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ABSTRACT

The final report describes major activities accomplished during the 1981-82 project year to develop a comprehensive plan in New York State for handicapped children, aged 3-5, and to accelerate services to handicapped infants through Regional Early Childhood Direction Centers (RECDC). Briefly discussed are the processes for the following outcomes: (1) Efforts toward passage of legislation and development of initial draft of regulations; (2) Assisting parents and local education agencies in meeting needs of young handicapped children under the current system; (3) Developing a written plan as part of the State Plan; (4) Establishing three Regional Early Childhood Direction Center Sites at the local level; (5) Developing state level agreements for the regional centers; and (6) Assisting the regional centers in linking handicapped infants to services. (MC)

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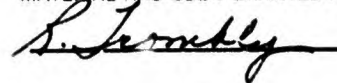
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NEW YORK STATE IMPLEMENTATION GRANT
September 1, 1981 to August 31, 1982
Grant # G008002824
Project # 024 CH 10013
CFDA # 84.024C
Final Report

Submitted by:
New York State Education Department
Office for Education of Children with
Handicapping Conditions
Division of Program Development
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INTRODUCTION

During the 1981-82 project year, the second year of the State Implementation Grant, the overall goal of the New York State Implementation Grant was to improve the delivery of services to handicapped children ages birth to five. This goal would be accomplished by SIG staff assisting in the development of a comprehensive state plan for handicapped children ages 3-5 and by developing Regional Early Childhood Direction Centers through interagency agreements which link handicapped infants to educational, medical and social services. This final report for the period September 1, 1981 to August 31, 1982 includes a fiscal report and describes major activities conducted by State Implementation Grant (SIG) staff to meet the following principal and subordinate objectives:

Principal Objectives

- 1.0 To develop a comprehensive state plan for handicapped children ages 3-5
and
- 2.0 To accelerate services to handicapped infants through Regional Early Childhood Direction Centers

Subordinate Objectives

- 1.1 To develop regulations for the provision of special education services for three and four year old handicapped children in New York State
- 1.2 To develop strategies for assisting local education agencies in implementing new regulations
- 1.3 To develop a written plan for early childhood education as part of the Annual State Plan
- 2.1 To develop two state level agreements to fund two Regional Early Childhood Direction Centers
- 2.2 To establish two Regional Early Childhood Direction Centers at the local level through cooperative agreements between Perinatal Clinics and Early Childhood Direction Centers
- 2.3 To assist Regional Early Childhood Direction Centers in linking handicapped infants and preschoolers to services.

SUMMARY OF ACCOMPLISHMENTS
1981-82

Staff members who had been actively involved in previous year SIG project activities were assigned to continue on the project for the 1981-82 year. The only exception was a change in secretarial staff which occurred early in the project year. Persons involved in the project included the project associate (in kind, having overall supervisory responsibilities for the SIG), the project assistant and secretary. Administrative activities were conducted by the principal investigator and project director (in kind) throughout the project year.

HIRE
STAFF

Efforts Toward Passage of Legislation and Development
of Initial Draft of Regulations

SIG staff, in conjunction with other department staff, discussed and analyzed reasons legislation did not pass during the previous year. The major reasons for lack of passage included:

ANALYSIS
OF
FACTORS

- . financial concerns about the cost of new legislation
- . competitive pieces of legislation
- . lobbying efforts of special interest groups
- . increased state funding for existing programs for school-aged handicapped children impacting on funds available for new handicapped legislation
- . philosophical differences concerning responsibilities of handicapped children birth to two

Future efforts and recommendations were discussed by the Assistant Commissioner for Education of Children with Handicapping Conditions, assisted by SIG staff, with the Preschool Committee of the Governor's Conference for the Prevention of Developmental Disabilities and Infant Mortality. This Committee's recommendations, incorporated as part of the Conference's Prevention Action Plan, (See Appendix A) were consistent with the concepts in the legislation supported by the State Education Department through the Board of Regents. SIG efforts contributed to the Board of Regents' decision to have the Regents Bill reintroduced during the 1982 session. This legislation (Assembly Bill 3370, Senate Bill 4982) was in the Education Committees of both the Assembly and Senate at the close of the project year. (See Appendix B). SIG staff assisted in drafting a memorandum in support of the legislation. (See Appendix C). This compared the current costs under the current Family Court system with estimated costs of the new legislation. This bill proposed that school districts would be responsible for providing services to handicapped children beginning at age three and would provide for similar procedural safeguards now in place for handicapped children beginning at five years of age. It would eliminate the current cumbersome and time consuming Family Court procedures for securing funds for

REINTRO-
DUCTION
OF REGENTS
BILL

these young handicapped children and would enable the State Education Department to establish standards, set tuition and transportation rates and monitor programs. Full state funding would be provided, thereby relieving the current burden to local counties under the Family Court process.

