting of both in person participation in Chicago and via web conference.

METHODOLOGY

The methodology for this project included review of previous work and reports on inclusion in Illinois, focus groups and interviews with key groups, interviews with peer states, review and analysis of data, and review of national resources and literature.

Review of previous IL inclusion work

As this report must build on the previous inclusion efforts in Illinois, it was important to collate and review reports and interview individuals about Illinois inclusion efforts. The project team was instrumental in getting PCG access to these reports. Interviews with ISBE, Start Early and Early CHOICES also helped to further clarify previous and existing inclusion efforts. These are summarized in the background section of this report.

Review of Illinois Data

A data request for district level indicator 6a, preschool environments, was submitted through the ISBE's data request process in order to analyze district level performance regarding the percent of preschool children with IEPs that receive the majority of their special education and related services in regular education programs. ISBE assisted in cleaning the data to eliminate high school and other districts that did not serve preschool children with IEPs.

Future data analysis could include disaggregation of the data by size of district (small, medium, large) and geographical type (rural, urban, sub-urban), which was not possible due to those data not being in the data set requested.

Focus Groups and Interviews

The project team and the advisory group provided recommendations regarding the focus groups being held with a variety of constituency groups and input regarding the individuals who should be invited to participate. Attention was paid to diversity of participants with regards to their geographical location, race and ethnicity, and language.

There were a few individuals who were recommended to receive an individual interview due to their specific knowledge and input they could provide.

Focus groups were held with the following groups:

- Parents and parent organizations
- Early childhood educators
- Child care leaders
- Head Start leaders
- Preschool For All / Preschool For All Expansion leaders
- School principals, special education directors, special education cooperative (co-op) directors
- Higher Education
- Superintendents

The focus group questions were sent to invitees who were unable to attend, enabling them to submit their responses in writing, several of which were received.

All focus groups were held remotely via web-conference, which allowed for participation of individuals from across the state. Each focus was scheduled for 1 ½ hours. Participants were

informed that their responses were confidential, and that no personal identifiable information would be used in the report.

The focus groups were facilitated in a semi-structure manner i.e., there was a list of questions for the facilitator to use, but the format allowed for a dialog between participants on a topic and for discussion to flow naturally. The facilitator asked follow-up questions and looped back, asking for more information on questions when needed. Focus group questions focused on issues that presented challenges to preschool inclusion in community-based early childhood education settings, as well as on successes that could be expanded upon and serve as models.

Surveys

As a way to gather additional information, online surveys were conducted with school district superintendents and Head Start administrators.

The school district superintendents survey was distributed through LUDA (Large Unit District Association) and IASA (Illinois Association of School Administrators) to their members. There were 24 respondents to the online superintendent survey with the following geographical representation: rural (58%), suburban (33%), urban (8%); and student population size: medium (67%), small (33%), and no large districts. These demographics were self-reported in the survey.

Start Early partnered with the IL Head Start Association to distribute an online survey to Head Start administrators. There were 22 respondents that included directors or executive directors as well as disabilities services managers.

The findings from both surveys are summarized in Section IV of this report.

Peer State Interviews

The project team and the advisory group provided recommendations on the three peer states to interview regarding their service and funding models and supports for inclusion. States with high inclusion data (Indicator 6a, percent of children serviced in inclusive regular early childhood programs) were considered. Knowledge of state's models was also taken into consideration in order to include states with varying approaches to promoting preschool inclusion.

The three states selected were:

- Colorado
- West Virginia
- Vermont

PCG also leveraged additional interviews that were conducted by Start Early as part of the 'Providing Early Childhood Special Education Services in Community-Based Settings: Considerations for Chicago Report' (in press) with counties and municipalities that included:

- Atlanta Public Schools, GA
- Guilford County Schools, NC

- School District of Palm Beach County, FL
- Wake County Schools, NC



III. PRESCHOOL INCLUSION DATA

Illinois State-level Inclusion Data

District-Level Inclusion Data

III. PRESCHOOL INCLUSION DATA

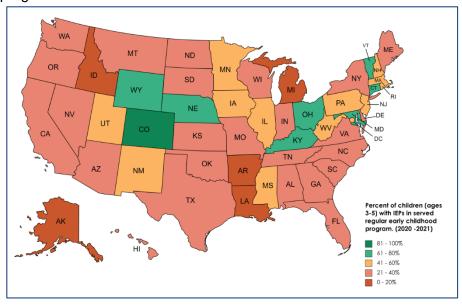
State early childhood special education programs (IDEA Part-619) are required to report annually to the US Department of Education, Office of Special Education Programs (OSEP) on preschool inclusion as part of the requirements for the Annual Performance Report (APR). Indicator 6a 'Preschool Environments' measures the 'percent of children with IEPs aged 3, 4, and aged 5 who are enrolled in a preschool program attending a regular early childhood program and receiving the majority of special education and related services in the regular early childhood program'. A *regular early childhood program* is defined as a program that includes at least 50% nondisabled children. These data, which don't specifically measure where preschoolage children with IEPs are receiving their special education and related services, are still a good baseline measure of the extent to which young children with disabilities are being educated alongside typically developing preschoolers without disabilities and how big the challenge is for the state as a whole and for districts that are serving a low percentage of preschool-age children in inclusive settings overall.

ILLINOIS STATE-LEVEL INCLUSION DATA

Illinois statewide performance in Indicator 6a for 2021 – 2022 shows that just over half (50.4%) of preschool children with disabilities receive the majority of their IEP services in inclusive regular early childhood programs.

In looking at national data for 2020-2021 (the most recent available), Illinois ranks 16^{th} nationally and is one of 13 states with between 41% - 60% of preschool children with IEPs served in regular early childhood programs, as shown in the following map.

Figure 3. Map of state percentage of preschool children with disabilities served in regular early childhood programs



The chart below shows a breakdown of settings for preschool-age children with IEPs in 2021-2022 in Illinois. Slightly over half (50.38%) of preschool-age children with IEPs receive the majority of their special education and related services in a regular early childhood program (RESP). However, a quarter (25.66%) of preschool children receive their IEP services in a separate (segregated) classroom or facility for children with disabilities.

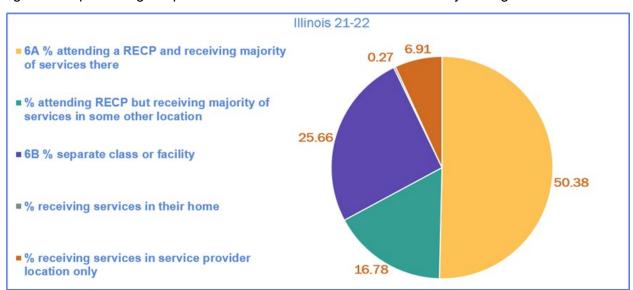


Figure 4. IL percentage of preschool children with disabilities served by setting

There are limits to the federal data collection for this indicator as it measures the percent of children served in an inclusive ECE program (less than 50% of students have a disability) and receive the majority of their IEP services in that program, but it does not indicate if the setting is at the school district site or in a community-based program. Some states, including Colorado, have chosen to collect data on their ECE programs and even the name of the setting where the child receives their IEP services, e.g. a MLK Head Start in the community, a PFA on the school campus or community, etc.

While not required under the federal Annual Performance Report indicator and therefore not reported to OSEP, ISBE collects data on children who attend a regular ECE program, but who are receiving the majority of services in some other location. Currently 16.79% of preschool children with an IEP are in this category, which may include children who are enrolled in a community-based ECE program or who may be required to attend two different early childhood programs or are transported from the community-based setting to receive their special education and related services on the school campus, as well as children in a regular early childhood program that are 'pulled-out' to receive special education and related services.

ISBE published a <u>'Decision Tree for Coding Preschool Environments for Children Ages 3-5</u>
<u>Under the IDEA'</u> and in 2021 developed new <u>Student Information System (SIS) Early Childhood</u>
Program Definitions and Combination Rules, but unfortunately, neither of these support analysis

or reporting at the state or community-level where preschool children with disabilities are enrolled and where they receive their IEP services.

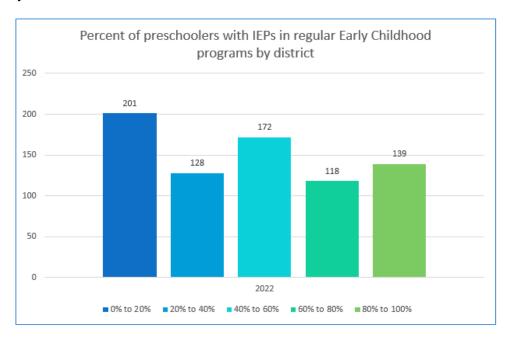
DISTRICT-LEVEL INCLUSION DATA

There is wide variance in Indicator 6 data across Illinois school districts.

The table below shows that while 139 school districts provide special education and related services to more than 4 out of 5 (>80%) preschool children with IEPs in inclusive ECE programs, there are 201 districts where less than 1 out of 5 (<20%) preschool children with IEPs are served in inclusive regular ECE programs.

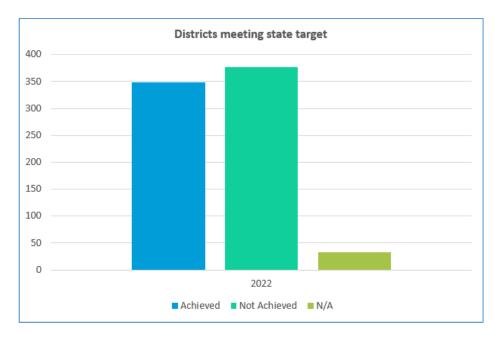
329 districts, almost half (43.4%), serve under 40% of preschoolers with IEPs in inclusive regular ECE programs. While the data does not specifically indicate the number and percentage of children receiving their IEP services in community-based ECE settings, it does show that there is a large number of districts with low inclusion performance overall who could be targeted for improvement through technical assistance (TA) and increased accountability (e.g., improvement plans, ongoing reporting, and data submissions).

Figure 5. IL Percentage of Preschool children with IEP served in regular inclusive ECE programs by district.



ISBE established a state target that is included in the federal Annual Performance Report (APR). The target in 2022 was that 46.5% of preschool children with IEPs be served in inclusive regular ECE programs. The following chart shows that 348 (48%) districts met the state's target while 377 (52%) did not. 33 districts were reported as 'not applicable' due to the small number of preschool children with IEPs in their district.

Figure 6. Number of IL school districts meeting the state target for children served in regular inclusive ECE programs.



Districts not meeting the state target could be the focus for TA and increased accountability, which would include support to increase preschool children served in community-based ECE programs.

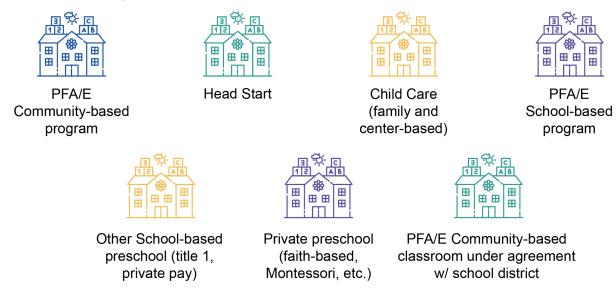


IV. ILLINOIS' EARLY CHILDHOOD EDUCATION AND CARE LANDSCAPE

IV. ILLINOIS' EARLY CHILDHOOD EDUCATION AND CARE LANDSCAPE

Illinois' mixed delivery early childhood education and care system provides a variety of opportunities for preschool age children (age 3-5) with disabilities to be served in inclusive ECE programs that meet the child's developmental needs, avoid the need to transition from setting to setting during the day to receive services, and support the needs of working parents.

Figure 7. Graphic of the variety of ECE and care settings in Illinois where preschool children with disabilities may be served:



Preschool children with disabilities may be enrolled in one of the early childhood education settings listed below and already have an IEP or identified delay/disability, or they may be enrolled in one of these settings and then be identified as having a developmental delay or disability through screening and referral to the district for an evaluation to determine eligibility for IDEA Part B. Some children transition from early intervention (IDEA Part C) are found eligible for IDEA Part B services, and the IEP team determines an appropriate placement. There are also children who aren't currently in an early learning and care program and are evaluated and made eligible by their school district for Part B services and an IEP team identifies an appropriate placement.