In addition, an amendment to the Regents Bill was discussed as possibly being introduced to the legislature. SIG staff drafted wording which would further clarify that selection of an appropriate program for a preschool handicapped child could take place in either the public or private sector, without a preference for the public sector, as the first alternative. Although this was not a new concept under the Regents Bill, it was anticipated that this written clarification as part of the bill would further elicit the support of the private sector agencies. Due to the rush in legislative activities prior to the summer recess, an amended version of the bill was not completed. It is anticipated that this will occur in the future and is partially as a result of SIG efforts.

At the same time, SIG staff was involved in discussions with other department staff and members of the New York State Council on Children and Families (another state agency) who planned on introducing legislation pertaining to this population. Members of the Governor's Office were also included in these discussions in addition to staff members of key Senators and Assemblymen.

This legislation, commonly referred to as the Leadership Bill was developed. This bill would not mandate services for three and four year old handicapped children. It would maintain the current system of having parents petition for the costs of special education services through the Family Court in their county of residence. However, it would allow the State Education Department to set rates and program standards and to approve facilities. These provisions, which are consistent with, but not as extensive as, the Regents proposal, are a direct result of efforts of SIG staff in conjunction with other department staff and is a step in the direction of the Regents Bill. The Leadership Bill was introduced and subsequently amended (Senate Bill 7195-A, Assembly Bill 9227-A See Appendix D). SIG staff analyzed the amended version and prepared a white paper comparing this legislation with the current Family Court process. (See Appendix E). In addition, SIG staff prepared an indepth analysis of costs under the current system, the Regents Bill and the Leadership Bill (See Appendix F) which indicates significant cost savings as a result of legislation. The Leadership Bill was in the Assembly Mental Health Committee and the Senate Mental Hygiene Committee at the close of the project year.

For political reasons, Assembly Bill 3289-A (See Appendix G) which is identical to the Regents Bill, except for two minor differences, was introduced into the Assembly. This bill was reported out of the Assembly Education Committee and into the Assembly Ways and Means Committee at the close of the project year. This is a crucial step toward passage of legislation. The State Education Department is pleased and encouraged by this development. At the time of writing this final report, it is anticipated that the legislature may convene for a special

LEADERSHIP
BILL

ASSEMBLY
BILL
3289-A

session. It is hoped that early childhood legislation will be addressed. Delays in passage have necessitated that implementation of legislation will occur later than originally expected.

SIG staff continued to provide information throughout the project year on the various pieces of legislation to individuals and groups throughout the state to help them understand the specifics and implications of these bills. In addition, SIG staff assisted in providing information to members of the Preschool Committee of the Governor's Conference about the current status of legislation. (See Appendix H for examples of correspondence related to legislation.)

DEVELOPING
INITIAL
DRAFT OF
REGULATIONS

SIG staff began the process of developing regulations in anticipation of legislation. An initial draft was developed. With assistance from the Technical Assistance Development System (TADS), SIG staff conducted a search of other states laws and regulations and contacted by telephone and mail other states' representatives. SIG staff reviewed and analyzed this information and submitted this to supervisory staff (See Appendix I). In addition, current practices within state preschool programs were analyzed (See Appendix J). An outline of regulations that would need to be developed was completed and discussed with the Assistant Commissioner. Regulations include policies and procedures relating to:

- . definitions of handicapping conditions
- . eligibility requirements of three and four year old handicapped children
- . Board of Education and COH responsibilities
- . procedures for referral, evaluation and IEP development
- . minimum length of day and frequency of programming
- . continuum of services
- . description of homebased, schoolbased and home/school based programs
- . class size limits
- . staffing patterns
- . procedural safeguards

Following recommendations, an initial draft of regulations was prepared in anticipation of passage of the Leadership Bill. (See Appendix K). Modifications and further revisions will need to occur to reflect elements of the legislation that is finally passed.

SIG staff continued to track the status of these legislative proposals through the committees in both houses and was updated on bill status on a daily basis to be apprised of any amended versions. Staff was also available to prepare analysis as required.