The following is a list of ECE programs in Illinois:

Preschool for All and Preschool for All Expansion (PFA/PFAE) – provides a state-funded inclusive option for preschool children with disabilities with classrooms operated by both school districts (either on a school campus or located at a community-based organization) and by community-based organizations. The Preschool For All Implementation Manual includes strong language prioritizing the enrollment of preschool

- children with disabilities. The PFA/PFAE program does not require district residency. This means that families can choose where to enroll their child, even if in a neighboring district, and collaboration can occur across districts to fill PFA/PFAE slots.
- Child Care The Illinois Department of Children & Family Services (IDCFS) administers the licensing and requirements for family and centered-based child care. IDCFS also manages the Child Care Assistance Program (CCAP) for families that meet income requirements. Children with disabilities eligible for CCAP are prioritized for access to child care and child care providers can receive a 20% add-on rate for children with special needs. Illinois Cares for Kids is a portal to locate child care options by zip code.
- Head Start requires enrollment of at least 10% of children with disabilities and includes a strong focus on developmental screening, referral, and collaboration with IDEA Part B for children with IEPs. In the fall of 2022, the Office of Head Start (OHS) and the Office of Special Education Programs (OSEP) issued a Dear Colleague Letter on IDEA Services in Head Start and FAPE. The key message of the letter is to reiterate that it is "the long-standing policy of our Departments that young children with disabilities be included in high-quality early childhood programs, including Head Start" and that both state and local educational agencies (school districts) and Head Start programs have responsibilities for implementing IDEA to ensure that children with disabilities enrolled in Head Start programs receive a free and appropriate public education in the least restrictive environment.

ExceleRate Illinois

<u>ExceleRate Illinois</u> is the state's quality rating and improvement system (QRIS) that provides standards, guidelines, resources and supports that lead to quality outcomes and improve the developmental skills of young children and includes: Licensed Child Care Centers; Licensed Family/Group Child Care Homes; PFA/ PFAE and Head Start.

ExceleRate Illinois Quality Standards 1F addresses the Inclusion of Children with Disabilities and Developmental Delays with standards and evidence differing at each Circle of Quality – Bronze, Silver and Gold. These include the following: staff training on inclusion, policy and procedures related to supporting inclusion of children with disabilities or developmental delays, submitting data on the number of children with special needs served, and written Memorandum of Understanding (MOU) with at least one Local Education Agency regarding services to children with special needs.



V. SUMMARY OF INFORMATION GATHERED

Focus Groups, Interviews and Surveys

Focus Groups and Interviews – Key Themes

Superintendent Survey – Key Findings

Head Start Administrators Survey – Key Findings

Inclusion in Other States

Peer State Interviews – Key Themes

Inclusion Approaches by Other States

Inclusion Approaches by Municipalities

V. SUMMARY OF INFORMATION GATHERED

FOCUS GROUPS, INTERVIEWS AND SURVEYS

As outlined in the methodology section of this report, information was gathered from a wide variety of groups through focus groups, 1:1 interviews, and online surveys. The following sections summarize the key themes from the information gathered.

Focus Groups and Interviews – Key Themes

See Appendix 3 for a more complete summary of the input received. The key themes are as follows:

- Data and Accessibility The current data system provides strong potential to build from
 and districts feel a sense of responsibility for measuring the outcomes of children with
 IEPs across settings. However, there needs to be data collection across programs,
 including the ability to measure the federally required early childhood outcomes (i.e.,
 whether the child's development improved from the time of enrollment to when they exit).
- Service Models and Partnerships Building relationships and collaborations across programs serving preschool children with IEPs is important and staff providing itinerant ECSE (IECSE) have to be experienced to be effective. However, little IECSE was reported as currently being provided, with children having to travel to school settings to receive IEP services (thus necessitating multiple transitions for the child during the day) or having to disenroll from the community-based ECE program to receive ECSE at the school setting. When services were provided at the community-based ECE program, children were often 'pulled-out' of the classroom rather than collaborating with classroom teachers to embed instruction into the routines and activities of the classroom. The voiced challenges to effective IECSE were lack of district staff/high caseloads, allowance for planning time, travel time and reimbursement, and coaching of staff.
- Funding Models There were reported examples of blending and braiding funding by Head Starts. There is a perceived discrepancy in the funding received to serve preschool children with IEPs in community-based PFA/Es versus PFA/Es operated by the school district, as well as salary inequities. Funding guidance is needed to enable full-day services for preschoolers with IEPs in community-based settings and outline how existing funds can be used to fund itinerant services that don't necessarily cost more.
- State Support and Guidance Districts do not perceive that there is flexibility to provide
 itinerant services nor the requirement to provide IEP services in the community-based
 ECE settings where the child is enrolled. Additional supports are needed for communitybased organizations to service children with disabilities including ADA requirements and
 supports to increase quality.
- Workforce and Professional Development Staff shortages of ECSE teachers and related service professionals were reported as a challenge, as well as a need for specific professional development opportunities on itinerant instructional practices including

- coaching, caseload management, scheduling, working with adults, collaboration, developing relationships, etc. Itinerant staff often come into the role lacking an understanding of their role as coaches, trusting and collaborative partners, and coplanners with the early childhood educators in the classroom, and therefore need training and coaching support.
- Policy and Laws Current policies are seen as creating competition for enrollment, rather than working together in a community to ensure preschool children with IEPs are served in early childhood education programs that meet their developmental needs, avoid transitions during the day, and meet families' needs for all-day services.
 Additionally, families need to understand policy around Least Restrictive Environments and their role in the IEP placement decision.

Superintendent Survey – Key Findings

The following are key findings from a survey conducted with school district superintendents with 24 respondents:

- Superintendents reported the following constraints or challenges to providing itinerant early childhood special education (IECSE) to preschool children with IEPs in inclusive community-based ECE settings: 'lack of qualified special education and related services personnel' (83%) and 'funding' (70%) were the most commonly reported. Other challenges reported were 'lack of community-based early childhood education settings' (36%), followed by 'union contracts' (17%), and 'reimbursing staff' (17%).
- When asked what is needed related to funding IECSE, the responses were 'additional funding' (70%), 'guidance regarding blending and braiding funding' (56%), 'policies regarding the use of funding sources (including IDEA Part B, IDEA Part B-619, Evidence-Based Funding, PFA/E, Medicaid, Title 1)' (52%), and 'policies regarding the use of funds for placement for FAPE in a community-based early childhood education program' (39%).
- Respondents stated that the following supports are needed to provide IECSE to preschool children with IEPs in inclusive community-based early childhood settings: 'professional development & training' (71%), 'parent training and information' (58%), 'establishing community inclusion teams' (46%), 'state guidelines' (29%), and 'state policies' (21%).

Head Start Administrators Survey – Key Findings

The following are key findings from a survey conducted with all Head Start grantees with 22 respondents:

Only 2 Head Start administrators indicated students were able to access special
education and related services within the Head Start program without having to leave to
go to the school district location. Several respondents indicated that speech therapy
services were delivered within the Head Start classroom, but other IEP services were
only provided at the school district site.

- 9 Head Start administrators indicated that families who have a child with an IEP had turned down IDEA services because their child would have to leave the Head Start classroom during the day to receive these services at the school district.
- 14.2% of the children with IEPs enrolled in Head Start received no special education and related services.

INCLUSION IN OTHER STATES

Peer State Interviews – Key Themes

The following is a summary of the themes from the peer state interviews with state ECSE leaders in West Virginia, Vermont and Colorado. See Appendix 3 for more information and links to resources from these states.

- Data and Accountability
 - States collect data regarding the program type and name where preschool children with IEPs are enrolled and receive services, allowing for robust reporting at the state and community level (CO, WV).
 - Data is used to target support to low performing districts (CO).
- Service Models and Partnerships
 - State-funded preschool is used for the majority of inclusive placements with prioritized enrollment for preschoolers with IEPs (CO, WV, VT).
 - Itinerant ECSE (IECSE) approach is a key component of inclusion that is supported by professional development (CO).
 - Community inclusion teams are established to evaluate, plan, and collaborate to make available inclusive placement options for preschoolers with IEPs (WV)

Funding

- Funding allows preschoolers with IEPs to attend full-day Pre-K (CO).
- State guidance is provided on funding preschoolers with IEPs, including layering funding and providing scenarios (CO).
- Districts budget IDEA Part B, IDEA Part B-619 and Medicaid to fund itinerant ECSE (CO, WV, VT) with education costs funded through Pre-K, Head Start, and child care.
- Districts may contract with community-based organizations for whom a district is paying tuition to a third-party entity to cover basic education costs with a sample contract and MOU are made available for districts to use (CO, WV, VT).
- o If a district is providing the educational services for an out-of-district student, this is paid for by the district of residence (CO, VT) through an agreement, or funding follows the child (WV) and staff are allowed to provide IEP services to a child attending a program in a neighboring district that is fairly close to the district boundary (VT).
- Community inclusion teams address funding at the child level (i.e., which programs will fund what component of the child's education) (WV).
- State Support and Guidance
 - State developed indicators of quality inclusion (CO)

- Establishment of a state-level inclusion committee / body that meets regularly (CO, WV)
- Guidance developed regarding how IEP teams (including the parents) make LRE placement decisions (CO)
- Workforce and Professional Development
 - Specific itinerant ECSE training provided through key-notes, embedding into modules and specific workshops on IECSE (CO)
 - Utilizing expert trainers in IECSE (CO)
 - Establish itinerant ambassadors that support professionals still doing 'pull-out' services (WV)
 - Technical assistance and professional development targeted to low performing (CO)

Inclusion Approaches by Other States

PCG obtained the following information from additional states and municipalities.

Michigan:

Michigan is another state that received intensive technical assistance from the national Early Childhood Technical Assistance(ECTA) Center that focused on the implementation of national Indicators of High-Quality Inclusion.

The Michigan Department of Education established the 'Inclusion Builders' Initiative in 2020 to support districts' inclusion of preschool age children with disabilities in typical ECE settings. The Initiative included professional development and capacity building among selected Intermediate School Districts (ISDs), with the goal of "improving the implementation of high-quality inclusionary practices for young children with disabilities in general education preschool classrooms with typically developing peers".

The initiative included the following elements:

- A professional learning community across participating Intermediate School Districts (ISDs)
- Funding for Preschool Inclusion Equity Specialists to support individual and group professional development and practice-based coaching
- An expert consultant in preschool inclusion and practice-based coaching to plan professional development and coach ISD staff
- Creation of a 'Inclusion Builders Manual' (to be published in 2023) that provides a roadmap for the creation of Community Inclusion Teams (CITs) and how the CITs can address the national community level indicators

Delaware:

The State of Delaware has a long history of providing itinerant ECSE and related services with local school districts that is funded through a combination of federal, state and local funding streams.

Preschool children with an IEP are served in child care and Head Start including in programs outside of their district of residence. To facilitate support for young children with disabilities that may be attending one of these centers outside of the district of residence, four large districts created a collaborative service system, through a memorandum of agreement (MOA), that enabled districts to offer ECSE and related services to children in the district in which they are attending child care and Head Start, regardless of the child's district of residence. Under the MOA, the district in which a child is spending a majority of their day in an ECE program (defined as 10 or more hours per week) assumes responsibility for screening, evaluation and providing ECSE to children. The district providing services counts the child for state funding purposes within the Delaware Needs Based Funding Rubric. The district of residence is kept informed of the status of the referrals and eligibility determination of the children in their respective districts through a county collaborative team process and the district of residence is an integral member of the IEP meetings for children from their districts. Districts are kept informed of the status of the children on an ongoing basis, which also assists with later transition into kindergarten in the district of residence.

To facilitate collaboration, the school districts meet jointly on a monthly basis to discuss the children that have been identified within the various ECE settings. A data system was created to track and monitor the screening/evaluation/IEP processes for children served across districts.

There has been no exchange of funds within this process as the districts determined there was an equal exchange of services, dollar for dollar, without having to exchange funds. There is careful monitoring to ensure that no single district is taking on an undue burden of services.

Inclusion Approaches by Municipalities

The recently published Start Early report 'Providing Early Childhood Special Education Services in Community-Based Settings: Considerations for Chicago' examined inclusion in several counties and municipalities across the country that included: Atlanta Public Schools, GA; Guilford County Schools, NC; School District of Palm Beach County, FL; and Wake County Schools, NC.

Key takeaways reported include the following:

- "Inclusion is possible" A belief and commitment by ECE leaders (school districts and community-based ECE programs) that programs can collaborate to serve ALL children with disabilities in inclusive settings.
- "Relationships matter" Building and maintaining relationships across school districts
 and community-based ECE programs is important, leads to joint opportunities around
 staffing and professional learning, and promotes the development of inclusive settings
 for preschoolers with IEPs.
- "Start slowly and intentionally" build on successes within communities and gradually scale up. Collect data to enable continuous quality improvement cycles. Also, provide shared professional learning and targets training and support to district ECSE and related services professionals transitioning to an itinerant model.

 "Consider multiple models of inclusive services" including an 'itinerant model', where ECSE and related services professionals support early childhood educators through coaching to support the child's learning through activities and routines of the classroom. Also, consider a 'fully inclusive classroom' model option where funds are blended utilizing multiple funding sources and a co-teaching team is included.



VI. NATIONAL INFORMATION ON INCLUSION AND THE ITINERANT MODEL

National Indicators of High-Quality Inclusion

Itinerant Early Childhood Special Education Model

Financing Itinerant Early Childhood Special Education

VI. NATIONAL INFORMATION ON INCLUSION AND THE ITINERANT MODEL

NATIONAL INDICATORS OF HIGH-QUALITY INCLUSION

A national initiative by the <u>Early Childhood Technical Assistance Center (ECTA)</u> and the <u>National Center for Pyramid Model Innovations (NCPMI)</u>, with <u>partners</u> across early care and education, worked collaboratively to develop <u>Indicators of High-Quality Inclusion</u> that address inclusive policies and practices that include:

<u>State Indicators</u> 1) cross-agency leadership 2) policy/guidance 3) family engagement 4) accountability, data use, and continuous quality assurance 5) funding 6) early learning standards/guidelines 7) program standards 8) allocation of resources 9) professional development 10) personnel standards, credentialing, certification, and licensure 11) preservice education 12) public awareness

<u>Community Indicators</u> 1) community inclusion team 2) vision 3) family engagement 4) awareness & commitment 5) policies & procedures 6) fiscal 7) personnel policies & structure 8) collaborative teaming 9) technical assistance & consultation 10) professional development 11) curriculum 12) use of data

<u>Local Program Indicators</u> 1) inclusive leadership teams 2) vision 3) family engagement 4) awareness & commitment 5) policies & procedures 6) fiscal 7) personnel policies & structure 8) collaborative teaming 9) technical assistance & consultation 10) professional development 11) curriculum 12) use of data

<u>Early Care & Education Environment Indicators</u> 1) promotion & affirmation of individual differences 2) family partnerships 3) social emotional learning 4) meaningful interaction with peers 5) curriculum 6) instruction 7) collaborative teaming, 8) assessment 9) culturally responsive practices

These indicators support state and local program leaders to examine and implement strategies that strengthen their capacity to provide high-quality inclusive options in their communities. While the indicators are not formatted as a self-assessment, they could be used as such at the state and community level, and the results of these self-assessments used as a potential road map for advancing inclusion for preschoolers with disabilities at the state and community level.

These indicators were piloted in three Illinois school districts and communities under an initiative by Early Choices and with support from the national Early Childhood Technical Assistance Center (ECTA). In the Community Inclusion Teams (2021) report that summarizes the initiative and the work with the 3 communities in building Community Inclusion Teams (CITs) and implementing the national inclusion indicators, they conclude that:

"The experience of developing CITs in three distinct regions throughout Illinois has reinforced what the body of research regarding inclusion has shown: inclusion depends upon a shared vision that is upheld by a community, strong collaborative relationships across sectors, and a strong commitment at all levels within an organization to implement high quality, evidence-based practices."

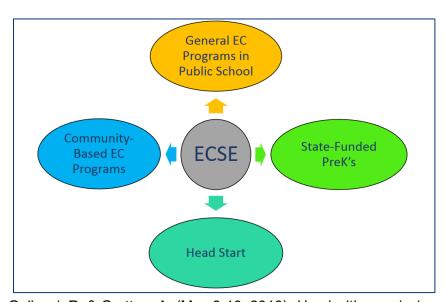
ITINERANT EARLY CHILDHOOD SPECIAL EDUCATION MODEL

Dinnebeil and McInerney, in their book 'A Guide To Itinerant Early Childhood Special Education Services' (2011), conceptualize itinerant early child special education (IECSE) services as:

"a service delivery model that supports the inclusion of young children with disabilities whose primary placement is a community-based program such as a private preschool, center child care, or Head Start classroom. Itinerant teachers...visit children's community-based classrooms on a regular basis to provide individualized education (IEP)-based services". (p. ix)

IECSE is an evidence-based model for increasing the provision of ECSE and related services on a child's IEP within regular ECE settings.

Figure 8. Graphic illustrating how ECSE services can be provided in various ECE programs.



Gallucci, R. & Grattan, A. (May 8-10, 2018). Used with permission

IECSE is a model for service delivery used widely by states and school districts across the country to provide services to children with disabilities in inclusive early childhood education settings and may include both early childhood special educators as well as related services professionals (speech/language pathologist, occupational therapist, physical therapist, behavior specialist, etc.).

It is the role of the itinerant professional to provide individualized supplemental and specialized learning opportunities that are designed to address children's needs, as specified in their Individual Education Plan (IEP) goals and objectives.

IECSE includes both a direct approach, where the ECSE professional provides direct teaching to the child in the inclusive ECE classroom, and a consultative approach where the ECSE professional supports the early childhood educator to embed learning within the activities and routines of the ECE classroom. Dinnebeil et al. (2019) advocates for utilizing consultative approach to itinerant services where the itinerant teacher would begin with consultation, including collaborative problem solving related to child goals, that would lead to coaching (i.e., expert led process of adult skill development) of the classroom teacher around targeted child interventions a consultative approach to itinerant services.

Within the IECSE model, the early childhood classroom teacher and the itinerant ECSE teacher plan collaboratively how to best embed individualized designed learning opportunities into the classroom routines, using collaborative planning strategies to complete the process effectively, and to ensure adequate professional development is available and provided to all personnel. In addition to instruction, the collaborative team also determines the best strategies for monitoring the child's progress to ensure learning continues to take place.

There is a common thread that IECSE services are intended to use a model identified as collaborative consultation as the best strategy for bringing ECSE to children in community settings. This has been proposed by many in the field including Buysee and Wesley, 2016; Horn and Sandall, 2001; McWilliam, 1995; and Sandall, McLean and Smith, 2000.

IECSE has proven successful across several states presented within this report (Colorado, Delaware, Rhode Island, West Virginia, and Vermont) within a mixed delivery ECE system.

Common themes regarding issues that may inhibit a greater expansion of inclusion practices across states and school districts include the following:

- Perceptions of policies related to program quality
- Qualifications of personnel
- Logistics
- Adequate funding
- Transportation
- Caseload
- Confidence and competence
- Access to professional supports and resources
- Quality of child care settings
- Conflicting policies
- Meeting the needs of specific children
- Differing curricula/assessments
- Attitudes and beliefs

(Barton and Smith 2015; Dinnebeil, Weber, & McInerney 2019).

Of significant note is that these same elements were reiterated by the focus group participants in a Start Early effort completed in 2021 and shared in the report by Berman, Goldfarb, and Kamal (2021), 'Strengthening Early Childhood Inclusion'. These findings were further reiterated by the focus group participants interviewed as a part of this project.

Rhode Island Collaboration Model

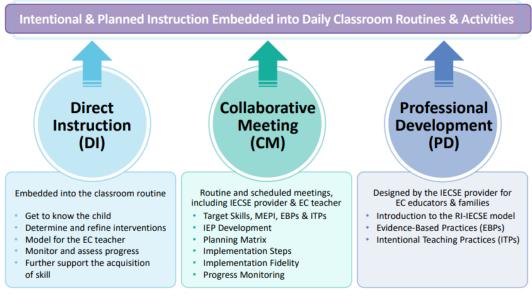
Rhode Island defines Itinerant Early Childhood Special Education (IECSE) as

"...a service delivery model for providing special education and related services to young children with disabilities in an environment in which they would be if they did not have a disability. The model allows young children with disabilities to actively participate in their natural settings, including within the general education curriculum by embedding the necessary supports, services, and interventions in those settings" (RI Itinerant Early Childhood Special Education (IECSE) Service Delivery Model, 2022).

The Rhode Island (RI) model speaks to the changing role of the IECSE practitioner from one that provides direct instruction to students into one that focuses on collaborating, coaching, and directly assisting the classroom teacher in order to adapt practices and include individualized instruction with the children in the classroom within the regular classroom daily routines and activities.

Rhode Island has developed a helpful <u>IECSE Anchors of Practice</u> graphic that explains how itinerant special education and related services personnel provide and participate in 1) Direct Instruction 2) Collaborative Meeting and 3) Professional Development.

Figure 9. Rhode Island's IECSE Anchors of Proactice Used with permission



*Ongoing documentation of DI & CM, including next steps, is critical to the success of the model.

*The frequency of the DI, CM & PD is individualized for each child and outlined in the IEP.

The model uses a distributed approach to instruction that assumes that coaching focuses on assisting the classroom teacher to embed targeted instruction throughout the classroom routines, rather than the ECSE educators working separately with the child. This approach promotes the concept that enhancing the skills of the general education teachers subsequently provides the child with a disability multiple opportunities to learn new skills (aligned to their IEP) and then to apply and strengthen these skills in multiple opportunities throughout the day, thus building skill strength and the ability to apply these skills across many settings and experiences.

Implications from the Literature

It is clear from the literature that any setting proposing to use itinerant services will need to have a clearly defined understanding of what the state constitutes as the IECSE model and how it should be implemented at the local level, and that the model is clearly articulated and communicated across all groups involved. This clarification includes identifying the competencies and performance indicators for itinerant ECSE practitioners (teachers, speech and language pathologists, occupational and physical therapists, and behavioral specialists, etc.). The state's comprehensive system of personnel development will need to be adjusted to focus on the itinerant model including in-service and pre-service learning opportunities.

The systems change and implementation science research, (Fixe, Blase, Horner & Sugai, 2009), suggests that to effectively support the research-to-practice gap in ECSE, it requires a conscious effort to build a system that prepares the field before full implementation and then establish a foundation that can continue to support the system through full implementation and sustain the effort for the long term.

Critical is the need to address the issues raised by Barton and Smith (2015) and reaffirmed by Berman, Goldfarb, and Kamal (2021) in their report for IL related to supporting inclusion including addressing: 1) fiscal/contracting policies; 2) transportation policies; 3) personnel policies; 4) program quality; and 5) conflicting policies between districts and non-school programs.

Ascetta, Googe and Garrison (2022), in a review of ECSE itinerant services, highlight the importance of professional development when developing and implementing an inclusive early education program. Providing itinerant services is not a practice typically taught in ECSE preservice in bachelor and graduate level programs. This was evident in the discussion that occurred with the representatives of Illinois' institutes of Higher Education (both university and community college instructors) in their focus group.

Additionally, coaching and consultation are not competencies taught in pre-service programs in IL. The Illinois Gateways program is currently the only program that regularly addresses these competencies. In most states, coaching instruction is a competency most often acquired by experienced practitioners through post graduate credential endorsement programs and sometimes through trial and error and individual practice experiences.

FINANCING ITINERANT EARLY CHILDHOOD SPECIAL EDUCATION

National Inclusion Finance Resources

The ECTA Center <u>Preschool Inclusion Finance Toolkit</u> was updated in 2018 to support state and local education agencies in providing inclusive ECSE across a range of ECE programs, including community-based ECE programs.

The toolkit includes strategies and guidance on collaborative funding mechanisms to create and sustain high-quality inclusive regular early childhood settings that are inclusive of preschool children with disabilities. The use of federal funds is outlined specifically to support young children with disabilities in regular ECE programs with their peers. The toolkit also includes a link to the Determining Costs within Inclusive Programs Worksheet that can be used to assist with determining costs.

Cost of Itinerant Early Childhood Special Education

Very little research has been completed that examines the costs of itinerant ECSE. Only one published article examining costs could be identified in the literature. Odom, Parrish and Hikido (2001) examined the costs of different models of inclusion and traditional special education preschool programs in five local education agencies across five states. The sites included traditional school district public school buildings and classrooms, Head Start, and community-based preschool inclusion centers/classrooms. The study used an "ingredients or resource-based approach" to examining estimated instructional costs. The resource-based approach to examining costs of educational programs has been demonstrated to provide the most useful strategy for identifying true costs. The results from the study demonstrated that there was

considerable disparity across settings per child. Most interesting was that in general, <u>traditional</u> <u>segregated classrooms showed a higher cost than services provided in inclusive settings</u>. Inclusive services averaged 11% less than traditional classroom-based services. Additionally, inclusive <u>classrooms costs were 37% lower versus traditional</u>, <u>segregated services</u>.

State Inclusion Caseload Information

Several states have looked at and provided guidance around caseloads, which are a cost driver in providing itinerant ECSE services.

Missouri

Missouri published Regulation IX: Caseloads (2022) requirements for ECSE that are mandatory and tied to funding requirements with the number of personnel approved for each public agency, based upon a review of the public agency's data for early childhood special education.