Assisting Parents and Local Education Agencies in
Meeting Needs of Young Handicapped Children Under
the Current System

SETRC

Professionals and parents have continued to need training under the current system of provision of services to young

handicapped children. SIG staff assisted other department staff in determining training objectives and target numbers for each Special Education Training and Resource Center (SETRC) for the 1981-82 project year. SIG staff assisted in providing information, technical assistance and training on a limited basis to training specialists. SIG staff worked with other department staff in the first attempt to develop cooperative agreements between Regional Early Childhood Direction Centers and Special Education Training and Resource Centers. SIG staff developed a department memorandum (See Appendix L) and reviewed initial agreements. SIG staff provided technical assistance to projects during implementation and shared with other department staff information on coordinated efforts. The Regional Early Childhood Direction Centers referred 216 parents of preschool handicapped children to SETRC in accordance with the three levels of referral specified in the departmental memorandum. During August SIG staff met with other department staff to discuss the agreements developed during 1981-82 and developed suggestions for 1982-83 agreements, and reporting of future coordinated efforts and mutual training needs to effect better coordination. As a result, new strategies for reporting coordinated efforts were finalized for use during 1982-83 and an outline of training activities was prepared in preparation for a fall meeting of SETRC and the Regional Early Childhood Direction Centers. It was decided that the group should receive some joint training, involving a simulation which would allow each of the projects to experience some of the others' responsibilities and constraints.

ASSISTING
COUNTY
OFFICIALS

SIG staff also realized that in order to assist parents and local agencies in meeting the needs of young handicapped children, it would be worthwhile to work with county officials in helping them understand decision making responsibilities and administration of the Family Court petitioning process at the local level. SIG staff proposed this to other department staff and were given the opportunity to prepare suggested activities and strategies. SIG staff developed a tentative agenda, a letter of invitation, materials and facilitated conference room arrangements for the session scheduled to be conducted during September 1982. See Appendix M for copies of initial information and materials related to this meeting.

SPECIAL
EDUCATION
FOR
HANDICAPPED
CHILDREN
BIRTH TO
FIVE

SIG staff had prepared information on an as needed basis to assist local education agencies in understanding current services available for young handicapped children in the state. SIG staff was requested to work in conjunction with staff supported by the Preschool Incentive Grant to compile this information in a guidebook which could be made available to public and private agency personnel throughout the state. As a result of a coordinated effort using the expertise of the SIG staff and Incentive Grant staff, a guidebook "Special Education for Handicapped Children Birth to Five" is now available and describes current programs and services available in the state. It also is a clear example of coordination between the SIG and Incentive grants, without duplication of activities.

Developing a Written Plan As Part of the State Plan

WORKING WITH STATE PLAN OFFICER

SIG staff has continued its close working relationship with the State Plan Officer insuring a comprehensive update of the early childhood sections of the State Plan. The three year State Plan submitted by the New York State Education Department includes an extensive early childhood section. (See Appendix N) SIG staff worked closely with the State Plan Officer who is responsible for compiling the annual report updating State Plan activities. SIG staff provided the State Plan Officer with the necessary information on progress in the area of early childhood special education. Meetings, discussions and revisions were conducted. As a result, the annual report on the State Plan included updated information in the area of early childhood including the number of preschool handicapped children served in districts, facilities having children whose parents have petitioned Family Court and the number of children served through Family Court.

Establishing Regional Early Childhood Direction Center Sites at the Local Level

SIG staff was successful in establishing three additional Regional Early Childhood Direction Centers at the local level exceeding activities proposed during the grant year. This occurred as a result of agreements between Perinatal Clinics and Early Childhood Direction Centers in three regions of the state.

SIG staff arranged and conducted meetings with the Directors of the Perinatal Clinics and Chairmen of the Department of Pediatrics to share information and discuss the feasibility of a joint effort between the Early Childhood Direction Center and the Perinatal Clinic. These medical professionals provided information about the Perinatal Clinic which included:

MEETING WITH PERINATAL CLINICS

- . Current services provided
- . Organization and structure
- . Staffing patterns
- . Region served
- . Types of populations to whom perinatal services are provided
- . Existing follow up activities
- . Linkages to area agencies serving young handicapped children

SIG staff shared with the Chairman of Pediatrics and Director of the Perinatal Clinic, information and data regarding the Early Childhood Direction Center in their region and other Regional Early Childhood Direction Centers. This included:

- . Goals and objectives
- . Populations and regions served
- . Rationale for linking Direction Centers and Perinatal Clinics
- . Description of current Regional Early Childhood Direction Centers
- . Data from past project years

Based upon these discussions and an indication of willingness to coordinate activities, SIG staff requested and received a letter of interest from the Director of the Perinatal Clinic. Letters of interest were received from Perinatal Clinics in the following regions: Queens, Nassau and Staten Island (New York City) (See Appendix O).