Figure 10. Missouri's caseload requirements

Position/Full Time Equivalent	Caseload/ Class Size
Teacher of Early Childhood Special Education Classroom	10-20
Teacher of Integrated Classroom	10-20
Itinerant Teacher (teachers who move from class to class within a facility or travel to other facilities)	12-22
Teacher of Severe/Low Incidence Classrooms	4-10
Paraprofessional in ECSE Centerbased Self Contained Classroom or Integrated Classroom	10-20
Paraprofessional in ECSE Severe/Low Incidence Classrooms	4-10
Diagnostic Staff – for each position	160
Related Services Staff Employed by District (Occupational Therapist, Physical Therapist, Speech Therapist)	35-50
ECSE Dedicated Program or Process Coordinator (Administrator)	180
ECSE Secretary	180
Nurse (FTE can be increased if additional nursing needs are specifically addressed in IEPs)	175
Social Worker	
General	175
Diagnostic	160
Related Services	35-50

Minnesota

Minnesota published <u>'Caseloads for early childhood program alternatives'</u> that include a recommendation for a teacher's caseload to be adjusted downward based on pupils' severity of disability or delay, travel time necessary to serve pupils in more than one program alternative, if the pupils on the teacher's caseload are receiving services in more than one program alternative, or the pupils are involved with other agencies. The maximum number of pupils in an ECSE classroom at any one time with an early childhood team is 16 (with a teacher and paraprofessional).

Illinois Early Childhood Education Special Education Funding

Illinois schools are funded using what is named the Evidence Based Funding (EBF) model. Funding for instructional services uses Average Student Enrollment (ASE) counts as the foundation for state funds flowing to districts. Counts are based on the ASE recorded on

October 1 and March 1 of each school year. The counts are based on the students entered into the Student Information System (SIS) on those respective dates. The two counts are averaged together to create a district's ASE for that year. State funds are then allocated to districts based on the ASE count from the previous year. Funding for districts for a particular year is technically one year behind the child count.

For children ages 3-5 with disabilities, EBF district funding is based on children with active IEPs. For EBF purposes, funding for educational services for all children in IL is calculated on a 1:141 ratio; or one unit of IL funding for every 141 students in the SIS system. EBF uses 3 staffing ratios (for Special Ed Teachers, Instructional Assistants and Psychologists) related to providing supports to students' with IEPs. These cost factors are not tied to the count of students with IEPs in a district, but instead allocated based on overall district enrollment. Special education teachers are included at ratio of 1 FTE (Full-time Equivalent) to 141 students for grades PreK - 12. Children 3-5 years of age are calculated at a rate of .5. Subsequently the calculations require two preschool age children with active IEPs to equal one equivalent K-12 child. School districts receive state funding based on these calculations.

District's pay for four general functions – Instruction, General Administration, Support Services and Others. A typical school district spends approximately two-thirds of its budget on employee compensation (Instruction and General Administration), one-fourth on building maintenance, and the remainder on equipment and supplies.

School districts receive funds for services from three major sources: State, Local Tax, and Federal. The percentage of these sources as revenue varies depending on a multitude of factors, including property values in the district, district population demographics, and other state and federal program funding variables. Local funds are the largest source of revenue in most districts coming from property taxes. State funds, appropriated by the state general assembly, include EBF and other funding such as special education, transportation, and construction. On average, 64.6% of funds come from local revenue, 26% from state funds, and 9.5% from federal sources.

It is up to the local school boards to decide how these collective funds are then allocated to provide services to children from preschool through high school. Local school boards determine their respective budgets in an annual process prescribed by state law. There are separate state regulations and processes that school boards must follow for some of these determinations, that include posting of proposed budgets and allowing for public input in how local district funds are allocated.

Of interest is that the range of spending and revenue can vary across districts and even within districts. Per student spending varies because schools have different populations of students with varying needs (e.g., special education, English language learners, or students from families with low income). School size can also be a factor with lower enrollment leading to a high per

pupil cost for fixed positions like principal. Teacher salaries vary based on a teacher's years of experience and state or federal regulations may also require specific student/teacher ratios.

The <u>Illinois Funding Commission</u> completed cost modeling that factors in the staffing and supports needed in early childhood programs to be able to enroll and support children with disabilities, but not the specific ECSE and related services. The Funding Commission also recommended the cost factors associated with ECSE within EBF be reviewed to address the finding that it does not appropriately reflect ECSE costs.

Funding for preschool age children with IEPs is supported by a mix of state EBF funds, federal funds from the IDEA Part B funding formula, as well as through local school district sources. ISBE calculates instructional spending and operations spending based on the ASE. Instructional spending includes supporting activities directly dealing with the teaching of students. Operational spending includes costs for the overall operations of the district spending. As cited above, EBF funding for children ages 3-5 with IEPs is determined differently than for children in grades K-12. Children in the younger age group are counted using a .5 funding formula. Therefore, it takes twice as many children to equal one child for funding, thus likely stretching funding and making it more challenging to provide adequate services. This issue was reinforced by the superintendents participating in this project's survey that significantly voiced concerns for insufficient funds to effectively support the 3 to 5-year-old student population with IEPs.

While state funding to schools is based on IL state legislation, federal funding is determined by Congress. IDEA Part B federal funding that supports special education and related services is determined using a population count formula based on FY 2000 census-based population data. 85% of the funding flowing to the state is based on the total number of children in IL between the ages of 3-21 and 15% is based on the number of children determined to be living with families that meet the poverty-level criteria. The federal government uses population census IDEA Part B – Section 619 as the basis to allocate funding to states.

IDEA Part B – Section 619 funds must be used to support the costs of providing special education and related services for children ages 3-5 with disabilities. In Illinois there is a requirement that Section 619 funds can only be used to support instruction and not used for supplies and materials. IDEA Part B funds can be used to support the costs of providing special education and related services for children 3-21 years of age. It is important to note that federal funding was reported to contribute only 9.5% to the total revenue for schools in IL in 2021. The remaining funds to support ECSE are from state (26%) and local districts (64.6%).

School districts have the option to access Medicaid reimbursement for certain special education related services such as physical therapy, occupational therapy, and speech and language therapy services. There are no restrictions on how local districts choose to use Medicaid revenue to support ECSE and related services.

There are two documents that outline what funds may be available to support inclusive practices in Illinois: Funds Supporting IDEA Services for Preschool Aged Children in Illinois and Funding Considerations for Inclusive Early Childhood Programming – Age 3-5, including a webinar on the funding considerations. The Funding Considerations document provides detailed and useful guidance for school districts and programs about how to effectively use federal and state funds in an integrated fashion to support ECSE inclusion.

There are a number of funding options that are available to a district to support services to children 3-5 with IEPs. Districts can braid state and federal funds with other federal and/or state grants such as use Title 1 or PFA/PFAE funding. Districts can work collaboratively with a local program such as Head Start or PFA/PFAE and layer funds to support special education services. Children may be enrolled in Head Start half-day and CCDF funds can be used to provide child care the other half of the day, with IDEA funds used to support special education services.

School District Budgeting for Early Childhood Special Education

School districts are required to comply with required Cost Allocation Principles. Each district must have cost allocation plans which state how the district will identify, accumulate, and distribute allowable administrative costs and identify the allocation methods for distributing costs.

Local district school boards make decisions about how the combination of state, federal and local revenue is allocated to provide instructional support for children with and without disabilities. The funds required by a school district to provide ECSE to children 3-5 five years of age are not solely supported by federal funds, with federal funds supporting only 9.5% of instruction in Illinois overall. Therefore, the revenue and expenditures supporting instruction come from a combination of sources and it is the local school board that makes the determination for allocations.

District Service, Staffing and Funding Option Examples

This section includes tables that provide examples of how a small, medium, or large district might approach budgeting and allocating resources in order to provide inclusive early childhood special education in schools and community settings in Illinois.

These are provided as examples only and do not represent a distinct model or recommendation to be implemented by any district. They illustrate one or more of the many ways in which districts can support the educational needs of preschoolers with disabilities across settings and should not be interpreted as implying that districts close current inclusive classrooms at school sites. Rather, each district would examine where preschool children with disabilities are currently enrolled and make resource allocation determinations based on the staff needed to serve children in inclusive preschool classrooms at district schools and itinerant staff to serve

children enrolled in community-based early childhood education programs. The service options used may vary from year to year depending upon variables such as severity of disability and needs of children with IEPs, geography, community early childhood education resources, and number of children.

Figure 11. Examples of school district budget / resources allocation to support IECSE

Small District - 10 Students (ages 3-5) with IEPS			
Service Options	Staff Options	Funding Options	
Option I. 2 Inclusive Classrooms: 2 classrooms each with 3 children with IEPs 4 children attending centers in the community with the public-school teachers, each visiting 2 children one day a week Option II. 1 Inclusive Classroom: 4 children with IEPs in inclusive PFA classroom or district/tuition funded preschool classroom 6 children in community-based EC programs — 4 previously enrolled 2 placed by IEP Team	 Option I: 2 Regular Early Childhood Teachers 1 Early Childhood Special Education Teacher (Itinerant) 2 Assistant Teachers Option II: 2 Regular Early Childhood Teachers 1 Early Childhood Special Education Teacher (Itinerant) 2 Assistant Teachers 	Option I: State Funding: EBF Local Funding IDEA Funding Option II: State Funding: EBF, PFA Local Funding: IDEA Funding: Community Placement Preschool Tuition Child Care Development Children for those eligible	

Medium District - 50 Students (ages 3-5) with IEPS

Options

- 4 Inclusive classroomssome may be PFA and some may be district supported and/or one Title 1 classroom
- 5 Children with IEPS in each classroom served inclusively (20 total)

1 community Head Start Center:

- 9 Children with IEPs served inclusively in Head Start community-Based Settings:
- 12 Children with IEPs served inclusively in community settings,
- majority previously enrolled in child care
- several placed by IEP Team
- 2 of which are out of district children in child care
- 8 children with speech delays receiving speech services only

Staff Options

- 4 General Early Childhood Teachers
- Minimum of 4 Assistant Teachers depending on needs of children in classrooms
- 3 Teachers supporting 40 children across district, Head Start and community sites (approx. 14 children/teacher)
- If 4 then one or more teachers sharing role of child find, evaluation, and maybe coordination and MOUs

Itinerant Speech and Language Pathologist (SLP) providing SL therapies across all children (range of 40 children /SLP) (Missouri caseload recommendation)

Funding Options

- State Funding: PFA, EBF
- Local Funding:
- IDEA Funding: Community Placement and MOU for Tuition Payment
- Preschool Tuition
- Child Care Assistance Program for those children / families eligible.
- 2 MOUs with neighboring school districts, providing tuition to support nonresident school district to provide ECSE and related services

Large District - 500+ Students (ages 3-5) with IEPS			
Model Options	Staff Options	Funding Options	
 I. Multiple Inclusive Classrooms II. Head Start MOUs with one or more Head Start Grantees III. Itinerant ECSE provided to children with IEPs attending community-based child care or preschools IV. Itinerant ECSE to children with IEPS attending community-based child care or preschool outside of the resident district 	Multiple Itinerant ECSE teachers Possible options could also include: • 1 ECSE teacher teaching one classroom • 1 or more ECSE teachers co-teaching/team teaching • all ECSE teachers teaching itinerantly across multiple sites Related Services • Use MO suggested caseload of 35-50 children per itinerant	 State Funding: PFA, EBF Local Funding: IDEA Funding:	

therapist



VII. RECOMMENDATIONS

- 1. Service Model
- 2. Funding
- 3. Data and Accountability
- 4. Community Collaboration & Partnerships
- 5. Support and Guidance
- 6. Workforce and Professional Development
- 7. Family Engagement

VII. RECOMMENDATIONS

The following recommendations are made based on analysis of data and information collected, including previous reports, state, and national data, focus groups and interviews, advisory group input, peer state review and review of national literature and best practices.

This report has analyzed several models and approaches for Illinois to utilize to provide Early Childhood Special Education and Related Services to preschool aged children (aged 3-5) with IEPS, which are presented in table form in *Appendix 5*. *Service and Funding Models for Consideration*. The recommendations below reference these options.

These recommendations take a systems approach regarding what it will take for Illinois to implement Itinerant Early Childhood Special Education (IECSE) in community-based early childhood education settings.

Figure 12. Illustration of the interrelatedness of the report recommendations.



1. SERVICE MODEL

1.1. Develop policy regarding the Itinerant Early Childhood Special Education (IECSE) model in community-based early childhood education settings.

1.1.1 Promote the evidence-based itinerant early childhood special education (IECSE) model that includes ECSE and related services personnel traveling to community-based early childhood education (ECE) sites, where they teach, consult, participate in meetings, coordinate children's educational goals with other early childhood educators, and partner with parents, in order to embed instruction into the routines and activities of the classroom.

Appendix 5 lays out several options for district implementation of IECSE:

- Option A Itinerant services across district/CBOs
- Option B Itinerant services across district with MOUs for out-of-district children in CBOs
- Option C Itinerant services across district within a regional cooperative arrangement
- Option D Alternative funding itinerant service system

These options are addressed in the following recommendations.

- 1.1.2 Include use of the IECSE model for providing IEP services to preschoolers with disabilities enrolled and whose placement is in a community-based ECE program within administrative rules and administrative rules for PFA/PFAE programs that are consistent with:
 - a) the Joint Federal Policy Statement on Inclusion of Children with Disabilities in Early Childhood Programs (2015) "IDEA presumes that the first placement option considered for a preschool child with a disability is the regular public preschool program the child would attend if the child did not have a disability" and
 - b) the subsequent <u>Dear Colleague Letter (2017) on Preschool Least Restrictive Environments</u>, that states preschool children with IEPs can receive a free and appropriate education (FAPE) in community-based early childhood education settings, including Head Start, community-based PFA/PFAE, licensed and family child care, and other accredited preschools.
- 1.1.3 Include a requirement for districts to collaborate with community-based ECE programs where preschool children with disabilities are enrolled to jointly develop MOUs (see recommendation 1.3).

1.2 Develop Itinerant Early Childhood Special Education (IECSE) Service Guidelines

1.2.1 IECSE service guidelines should address issues related to 1) *logistics* - balancing professional roles, scheduling, paperwork, travel, finding time for collaborative planning, 2) *caseload* -numbers of children, 3) *professional development* - training, support, and coaching, 4) *guidance* - regarding embedding instruction into the

- routines and rhythm of the classroom; 5) *collaborative planning*. Note: The IECSE model is described in more detail starting on page 30.
- 1.2.2 Include instructions regarding the role of the IEP team, including the parent, to make placement decisions, including federal guidance "for a child with a disability who already participates in a regular public preschool program... ensure that the child receives all of the special education and related services and supplementary aids and services included in the child's IEP in order to meet the needs of the particular child" and "consider any potential harmful effect on the child and on the quality of services that he or she needs before removing the child from the current regular public preschool setting to another more restrictive setting."

1.3 Develop a Memorandum of Understanding (MOU) template for use by districts and community-based early childhood education programs

- 1.3.1 Revise the Memorandum of Understanding (MOU) template for districts to use with community-based ECE programs where preschool children with IEPs receive ECSE services and ensure it includes the elements in the recent Guidance on Creating an Effective MOU to Support High-Quality Inclusive Early Childhood Systems from the Office of Head Start and the Office of Special Education Programs.
- 1.3.2 The MOU template should also include collaboration regarding collection around assessment information for the federally required Early Childhood Outcomes (ECO) measurement as addressed in recommendation 5.4.

2. FUNDING

2.1 Develop funding policy guidance that supports Itinerant Early Childhood Special Education (IECSE)

- 2.1.1 Develop a detailed preschool inclusion funding policy guidance document that:
 - a) Clearly defines how school districts can utilize federal, state, and local funds to create ECSE budgets that enable them to hire itinerant ECSE teachers and related services professionals to provide IECSE to preschoolers with IEPs who are enrolled and whose placement is in a community-based ECE program.
 - b) Includes examples in the policy of preschool special education budgets for small, medium, and large districts that include how to support the varying number of children with IEPs across a variety of inclusive ECE programs.
 - c) Clarifies how districts can use funds if the IEP determines that a child's placement in a community-based early childhood education setting can receive FAPE at no cost to the family. This can include the full cost of tuition or supplementing the costs already covered by another funding source, e.g., child care subsidy or Head Start. The policy guidance should include a sample contract or language that can be included in the MOU/MOA that districts can use.

2.2 Develop policy guidance regarding funding for out-of-district preschoolers with IEPs

- 2.2.1 Develop policy guidance that LEAs are expected to serve preschoolers with disabilities who reside out-of-district but who are enrolled in a community-based ECE program in their district including child find, evaluation to determine eligibility, IEP development, delivering IEP services, etc. Include funding guidance that includes:
 - a) use of MOUs between districts to transfer funds (include MOU template and recommended formula for calculating costs) to cover the cost of providing itinerant ECSE services to preschool children with IEPs in community-based ECE settings from a neighboring district. (Option B see Appendix 5)
 - b) use of existing special education co-ops or newly formed ECSE co-ops in order to provide itinerant ECSE services to preschool children with IEPs in community-based ECE settings from a neighboring district. (Option C see Appendix 5)
 - c) allowing the district of residence to send ECSE and related services staff across district lines to provide services when the child is enrolled in a community-based ECE setting that is fairly close to the district boundary and addressed in an MOU between districts to inform the other district if this occurs.
- 2.2.2 Explore changes to regulations/statute to allow districts to 'count' ALL preschool children with IEPs enrolled in CBOs within their district boundaries (including children residing in a neighboring district) for the purposes of EBF (evidence-based funding) and IDEA funds. Note: PFA/PFAE, Head Start and Child Care do not enroll children based on their district residence. (Option D see Appendix 5)

2.3 Conduct a cost study

- 2.3.1 Conduct or contract for a cost study to determine whether the funding available from the multiple state, federal and local revenue sources are adequate to fund quality inclusive early childhood special education and related services in a variety of inclusive ECE settings. The cost study should:
 - examine the ECSE budgets of a sample of small, medium, and large districts to analyze revenue from the multiple funding sources versus expenditures.
 - b) include a sample of both districts that provide the majority of ECSE and related services on the school campus and districts that provide a significant proportion of services through itinerant ECSE in community-based ECE programs.

Note: this recommendation builds on the Illinois Commission on Equitable Early Childhood and Care Funding (2021) report that recommends "...that the cost factors associated with ECSE within EBF be reviewed by the EBF Professional Review Panel to address the Commission's finding that it does not appropriately reflect ECSE costs and determine ramifications on EBF based on adjustments that may be needed. Specifically, the ratio of Special Education (SPED) teachers to preschool students behind the cost factor for SPED teachers should be reviewed".

2.3.2 The cost study should determine both the average revenue collected across funding sources and the average cost per child to provide quality itinerant ECSE. The cost study should make recommendations for possible revenue enhancements, including potential changes to the evidence-based funding formula, PFA/PFAE amounts, and/or Medicaid billing to enhance revenue to support quality inclusive ECSE and related services in community-based ECE programs.

2.4 Explore Medicaid Funding

2.4.1 Explore expanded billing of Medicaid for special education and related services including possible central billing/billing agent that could potentially expand revenue for itinerant ECSE. An initial step may be for ISBE to survey districts to determine the prevalence of Medicaid billing and revenue generated, and examine claiming mechanisms that may be employed to maximize efficient claiming.

3. DATA AND ACCOUNTABILITY

3.1 Expand data collection

- 3.1.1 Revise the Student Information System (SIS) and coding to include the actual ECE program type, including Head Start, PFA/PFAE (school-based), PFA/PFAE (community-based), child care, private preschools, and whether they receive the majority of their IEP services in those settings. This data collection will enable disaggregated reporting of children with disabilities receiving their IEP services in these programs that can be used for planning at the state and local/community level.
- 3.1.2 Consider including the actual name of the ECE program, e.g. 'ABC Learning Center', which would support analysis and planning at the local level by Community Inclusion Teams.
- 3.1.3 Generate aggregate placement reports with the setting (type and name) for preschool children with IEPs served that can be used by districts/community inclusion teams for planning.

Note: As it will likely take some time to make changes to the state SIS data system, consider conducting a **preschool environments survey** of districts regarding preschool program enrollment for children with IEPs in the categories outlined above, as well as whether the majority of special education and related services are provided in that setting, as this data is not currently available and will provide a baseline.

3.2 Provide Technical Assistance and accountability for low-performing districts

3.2.1 Building on the current voluntary model that focuses on low-performing districts regarding inclusion, establish criteria to target school districts, e.g., districts not meeting state target or districts with low performance in Indicator 6a, in order to target technical assistance and support by preschool inclusion TA specialists (see 5.2 below). Once data becomes available, a focus can be made on districts with a

- low percentage of preschool children who receive their IEP services in community-based ECE settings.
- 3.2.2 Develop an accountability system that requires targeted school districts to develop improvement plans to increase the percentage of preschool children with IEPs in regular ECE programs, with activities and timelines and data reporting to determine progress. Supports for improvement and technical assistance can be provided to these districts by preschool inclusion TA specialists (see 5.2 below).
- 3.2.3 Monitor districts for the joint development of MOUs with community-based early childhood education programs.

4. COMMUNITY COLLABORATION & PARTNERSHIPS

4.1 Establish a state-level inclusion team

- 4.1.1 Formalize the state-level inclusion leadership team (established under the national Early Childhood Technical Assistance Center pilot of the Indicators of High-Quality Inclusion) with a charter document that includes:
 - a) *Membership:* including state agency staff, Early Choices, Head Start and Child Care Associations, Higher Education, advocates, and families
 - b) Functions: including reviewing and analyzing inclusion data, addressing the objectives and action steps in <u>Illinois' PDG B-5 Strategic Plan Inclusion of Young Children with Disabilities in Early Care and Education Settings (2020)</u>, revising the strategic plan as necessary, and reviewing statewide guidance documents and resources prior to them being issued
 - c) *Policies*: addressing attendance, orientation, and facilitation strategies for holding and making decisions in order to ensure meaningful participation of all members
 - d) Communication: with Community Inclusion Teams (CIT) across the state in order to address issues that occur at the local level that potentially need a statewide or policy solution and communication with stakeholders regarding annual inclusion data, statewide successes, and challenges
 - e) Meeting schedule: e.g., quarterly, twice a year

4.2 Establish and Support Community Inclusion Teams (CITs)

- 4.2.1 Establish Inclusion Teams (CITs), which are a key component of the <u>ECTA Center:</u>

 <u>Community Indicators and Elements of High-Quality Inclusion</u> and were piloted by Early Choices in three Illinois communities.
- 4.2.2 Develop a CIT guidance document that addresses:
 - a) Membership including include school district and community-based ECE program administrators, program personnel, family members, and community partners
 - Note: the national community inclusion indicators recommend limiting the membership to 15 to be effective.

- b) Roles and functions including reviewing data (utilizing data made available by the state) on inclusion for their geographic area, developing an action plan that promotes the availability of high-quality inclusive educational opportunities for preschool-age children with disabilities, and implementation of evidence-based inclusion practices that may include cross agency professional development and implementing the national <u>ECTA Center: Community Indicators and Elements of</u> High-Quality Inclusion
- c) Geographic boundaries determine whether to establish CIT geographic boundaries, e.g., counties, districts, the 39 <u>Birth to Five Council regions</u>, or whether to leave the determination of the CIT boundaries to be made at the local level
- d) A template for each CIT to use to establish meeting norms, membership, and meeting schedule
- 4.2.3 Explore funding to support CITs, including:
 - a) preschool inclusion TA specialists who can act as a consultant (see 5.2 below)
 - b) start-up funds to help get CITs established

4.3 Continue to support inclusion in early childhood education and care programs

- 4.3.1 Continue to support the Illinois Department of Human Services' (IDHS) implementation of the road map to address inclusion as part of the Child Care Development Fund (CCDF) that includes recommended strategies related to access, participation, supports, and data.
- 4.3.2 Continue to support the inclusion of preschool children with disabilities as part of the ExceleRate Illinois quality rating and improvement system that includes standards, guidelines, resources and supports for staff training, data, and MOUs with districts for collaboratively supporting the education of preschool children with disabilities.
- 4.3.3 Continue to support the 'Illinois Commission Report of Findings and Recommendation on Equitable Early Childhood Education and Care Funding' (2021) that calls for expanded investments that "ensures quality and access to comprehensive early childhood education and care (ECEC) experiences".

5. SUPPORT AND GUIDANCE

5.1 Make available Preschool Inclusion TA Specialists

- 5.1.1 Expand funding for additional* Preschool Inclusion TA Specialists through Early CHOICES who can provide:
 - a) support and technical assistance to CITs (that include district and community-based ECE leaders).
 - b) TA to support school districts that have action plans to increase the percentage of preschoolers with IEPs served in regular ECE programs and TA to support

- community-based early childhood education programs to include preschool children with disabilities.
- c) support for 'communities of practice' to promote quality itinerant ECSE practices by ECSE and related services personnel and to support coaches.

*ISBE will need to analyze how many Preschool Inclusion Specialists will be needed to carry out these functions and the ratio of Preschool Inclusion Specialist to CITs and districts.