MEETING WITH
DIRECTION
CENTERS

At the same time meetings were being held with Perinatal Clinics, SIG staff met with the Directors of the Direction Center projects at the local education agency which would coordinate with the Perinatal Clinics.

Together SIG staff and Early Childhood Direction Center staff discussed the organizational structure and activities of the Perinatal Clinic, and anticipated possible areas of coordination and strategies for working with Perinatal Clinics.

DEVELOPING
INTERAGENCY
AGREEMENTS

Upon receipt of letters of interest, SIG staff met jointly on numerous occasions, with appropriate personnel from the Perinatal Clinic and the Early Childhood Direction Center of each region. These meetings were designed to assist both agencies in initial planning efforts. Items such as project objectives, location, proposal content and philosophical orientation were discussed. SIG staff requested that a draft detailing specifics of a joint service plan be submitted for approval. During the development of the plan, SIG staff was available as needed, to provide technical assistance. Both parties also met without SIG staff and were encouraged to create an agreement that would meet the needs of their particular situation. Issues which were discussed included staffing patterns and responsibilities, organizational structure, agency boundaries, supervision, formal and informal channels of communication, medical, educational and social service components of direction services, territorial issues, staff location, time commitments, fiscal concerns, neutrality and definitions of handicapped infants and at risk populations.

As a result of SIG activities, Regional Early Childhood Direction Centers in Queens (New York City), Nassau (Long Island) and Staten Island have been established. In these projects, it was agreed that the project coordinator from the local education agency (Early Childhood Direction Center) be responsible for the over-all coordination of each Regional Early Childhood Direction Center model. It was agreed that a part-time Direction Center staff person would provide direction services directly at each Perinatal setting. Activities were to be carried out at the Perinatal Center in accordance with the Direction Center objectives in conjunction with the specifics delineated in written agreements. (See Appendix P). While at the Perinatal Clinic, the staff is supervised by the Director of the Perinatal Center.

In all three sites, Direction Center staff is considered to be an integral part of the team and participates in discharge planning conferences and weekly social service rounds to receive referrals, discuss service options for children and provide feedback on children assisted by the Direction Center. As a result of these agreements, young handicapped children in Queens, Nassau and Staten Island are being matched to services as soon as their problems are identified. Descriptions of these models follow.

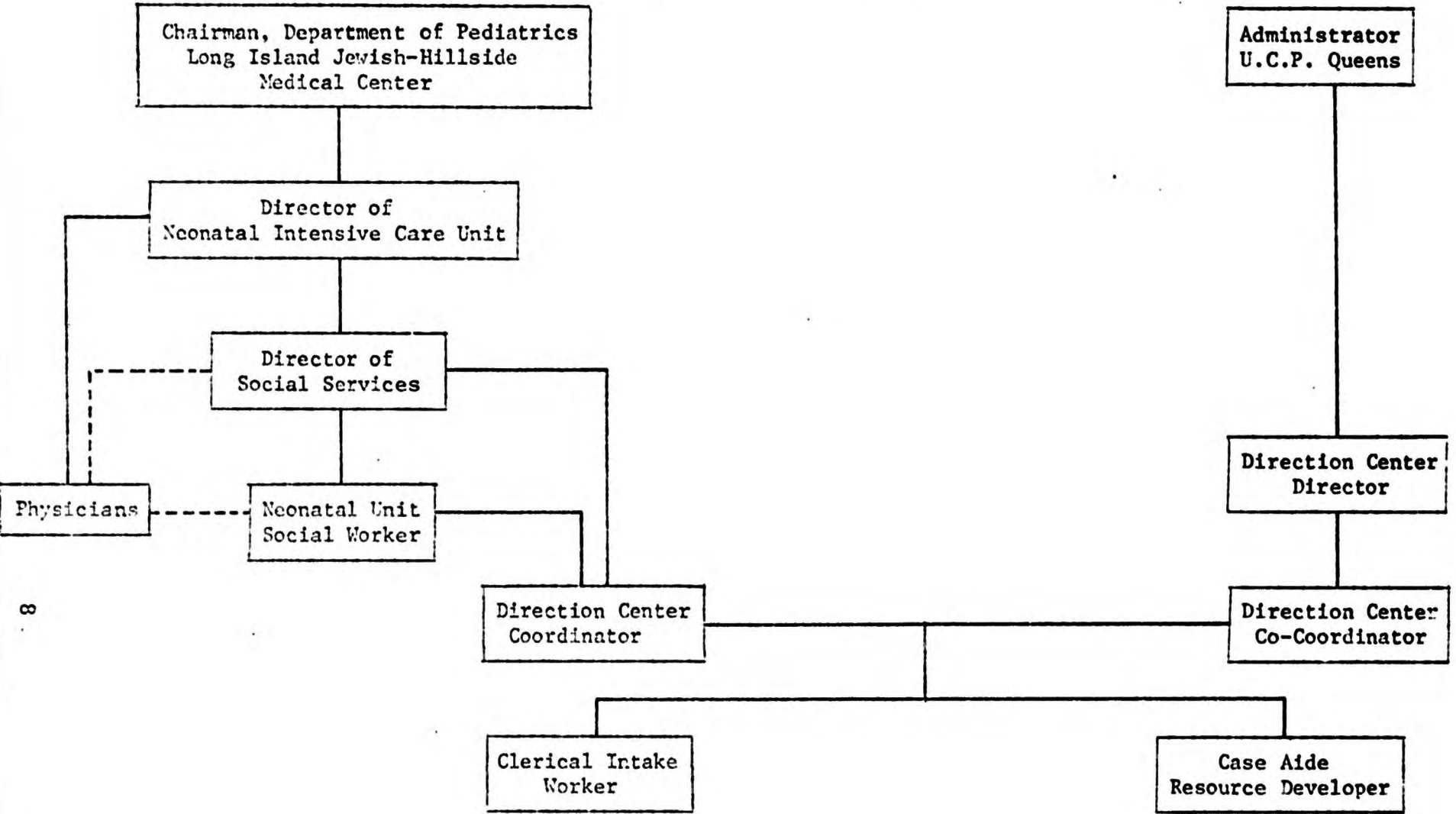
Descriptions of Regional Early Childhood
Direction Center Models