5.2 Guidance regarding Early Childhood Outcomes (ECO)

- 5.2.1 Develop policy guidance regarding the collection and measurement of the federally required 'Indicator 7 Preschool Outcomes' that measures the percent of preschool children with IEPs who demonstrate improvement in their development over their time receiving special education and related services for children whose placement is a community-based ECE program. This would include collaboration between the itinerant early childhood teacher and the regular early childhood teacher in completing one of ten allowed assessment tools as well as the national ECO Child Outcomes Summary (COS) form.
- 5.2.2 Develop language regarding the collaborative ECO process to include in the MOU between the district and the community-based ECE program (see recommendation 1.3).

6. WORKFORCE AND PROFESSIONAL DEVELOPMENT

6.1 Make available professional development on Itinerant Early Childhood Special Education (IECSE)

- 6.1.1 Build upon existing training and professional development opportunities to include a focus on itinerant ECSE practices for ECSE teachers and related services professionals regarding implementing itinerant ECSE practices to fidelity.
- 6.1.2 Jointly develop training for community-based early childhood educators regarding the itinerant ECSE model and their role in meeting and collaborating with the itinerant ECSE teacher and related services personnel in order to jointly plan to embed learning within the routines and activities of the classroom.

6.2 Develop a coaching model

- 6.2.1 Develop a coaching model to promote itinerant ECSE practices by ECSE teachers and related services professionals, including training for coaches.
- 6.2.2 Explore the potential of a coaching credential, such as an endorsement to an already established certificate/license and/or graduate degree in coaching and consultation.

Note: Coaches support early childhood professionals to implement practices to fidelity through observation, discussion, and exploration of the practices, recommendations and supports for improvement.

6.3 Promote itinerant early childhood special education model in higher education

- 6.3.1 Collaborate with Institutes of Higher Education (IHEs) regarding enhancing syllabi and coursework to expand focus on itinerant ECSE.
- 6.3.2 Collaborate with IHEs regarding promoting and supporting practicums that support student experience and learning about itinerant ECSE practices.
- 6.3.3 Address challenges to pipeline and pathways to grow the number of ECSE and related service providers and paraprofessionals that are representative of the children served.

Note: This collaboration should include early childhood special education, as well as occupational therapy, physical therapy, and speech and language pathology degree programs.

6.4 Develop a professional development program/endorsement for elementary administrators

6.4.1 Develop an administrator endorsement or degree program that incorporates the concepts of inclusion and itinerant ECSE that can include collaborative planning, use of data, budgeting and resource allocation, and coaching.

7. FAMILY ENGAGEMENT

7.1 Develop clear materials on inclusion for parents

- 7.1.1 Revise and strengthen parent materials including the transition document for parents 'When I'm 3. Where Will I Be?' to ensure that it:
 - a) explains the evidence for improved developmental outcomes for children with disabilities who are educated in inclusive classrooms alongside their typically developing peers.
 - b) explains options for inclusion in regular ECE programs in the community.
 - c) explains the itinerant ECSE model.
 - d) explains the parent's role as part of the IEP in making the placement decision for their child.

7.2 Develop materials and training for early intervention service coordinators

- 7.2.1 Develop materials for early intervention (EI) service coordinators to support them in explaining and discussing preschool inclusion with parents and their role as part of the IEP team in making the placement decision for their child.
- 7.2.2 Enhance El service coordinator training to include explaining potential placement options for regular ECE programs in their community during the transition planning process in the year before the child turns three, including at the transition conference

with the school district. The training can also include how they can inform parents of their role as part of the IEP team in making the placement decision for their child.



APPENDICES

Appendix 1. Glossary of Terms and Acronyms

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APPENDICES

APPENDIX 1. GLOSSARY OF TERMS AND ACRONYMS

The following table includes terms and acronyms that are commonly used in this report.

Term or Acronym:	Explanation:
APR	Annual Performance Report
CCDBG	Child Care and Development Block Grant
Community-based	ECE programs not on a public school campus
EBF	Evidenced-Based Funding – Illinois education funding formula
ECE	Early Childhood Education (Head Start, child care, Preschool For All / Preschool For All Expansion)
ECSE	Early Childhood Special Education (under IDEA Part B-619)
El	Early Intervention (under IDEA Part C)
ExceleRate	Illinois' Quality Rating and Improvement System (QRIS)
FAPE	Free Appropriate Public Education
Head Start	Federal preschool program with direct funding to local grantees
IDEA	The federal Individuals with Disabilities Education Act
IDEA Part B Section 619	IDEA Part B Section 619 special education and related services for children ages 3 - 5 with developmental delays and disabilities
IDEA Part B Section 611	Part B Section of IDEA provides grants to states for special education of school-age children
IDEA Part C	Part C of the Federal Individuals with Disabilities Education Act (IDEA) governs Early Intervention services to infants and toddler from birth to age with developmental delays and disabilities and their families.
IECSE	Itinerant Early Childhood Special Education
IFSP	Individualized Family Service Plan (for children under IDEA Part C)
IEP	Individualized Education Program (for children under IDEA Part B-619)
ISBE	Illinois State Board of Education
OSEP	Office of Special Education Programs

PFA/PFAE	Preschool for All and Preschool for All Expansion are Illinois' state funded pre-kindergarten program
LEA	Local Education Agency/School district
LRE	Least Restrictive Environment
SEA	State Education Agency
SIS	Student Information System
Title 1	Every Student Succeeds Act – Title 1 Improving Basic Education Operated by State and Local Educational Agencies

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APPENDIX 3. FOCUS GROUPS AND INTERVIEWS

Key themes for the focus groups and key informant interviews are summarized below.

Key for references below:

CC = Child Care Administrators

ECE = Early Childhood Educators

SDA = School District Administrators

HS = Head Start Administrators

RS = Related Services Providers (therapists)

P = Parents

IHE = Institutes of Higher Education

PFA = Preschool for All Administrators

TA = Technical Assistance Providers

TABLE 4. KEY FINDINGS FROM FOCUS GROUPS ORGANIZED BY THEMES

hemes
 The availability of the state's student information system offers strong potential for collaboration with availability of data across organizations (HS)
 The State Data System strengthens the capacity of collaborating entities to document and communicate information that is easily accessible for all parties involved (CC)
 School districts of residence feel a strong sense of responsibility for the outcomes of all processes that happen for children with IEPs, including those children receiving services in CBOs and PFA/PFAEs (SDA)
 An important policy to consider within any MOU is outlining responsibility for data entry across participating entities (ECE) and concern about outcome data for children enrolled in community- based early childhood educations settings.
 Building relationships across participating entities is critical to collaborating models working effectively (HS)
 Positive collaboration impacts relationships and builds trust and cooperation (RS)
 Using experienced personnel to implement itinerant work is important to ensuring an effective process (SDA)
 Community-Based EC education program staff want the support of trained ECSE and related services staff to support the development of children with disabilities in their classrooms (PFA/PFAE, HS)

- Children needing extended care most often have to transition from one program to another within a program day (CC)
- It is important to create an atmosphere and philosophy of push-in related services with some flexibility depending on the needs of the individual child (RS)
- Parents need more information to be provided to enable them to make informed decisions about appropriate services and placement options for their children with IEPs (P)
- For children that must transition between/across programs for services it is important to establish flexible and appropriate policies and procedures that make those practices effective for all staff and children (CC)
- Transitioning children across multiple service sites for services can be harmful (CC, HS)
- Many CBO sites do not have the necessary resources that allow them each to reach their full potential as Gold Centers of Excellence and to effectively serve children with IEPs needs (RS, IHE)
- To effectively implement a stronger itinerant model, more school district staff are needed to meet the demands of an itinerant model [lower caseloads, planning time allowances, travel time and reimbursement, staff with coaching expertise] (SDA, T, RS)
- Need for clear process for who manages the MOU and clear lines of accountability. Due to the fact that children may be enrolled in Community-based early childhood programs within the district who reside outside of the district (SDA)
- Models needed to be designed to allow for necessary collaborative planning across programs [ECSE teacher planning time to work with CBO staff; funding to allow programs to employ substitutes so teaching staff can attend IEPs] (ECE RS, HS, CC)
- Establish a statewide coaching model that can be used by school districts, along with sufficient funding allowing school districts to hire sufficient staff for coaching model to be implemented (IHE)
- Limited quality inclusive early learning sites impact ability of IHE to offer inclusive practicum experiences (IHE)
- There are currently a number of blended and braided funded sites that are working effectively and can be used as models (HS)

Funding Models and Strategies

- There are not always the correct individuals with decision-making capacity at the table when considering inclusive opportunities (CC)
- Further clarification is needed exploring strategies to support children that need full-day services [District and CBO/PFA; CBO/PFA and Head Start; CBO/PFA and child care] (PFA)

- Funding is needed to allow for collaborative planning in programs (SDA)
- Funds are needed to ensure CBO sites have adequate and appropriate material and supplies for children with IEPs (RS)
- CBOs need funding support to allow them to use lower ratios of adults to children when children with IEPs are enrolled (CC)
- Differential in salaries when PFAs are located in school districts buildings (IHE)
- There is a discrepancy between funding children with IEPs in PFAs versus same children receiving services in a public school classroom (IHE)
- Perception that itinerant services cost more than operating classrooms on the school campus (PFA, SDA)
- There are currently insufficient fiscal resources being allocated to support itinerant staffing (SDA, RS)
- There is not salary equity across programs (IHE)

State Support and Guidance

- There is currently not sufficient flexibility by districts to provide itinerant staff to support implementation of IEPs in CBO settings (HS)
- Currently there is no system to assist CBOs with ensuring sites are ready for children with IEPs [Spacing, ADA requirements; room arrangement] (CC)
- There are no policies that support the availability of necessary fiscal and organizational resources for CBOs to raise level of quality of early education practices (SDA)
- The credentialing process currently does not speak to building personnel's capacities to support inclusion practices (IHE)
- Districts and CBOs need assistance on how to handle conflicts within MOUs and Collaborative Agreements (SDA)
- There is currently a lack of diverse practitioners working in programs to ensure equity in staffing (HS)

Workforce and Professional Development

- There are not sufficient professional development opportunities to offer training to school district staff on itinerant instructional practices [coaching, caseload management, scheduling, working with adults, collaboration, developing relationships] (ECE, RS, SDA)
- Implement professional development activities to support staff to be ready to provide services to children with IEPs in inclusive settings prior to increasing outreach (TA, SDA, RS)

- Further developing ongoing professional development activities to strengthen the skills of the general education practitioners to work with children with IEPs (IHE)
- The state is currently lacking a coaching credential for licensed, certified educators (IHE)

Policy and Laws

- State policies result in competition for enrollment among programs with the current funding structures and formulas (HS)
- Parents are not sufficiently informed about state laws, regulations and policies that support parent choice and flexibility for child placement for services (HS, RS, SDA)
- There is currently inequity of funding for services across early care and learning settings (IHE)
- Children are not coming out of IEP meetings with LRE expectations or goals on their plans (ECE)

Curriculum and Assessment

 There are no consistent policies and practices detailing implementation of curriculum and assessment activities across all settings (ECE)

Quality; Educator Qualifications

- New teachers are not coming into schools with adequate skills to develop effective and appropriate IES that are also aligned with state standards (SDA)
- General education practitioners are not adequately prepared to take on the role of effectively supporting young children with disabilities (RS)
- The current the quality of care and education in CBO sites is not sufficient to effectively support children with IEPs and more training is needed, as are funds for supplies and materials (IHE)
- Lead practitioners in CBO sites are not sufficiently qualified to work with children with disabilities and perhaps should be required to be cross-endorsed (IHE)

Other

 Itinerant staff often come into the role lacking an understanding of their role as coaches, trusting partners, collaborative partners, coplanners, and that they are an individual that comes into a center as a visitor to site (RS)

APPENDIX 4. INFORMATION FROM OTHER STATES

The following is information gathered from other states through interviews with ECSE state leaders and information gathered from publicly available sources.

West Virginia

West Virginia (WV) Code §18-5-44 mandates that the West Virginia Board of Education, in collaboration with the Secretary of the West Virginia Department of Health and Human Resources, ensure that every eligible child have access to high quality Pre-k. County boards of education are required to develop pre-k programs with existing community programs, including Head Start and licensed child care centers. Parents are able to "choice" their children into a county region for services. All children identified as eligible for the WV UPK program are reviewed by the respective County Collaboration Team. The Team makes decisions about the centers children will attend. Funding follows the child in WV. Children with IEPs are served across settings and where services are provided is decided by the IEP Team. IEP Teams work with the County Collaboration Teams with site identification. The State recognizes that considerable professional development is needed to enhance the likelihood that special education and related services are provided in the classroom to reduce the number of children pulled out for services outside the classroom.

Data and Accountability

- Indicator 6a percent of children in regular early childhood programs (< 50% children with disabilities) = 49%. 9.5% self-contained; and under 2.5% home-based services.
- The state has a statewide student enrollment system. All children receiving educational services are entered into the database. Each district and Community-Based Organizations (CBO) site has an individual ID number allowing the state to know where children are being serviced or had been served (longer term).
- The state has a Learning Management System that maintains all data for practitioners and their training records. All practitioners have access to the LMS system to monitor their credentials and access online professional development.
- Pre-K collaborative contracts (template and checklist included in the UPK guidebook –
 see link below) are legally binding documents that delineate roles, responsibilities, and
 resources of each partner. A collaborative contract must be completed and signed
 annually prior to the first day of school by the LEA and each collaborative partner (Public
 Schools, Head Starts, Child Care) to illustrate agreement of terms for pre-k program
 implementation.
- Additionally, a Classroom Budget and Cost Allocation Worksheets must be completed for each collaborative classroom. This is addressed in the state's legislation and in the UPK Guidebook (see link below)
- Collaborative partners in a countywide pre-k program may have different funding sources and program costs, county collaborative team work jointly to coordinate pre-k financing. Programs work jointly to create collaborative contracts and budgets for collaborating programs to determine the total cost for each collaborative classroom, sufficient to have the resources needed to meet quality standards, state regulations and

policies, and federal requirements. Several steps are necessary to efficiently determine classroom and program costs. Applicable programmatic regulations and policies, including WVBE Policy 2525, Head Start Performance Standards and regulations, and WV Child Care Center Licensing, must be used to determine the total cost of each classroom. Partners analyze the resources available to cover the costs. (From WV UPK Guidebook)

- Enrollment of children with disabilities must include pre-k caseload consideration. WVBE Policy 2419 defines maximum pre-k caseloads of children with IEPs for universal pre-k teachers, as well as for preschool special needs teachers. According to WVBE Policy 2419, all WV Pre-K classrooms, including special education, should to the extent possible, reflect the natural proportions of students with disabilities to those without disabilities within the school or community, but with no more than ten students with disabilities in each classroom. This includes children with speech and language IEPs in the classroom. Universal Pre-K classrooms are limited to no more than twenty students, as specified in WVBE Policy 2525.
- Both the IDEA/619 and State PreK Coordinator indicated that from a collaborative perspective: "It is our combined responsibility to ensure each child receives equitable services."

Service Models

- There is a strong partnership effort between the public schools and the respective CBOs and Head Start statewide.
- 68% of the school districts collaborate closely with the Head Start programs operating in their district boundaries.
- Each school district must establish Memorandums of Understanding (MOUs) between the district and each setting in the community funded to provide UPK. This is required by state law and regulation.
- The state structure for UPK established Core Teams in each county. The county collaborative early childhood team must also include a full county team with various representatives. Membership should include the parent/guardian of a preschool child, representative(s) from the West Virginia Birth to Three System Regional Administrative Unit, local Department of Health and Human Resources, and/or Child Care Resource and Referral agency; school health representative; classroom teachers; Family Resource Networks; Parent Education Resource Center; Starting Points; faith-based early childhood program providers; and/or other community organizations and persons interested in, knowledgeable of, or who provide support or education to young children and their families. Due to the nature of child care, every licensed child care program in the county must be extended an invitation to participate on the full collaborative team.
- Each core team functions as the UPK placement team (not IDEA placement). Core Team reviews children/family's eligibility for UPK services. After eligibility determination, the Team works collaboratively to identify a space/site for the child.
- There is a universal (statewide) application for UPK. Every child entering the program no matter where in the state uses this universal application process.

- A child needing special education and related services accesses those services in the
 site they are attending. A child that attends a CBO outside of their district of residence
 can receive special education and related services by the district in which the CBO is
 located with agreement between the sending and receiving districts. Services can
 cross district boundaries with each district's agreement. The funding amount is based
 on what is included in the IEP. Each school district has their own salary scale so the cost
 will vary by IEP designated services and district costs.
- UPK classrooms have a limit of 20 children per classroom. Some programs may have more restrictive staff-child ratios.
- In UPK classrooms with students with disabilities, no more than 10 students with an IEP can be supported. Guidance suggests that some students with more significant disabilities may warrant lower class sizes or lower ratios of children with and without disabilities.
- For UPK classrooms with children with IEPs, there are to be either: 2 staff persons per classroom (1 teacher and 1 additional staff person) with no more than 9 students with IEPs or 3 staff persons per classroom (1 teacher and 2 additional staff persons) required for 10 students with IEPs.
- Itinerant ECSE teachers must meet state certification requirements for a teacher of ECSE students.
- The UPK funding follows the child and is not school of residence specific.
- Each CBO site has agreements with the district for: Collaboration Contracts; MOUs between sites and district; and annual budget - how the funds will be spent within the site.
- The UPK is funded to provide services to children four years of age with and without IEPs. The UPK is also available to all three-year-old's with IEPs.
- The rural nature of the state has led to capacity challenges in the state. There are some "deserts" of availability of services.
- It is important to note that the current LRE Indicator 6a rate is 49%. This lower rate is
 due to related services pulling-out children for therapy and not providing services within
 the classroom environment. The state noted children pulled out for therapy cannot be
 identified as receiving all services in the LRE.

Funding

- County school systems generate school aid funding based on second month enrollment information, which is currently determined annually on October 1st. School aid funding is the primary source of revenue for school systems to cover all costs of operations.
- As outlined in the UPK Guidebook, the County Collaborative Teams determine funding needs for the UPK program. Costs for special education services are determined by what is identified in the IEPs and the contractual agreements established between the districts where necessary. All states are required to support children with IEPs and appropriate state and federal dollars are allocated and included in funding determinations.

Funding generated through community classrooms should be invested into those
programs providing quality early education services and local infrastructure to support
WV Pre-K classrooms. In pre-k collaborative child care programs, WV Pre-K is an
enhancement to the regular program during the designated WV Pre-K hours. Since WV
Pre-K is part of a free public education, parents/guardians shall only be charged for
those hours outside the WV Pre-K designated time.

State Support and Guidance

- The state has made a commitment to collaboration at the state level.
- There is a State Core Team that consists of the following individual representatives: IDEA 619 Coordinator, UPK Coordinator, HS Collaboration Director, and WV Child Care Director. The Team works jointly. The Core Team emphasized they see themselves as a collaborative team and setting their effort as an example for local community Core Teams.
- The state Core Team holds weekly meetings online.
- The state UPK program has regulated policies and procedures. There is a guidance toolkit/book available online.
- The state completes onsite monitoring of each county program every 3 years, on a rotating basis.

Workforce & Professional Development

- The state has established required onboarding for all new county Community Core Team members. The training is available online using a series of recorded webinars.
- The state team does in-service training for sites.
- All educators have access to online professional development opportunities.
- The state has established itinerant/push-in related services ambassadors connecting with district staff that are still doing pull-out for training.

Workforce & Professional Development

• All collaboration classrooms must have a teacher with a minimum of a BA in early childhood with a 2.5 GPA or greater; or be certified in EC with WV license.

Curriculum / Assessment / Referral

- For assessment of children's development and for instructional planning, all classrooms use Early Learning Scale developed by NIEER.
- Assessment is completed 3 times a year.
- All practitioners have access to online training for the Early Learning Scale.
- Educators enter assessment data into the state's data system at their classroom/site level.
- The state's data system automatically translates the assessment data into the IDEA Indicator Outcomes ratings.

Relevant State Resources

- The WV Pre-K code can be accessed at <u>§18-5-44</u>. Early childhood education programs. https://wvde.us/wp-content/uploads/2019/09/Pre-K-Guidebook-September-2019.pdf
- WV Universal Pre-K Guidebook. https://wvde.us/wp-content/uploads/2019/09/Pre-K-Guidebook-September-2019.pdf
- West Virginia Board of Education Policy 2525- West Virginia's Universal Access to a
 Quality Early Education System
 http://wvde.state.wv.us/policies/policy.php?p=2525&alt=1.

Vermont

The Vermont Act 166 of 2014, Vermont's Universal Prekindergarten Education law, ensures that each and every child who is 3, 4 or 5 years of age and not enrolled in kindergarten has the opportunity to attend a prequalified prekindergarten education program at public expense. Each child is entitled to participate in no fewer than 10 hours a week for 35 weeks per school district academic year operated in a prequalified public school or private program at no cost to the family. Act 166 requires school districts to establish contracts with community-based private child care programs that have been approved by the state as prequalified prekindergarten education (PreK) programs. For each child that is enrolled in a prequalified PreK program, the school district of residence is obligated to pay tuition at the annually approved rate per academic year per child. All tuition received by the private prequalified PreK program is to fully cover the cost of the 10 hours a week for 35 weeks per school district academic year. Tuition for UPK follows the child. Children with IEPs receive services in the district in which they are attending the UPK program. Individual contracts are developed between districts and the costs are guided by the services contained within the IEPs and the local school costs.

Data and Accountability

- Indicator 6a percent of children in regular early childhood programs (< 50% children with disabilities) = 69%
- Each program participating in the state's UPK program must be licensed by the state office of child care.
- Each program participating in the state's UPK program must participate in the state's quality rating and improvement system. All programs participating in the program must be approved by the state as a prequalified prekindergarten education program.
 - These include all programs Head Start, Child Care, Private Preschool as long as they agree to meet the state's guidelines to be an approved and prequalified prekindergarten education program.
 - The checklist for programs that includes the qualifications for approval can be found here: <u>Universal PreK Prequalified Education Program Application Checklist</u> | <u>Agency of Education (vermont.gov)</u>
 - The qualifications include such items as: personnel qualifications, health and safety standards, no religious education during the 10 hours of prekindergarten instruction, agree to use the VT Early Learning Standards for curriculum planning, and meet state assurances.

- When a child is receiving services in a district that is not their district of residence, the
 responsibility for providing special education and related services resides with the
 district of residence. The district may cross district lines or contract with the other local
 district to provide services.
- The State has adopted the perspective that the federal law is silent on whether LEAs
 need to provide services within/outside of the district boundary so the state has left that
 open. In some cases where the UPK site chosen by the parent is fairly close in
 distance, the district of residence may choose to send staff across district lines to
 provide services.
- All publicly-funded UPK programs must use the online Teaching Strategies GOLD child assessment to report progress of children on an annual basis. Private CBOs must pay for TS portfolios.
- The state uses the Inclusive Classroom Profile as a part of the quality rating process.

Service Models

- UPK early education services open to all three, four and five four-year-olds in VT.
- The state system uses a mixture of public and private programs to make services available.
- The state began to implement the UPK program in 2014 and it took three years for implementation to full enrollment (2016).
- The UPK program model requires districts to have Memorandums of Understanding with each private program receiving UPK funding.
- The state's UPK program is fully state funded. Funds go from the state to the local district and then to Community Based Organizations where applicable. No local funds are used to support the UPK. Local funds may be used for special education instructional support.
- All programs participating in the UPK must participate in the state quality rating system and be at a level of 4 or 5 in quality rating.
- The UPK program supports 10 hours of education per week for each child.
- Some districts have expanded their UPK to a full school day using local funds.
- The UPK funding is portable and follows the child.
- For a CBO to become vendor/participant in the UPK program, there are several requirements: 1) there in an application process; 2) the CBO must agree to a set of assurances; 3) no religious education can occur during time in program; 4) program must agree to accept all students including children with disabilities; 5) UPK programs must follow all federal laws and regulations protecting children with disabilities.
- The local districts include private/CBOs personnel in local district professional development activities. There has been a long history of this integrated PD practice in the state.
- The state has adopted the use of the Inclusive Classroom Profile for accountability purposes.

- The state has created template MOUs for the UPK programs between district and CBOs. The state has created an IEP template for children with IEPs.
- All Head Start programs in the state participate in the state UPK program.
- There is no state PreK curriculum programs must agree to use VT Early Learning Standards for curriculum planning one of the assurances they agree to in the MOU.
- The state contracts with the Pyramid Model Center for coaching UPK personnel in use of the Pyramid model in classrooms. The state uses Title I funds for Pyramid training.
- There has been conflict between LEAs and child care which have centered mostly around quality and teacher qualifications.

Funding

- State funds preschool at approximately \$4,000 per child and varies. The statewide 2022/2023 school year Prekindergarten Tuition Rate is \$3,656.00.
- District keeps 619 federal funding to assist with paying for services and may also use 611 funds to cover costs.
- For children attending Head Start, the tuition funding goes to the HS program which they use for program improvements.