QUEENS
MALL

In the Queens region, which serves the New York City borough of Queens and the western portion of Long Island, a part time Direction Center staff person (social worker) is on site at the Perinatal Center location, (15 hours per week) to provide direction services to handicapped infants and their families. This person is supervised by the Director of Social Services at the Perinatal Center. The Direction Center staff person receives referrals of babies who, upon discharge are scheduled to attend the follow up clinic and are eligible for medicaid. In addition, private patients seen by the Director of Neonatology who have identifiable handicapping conditions and all babies under 1500 grams are referred to the Direction Center. Direction Center staff is involved in planning conferences and, at the time of discharge, facilitates linkages to services. The Direction Center provides systematic follow up in conjunction with the hospital follow-up schedule to assure continued help and assistance until the child reaches school age.

Funding for the Direction Center staff at the Perinatal Center is from the Early Childhood Direction Center grant (funded through Preschool Incentive monies) and additional contributions by the local education agency. Space and telephone costs are provided by the hospital. As a result, young handicapped children in the Queens region are beginning to be matched to services as soon as a problem is identified.

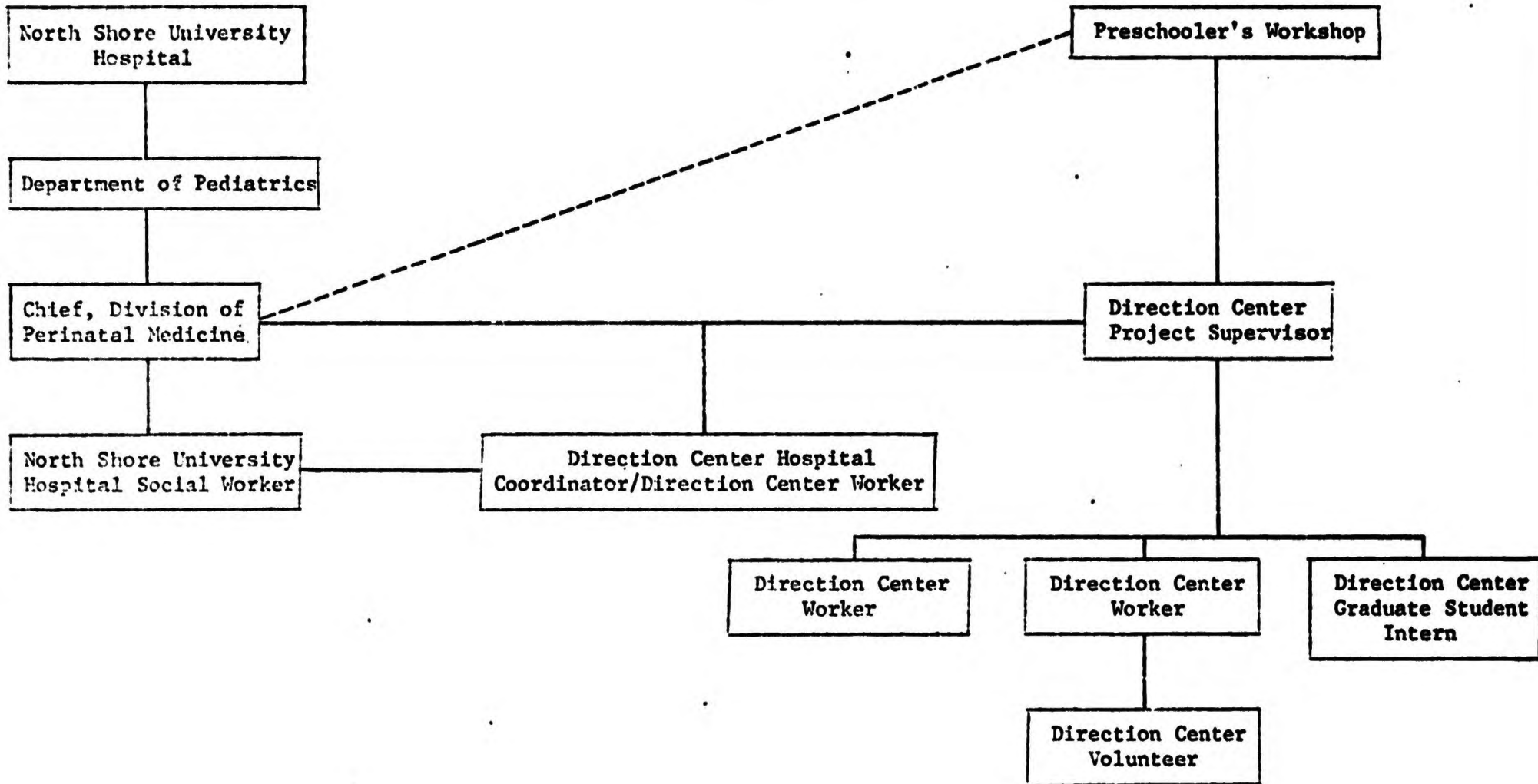
QUEENS REGIONAL EARLY CHILDHOOD DIRECTION CENTER
ORGANIZATIONAL MODEL



8

The agreement for the Regional Early Childhood Direction Center Model in the Nassau region also involves a part time staff person located at the Perinatal Center. (See Appendix P). This part time staff person, selected jointly by the Director of the Early Childhood Direction Center and the Director of Neonatology provides direction services 20 hours per week at the Perinatal Clinic. The person is supervised jointly by the Coordinator of the Early Childhood Direction Center and the Director of the Perinatal Center and while on site, is directly responsible to the Director of the Perinatal Center. This person works as part of the perinatal team and participates in activities such as weekly social service rounds. The coordinator provides hospital personnel with information and assistance to help parents and babies to obtain services they need. Each child referred to the Direction Center is followed up by the Direction Center staff itself or the Direction Center staff in cooperation with the hospital follow-up clinic. The organizational model is as follows:

NASSAU EARLY CHILDHOOD DIRECTION CENTER
ORGANIZATIONAL MODEL



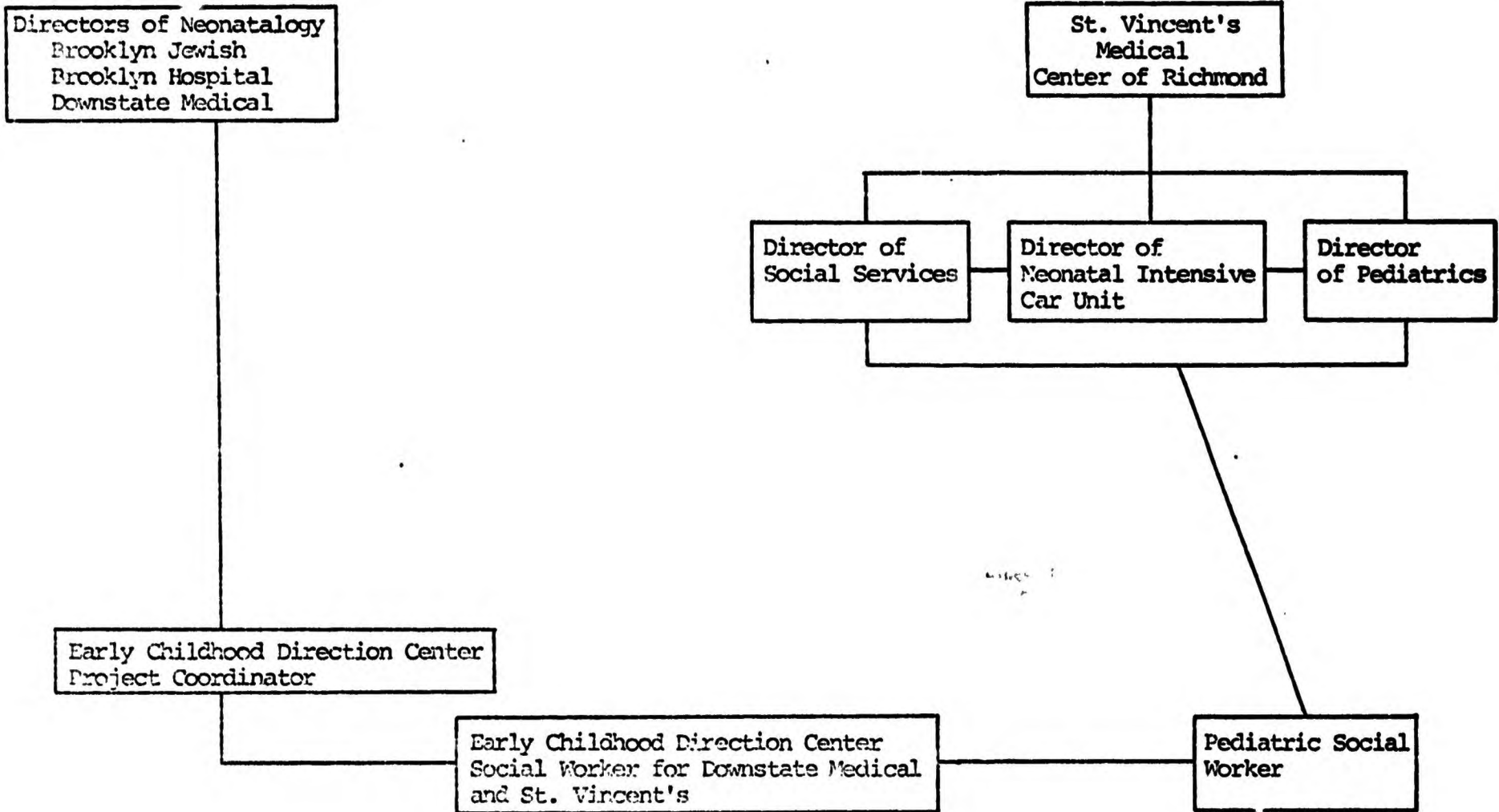
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STATEN ISLAND
MODEL

In Staten Island, two Direction Center staff persons (the social worker and project coordinator) are involved in the provision of direction services at the Perinatal Center location. They receive referrals from the Center's social work component, other health care facilities on the island, private physicians and other agencies providing services to Staten Island residents. An average of 12 hours of staff time per week is spent on site at the Perinatal Center location. Follow up is provided for all handicapped children including those who have been directly referred to services by the Perinatal staff. The organizational model is as follows:

MODEL OF REGIONAL EARLY CHILDHOOD DIRECTION CENTER

BROOKLYN AND STATEN ISLAND



12

Developing State Level Agreements for Regional
Early Childhood Direction Centers

While actions, decisions and policy statements at the federal level created an uncertain fiscal climate for state agencies during the 1981-82 grant year, and agencies were hesitant to commit their limited resources for new projects, progress was made by SIG staff toward arriving at agreements with other state agencies around Regional Early Childhood Direction Centers.

NEW YORK STATE
DEPARTMENT OF
HEALTH

A letter developed by SIG staff was sent by the Assistant Commissioner for the Office for Education of Children with Handicapping Conditions to representatives of the New York State Department of Health to reintroduce SIG staff, provide basic information about the Regional Early Childhood Direction Center concept and emphasize the benefits of coordinating efforts and resources. (See Appendix Q) SIG staff members followed up these letters to introduce themselves and determine interest on the part of these other agencies. The New York State Department of Health expressed a desire to discuss further, the coordination with Regional Early Childhood Direction Centers. SIG staff met with the Director of the Bureau of Maternal and Child Health and the Director of the Special Children's Services Unit in that Bureau and described the concepts in the provision of direction services, focusing in on the linkages with Regional Perinatal Centers. The Health Department representatives shared information about a proposal that was being prepared within their agency which would develop a system for a high risk infant registry on a statewide basis. The proposal was anticipated to be prepared and submitted for approximately \$200,000. SIG staff discussed the possibility of coordinating these funds with some of the Regional Early Childhood Direction Centers across the state. Health Department representatives felt that since the proposal preparation was at the time, only in the preliminary stages, and was an internal document, it was too early to make that type of commitment. However the Director of the Special Children's Unit who was given the responsibility to work with SIG staff, requested that a joint meeting and visit be conducted to one of the Regional Early Childhood Direction Centers to assist the Health Department in more fully understanding their operation.