State Support and Guidance

- The state's IEP template incorporates the OSEP descriptions of LRE placement Indicator 6 as a part of the Plan.
- The state provides training on LRE for district and CBO personnel.
- The state has assumed responsibility for PD for special education with program staff and uses Indicator data to focus targets for PD.
- There is some coordination with IHEs in the state. Governor created an independent council that brings together child care and IHEs for collaborative work.

Workforce & Professional Development

- Teachers must be licensed and certified if practicing in the public school.
- Teachers in CBO settings must be licensed by state (but may not be certified).
- Programs having children with IEPs in the classroom must collaborate with a teacher that is state-certified as an early childhood special education teacher.

Relevant State Resources

- <u>Universal PreK landing page</u> (includes links to documents and guidance)
- Application Checklist for UPK (includes assurances)
- Vermont State Board of Ed UPK Rules
- ACT 166 GUIDANCE: FEBRUARY 2019 CONTRACT ADMINSTRATION AND

<u>LICENSED EDUCATORS</u> (this is the agreement between schools and private programs)

Colorado

Data and accountability

- Indicator 6a percent of children in regular early childhood programs (< 50% children with disabilities) = 92% (highest in the nation).
- While inclusion percent is high only 5.2% of preschoolers are served in Head Start with another 4.9% in other community-based organizations (must be licensed). The remaining 86.9% of children with IEPs are served in Colorado's Preschool Program operated by school districts.
- CO collects data on where children are served. CO data system has a code for
 placement type and actual name of provider which means that they are able to access
 and analyze data on the placement of preschoolers with IEP by type of early childhood
 education setting.
- They use their data to look at low performing districts and target TA.

Service models

- Children in the CPP (Colorado Preschool program) must currently meet one of 10 risk criteria categories e.g. income: abuse or neglect, dual language learner. etc.
- Preschoolers with IEPS are included in CPP funding under one of the risk criteria.
- CPP students generate .5 of the per pupil rate under the School Finance Act which funds a ½ day slot.
- Preschoolers with IEP also generate .5 per pupil rate meaning that the child can be served for a full day.
- Two of CO's Indicators of Quality Inclusion are:
 - "Specialized instruction and related services are modeled and provided by qualified professionals within classroom routines, which most often include peers. Classroom staff members are partners in carrying out IEP goals as much as possible".
 - Instructional strategies are planned, organized, individualized, and embedded within the daily schedule. These strategies reflect recommended and evidence-based practices.
- Itinerant approach and co-teaching are an expectation and supported through professional development.

Funding

- CO published the <u>Preschool Finance Document Accessing State General Funds for Preschool</u> which details how PSPED PPR (Per pupil revenue for Preschool Special Education funded pupil count), ECEA (Exceptional Children's Educational Act), and IDEA funds (Part B and Part B-619) are used to support preschoolers with disabilities and how districts can braid funding and allowable uses of funds.
- CO published an <u>Early Childhood Education Funding table</u> with eligibility, age funding, count date, FTE, etc. It also includes 'layered funding scenarios'.

- Children in the CPP (CO Preschool program) must currently meet one of (10 categories
 income: abuse or neglect, dual language learner .5 of per pupil rate under the School
 Finance Act. Kids with IEPS are included in CPP funding.
- Preschool children with IEP also generate .5 enabling districts to fund a full-day program <u>Using CPP Funding to fund Full-day Preschool for children with IEPs.</u>
- School districts can subcontract with community-based organization to provide CPP.
- Under the newly formed Department of Early Childhood the system will transition to a mixed-delivery system.
- If a district is providing the educational services for an out-of-district student, this is paid by the district of residence.
- Districts may contract with community-based organizations (known as contractual education students) for whom a district is paying tuition to a third-party entity to educate these preschool students. Tuition here is defined as money paid to cover basic education costs. A sample contract and MOU are made available for districts to use.

State Support and Guidance

- CO has a state level 'Preschool Special Education Advisory Committee' whose aim is to improve outcomes for young children with disabilities, by bringing together a diverse range of stakeholders to collaborate, advise and make recommendations to the Colorado Department of Education on behalf of young children with disabilities and their families.
- CO has published Indicators of Quality Inclusion in Early Childhood <u>Indicators of Quality</u> Inclusion in Early Childhood (IQI-EC) (state.co.us).
 - Guidance Memo on FAPE and Inclusion Includes hours has the weight of policy.
 - Guidance doc Making Least Restrictive Environment Placement Decisions for Preschool Children https://www.cde.state.co.us/cdesped/ta_Ire the AU is responsible for making available an appropriate program in the LRE.
 - CO has Regional Preschool Specialists that support CPP and preschool special education and who provide guidance and TA.

Workforce & Professional Development

- Ongoing Professional development provided by inclusion experts Dr. Julie Causton and Kristie Pretti-Frontczak <u>Inclusivechooling.com.</u>
- Meeting held each spring 2-day focus on inclusion.
- Professional learning universal for every through LMS other training is more targeted. Inclusion is included.
- "All In! Teaching Together in Preschool" is a mini-workshop series that explores coteaching in inclusive preschool settings, defined as co-teaching in early childhood is any time more than one adult is in a classroom of preschoolers where children with disabilities are served. The audience is anyone in early childhood, serving preschool children with disabilities, who co-teaches. It is perfect for teams of general and special education teachers who want to get really clear on best practices for all aspects of co-

teaching. This series is also perfect for Itinerant teachers and related services personnel and addresses strategies for communicating, coaching, and consulting with others.

Relevant State Resources

- The CO Department of Education includes a number of state and national resources on their <u>Preschool Special Education section</u> of their Resources and Guidance page
- Preschool Finance Document Accessing State General Funds for Preschool
- Early Childhood Education Funding table
- CO Using CPP Funding to fund Full-day Preschool for children with IEPs
- Making Least Restrictive Environment Placement Decisions for Preschool Children
- Preschool Special Education Resources and Guidance
- <u>Indicators of Quality Inclusion in Early Childhood Programs</u> that include and reference research and tools

APPENDIX 5 SERVICE AND FUNDING MODELS FOR CONSIDERATION

Option	Option Elements	Cost Drivers	Pros	Cons
Option A: Itinerant Services Across District/CBOs District has made provisions to provide ECSE or related services to children in the setting in which they are receiving their regular education: • District preschool or PFA/PFAE classroom. • Head Start program. • Community-based center inside the district boundaries. • Community-based setting located outside of a district's boundaries where those programs are geographically close to the district of residence — adjoining town/county.	 The setting where IEP services will be provided is decided by the IEP team, of which the parents are equal partners. Settings may include the district's preschool program, PFA/PFAE program, a setting that was chosen by the parent [Head Start or Community Based Organization] which may reflect a setting where the child was enrolled at the time they were identified with a disability and the IEP team agreed was most appropriate Least Restrictive Environment to provide ECSE services. The *Placement may include a site outside of the district boundary though close in distance. The district has made provisions to provide ECSE or related services outside of a district public school building at the site identified by the IEP team through reallocating and revising the district ECSE staffing pattern(s). Two examples: A district that has two ECSE teachers, each with their own district ECSE classroom, the district may consider revising the staffing pattern to provide one classroom ECSE teacher working in a district inclusive preschool 	 Staff – may require additional staff to handle caseload levels due to travel and collaborative planning for staff that are providing services in community sites. Staff mileage to provide ECSE services at community sites. Collaborative planning time for district ECSE staff to collaborate with general education teaching staff. Collaborative planning time for community site staff to collaborate with district ECSE staff. A district may be required to pay an equitable portion of instructional time for a child attending a placement in a CBO recommended by the IEP team because it is the most appropriate place for the children to receive ECSE services. State and/or LEA Cost Drivers: Professional training for ECSE staff – some of the training may be provided by the state 	 Children with IEPs in community sites receive ESCE services identified in their IEPs. District is in compliance with federal IDEA and state special education regulations. Children likely to enter kindergarten developmentally stronger to meet state standards. Savings on transportation. Parent Satisfaction with services. 	 Potential travel/mileage costs for staff. Potential for increased caseload for district ECSE providing itinerant services – unless the district allocates sufficient dollars to allow for additional staff to match the demands of the inclusive model. Need to decrease ECSE staff caseload to account for long distances for travel between sites to provide services. Union contracts allowing for travel outside of district boundaries.

	classroom and a second ECSE teacher designated to provide itinerant ECSE services to children in community settings. -A district could decide to have two ECSE teachers, both providing ECSE services itinerantly to all children with IEPs.	 Professional training for community-site staff 		
Option B: Itinerant Services Across District with MOUs for Out-of-District Children in CBOs District has made provisions to provide ECSE or related services to children in the setting in which they are receiving their regular education: District preschool or PFA/PFAE classroom. Head Start program. Community-based center inside the district boundaries. Children enrolled in out-of- district child care or other early learning program. In this model, districts make provisions, through one or more Memorandums of Understanding with other school districts, in which the non-resident district provides ECSE or related services to children in their placement including those attending a Head Start program or a center outside of a district public school building and to also	1 and 2 are similar to Option A. 3. Placement may include a setting that was chosen by the parent [Head Start or Community-Based Organization] – and/or where the child was enrolled at the time they were identified with a disability and the IEP team agreed was most appropriate Least Restrict Environment. However. the nonresidence district has agreed, through an agreement with the district of residence, to provide ECSE services to the children with an IEP enrolled in an early learning setting in the non-resident district. 4. Through an MOU, the district of residence pays for the nonresidence district to provide ECSE services. • *The non-residence district may decide to this agreement because they are already sending ECSE staff to the center. • *The non-residence district has a low level of children with disabilities enrolled in the district and can afford to send staff to provide ECSE services though may be unlikely.	Drivers similar as for Option A.	Pros similar as for Option A.	Cons similar as for Option A.

provide services to children enrolled in out-of-district child care or other early learning program.

Option C: Itinerant Services Provided within a Regional COOP Arrangement

Several local districts decide to establish a cooperative agreement among/across several bordering school districts to pool resources. This may be a new Coop for preschool ECSE or as part of an existing special education Cooperative.

The Cooperative agreement would allow for districts to provide itinerant ECSE and related services to children enrolled in community-based early childhood education settings in any of the districts within the Cooperative's boundary.

This option may include a menu of options to include:

- One or more district(s) offering an inclusive, preschool settings that students may attend.
- One or more school district(s) that have been funded to provide itinerant-based services to children within the cooperative regional boundaries.
- State and Federal funds are pooled within the cooperative to support cost of services.
- Local tax funds are combined with state and federal funds to support cost of services.
- Additional local school district funding may be infused to cover the cost of placement in local community-based settings as identified children's IEPs.

 Cost Drivers similar to elements in Options A and B Pros similar to elements in Options A and B. Cons similar to elements in Options A and B.

Addition

 Potential economic benefit to district by sharing resources.

Except:

- Potential for increase in segregated services due to Coop model grouping students into one or more settings unless all entities agree to make available ECSE services using an inclusion approach.
- This may require a state funding policy and regulation change.

Option D: Alternate Funding - Itinerant Service System

State establishes a systemwide comprehensive inclusion initiative that promotes children ages three to five with IEPs to receive their special education and related services in the least restrictive environment and;

*State has established a policy to allow both EBF and IDEA funds to be counted by the district providing services, potentially circumventing need for MOU between districts for services

*District has made provisions to provide ECSE or related services to children in their placement, including a district preschool or PFA/PFAE classroom, and those attending a Head Start program or a community-based center outside of a district public school building and to also provide services to children enrolled in out-of-district child care or other early learning program [likely in situations where those programs are geographically close to the district of residence - adjoining town/ county.

Placement decided by the IEP team, of which the parents are equal partners.

Placement may include their district's preschool program, district's PFA/PFAE program, a setting that was chosen by the parent [Head Start or Community Based Organization] – and where the child was enrolled at the time they were identified with a disability and the IEP team agreed was most appropriate Least Restrict Environment.

- *Placement may include a site outside of the district boundary.
- *A previous agreement has been established across the state or on a regional basis, in which the non-residence district assumes responsibility for the entire process from evaluation to eligibility, and to potential IEP if eligible.
- *Non-residence districts assume responsibility to provide ECSE services to eligible children regardless of residence or where the children are placed.
- *Non-residence district provided ECSE services where children are enrolled.

State policy that would require the district of residence to be notified of the existence of the child that is eligible for ECSE services, is attending an early education site outside of the district.

- Cost drivers similar to Options A, B, C.
- Pros similar to elements in Options 1, B, C.
- Initially there will be a readjustment of state funds to districts until each district adjusts to different funding levels.
- Substantial change in state funding policy.
- Substantial systemschange in state policy.

Report: Advancing Preschool Inclusion in Community-Based Early Childhood Education Settings (Dec. 2022)