In July, SIG staff and Health Department staff visited the Regional Early Childhood Direction Center in Syracuse and met with the project director and Director of the Perinatal Clinic. This provided the Health Department with the opportunity to discuss specifics of the project and ask questions about its daily operation, including follow up of handicapped infants and those at risk of developing a handicapping condition. Health Department staff provided this information to their other staff and they continued the further preparation of their proposal. This is still in the process of being developed within the Health Department. SIG staff encouraged the Health Department to consider a strategy of coordinating funds with each of the Regional Early Childhood Direction Centers that would allow for these centers to complete the high risk infant registry within their region. SIG staff emphasized this logical approach since these centers have a direct tie in with the Perinatal Clinics and Neonatal Intensive Care Units, and may already have some of this information. SIG staff emphasized the need to first coordinate any final plan with SIG staff. This has been

agreed to and when the proposal is in a form to share with other state agencies, a copy will be forwarded to SIG staff for review.

As a result of these efforts, Health Department staff agreed to provide training to Regional Early Childhood Direction Center staffs at their scheduled fall Director's meeting about this possible proposal and update them on services available through the Physically Handicapped Children's Program (PHCP). Similarly, Health Department personnel invited SIG staff and Regional Early Childhood Direction Center staff to regional meetings being conducted around the state on services available as part of and in conjunction with the PHCP. Some Regional Early Childhood Direction Centers will be presenting information about the services they provide in the region. Additionally, SIG staff and Health Department staff agreed to meet on a regular basis to discuss areas of coordination and mutual concern. Coordination has therefore begun between two state agencies serving the young handicapped population.

COUNCIL ON
CHILDREN
AND FAMILIES

In a review of the state budget for FY 1983, SIG staff, in conjunction with other department staff, noticed that some funds were allotted for outreach to address the population of young handicapped children and their families. The responsibility for such a project was given to the New York State Council on Children and Families. SIG staff has been in contact with the Council on Children and Families for preliminary discussions surrounding its efforts. It is anticipated that this proposal will directly link in with Regional Early Childhood Direction Centers and possibly assist in media outreach efforts.

INFORMATION
PACKAGE

The information package as proposed under the current SIG has been completed. This information package explains the concept of direction services, presents information on various Regional Early Childhood Direction Center models and linkages with the Perinatal Centers. The script (See Appendix R), visuals and narration have been completed. The package will be reproduced for each Regional Early Childhood Direction Center. These centers provided input into the design of the final product.

HEAD START

SIG staff has been involved throughout the entire project year in meetings between representatives of Head Start and the Assistant Commissioner for Education of Children with Handicapping Conditions. Discussions were initiated regarding development of an interagency agreement between Head Start and the State Education Department toward further coordinating activities for young handicapped children.

SIG staff coordinated the development of an initial draft of an interagency agreement which details coordinated efforts between the State Education Department and the Region II, Administration for Children, Youth and Families representing Head Start grantees in New York State. This draft details how both agencies will better serve young handicapped children in Head Start, through cooperative efforts at the state and local levels. It is anticipated that a final agreement will be developed during the 1982-83 SIG year. In addition, SIG staff provided training to Head Start staff, in conjunction with other department staff as outlined in the agreement. SIG staff also participated as a member

of the advisory group to the Resource Access Project, which provides technical assistance to Head Starts.

PARENT
EDUCATION
COMMITTEE

SIG staff served on an internal Department Parent Education Committee designed to coordinate parent education services for all parents in the state. (See Appendix S for a copy of agendas from a sampling of these meetings.) SIG staff attended a meeting of local agencies in New York City to coordinate resources for parents, including those of young handicapped children as part of their Parent Education Committee responsibilities.

CONSORTIA

Additionally, SIG staff met with representatives of the newly formed New York State Consortium of Federal Demonstration and Outreach projects to provide them with updated information on issues surrounding legislation. SIG staff continued to work with the consortium in providing technical assistance and information as indicated.

Assisting Regional Early Childhood Direction Centers
in Linking Handicapped Infants to Services

SIG staff developed and conducted two training sessions to date for Regional Early Childhood Direction Centers which addressed the following areas: (See Appendix T for agenda)

- . Future of Regional Early Childhood Direction Centers
- . Update of Early Childhood Activities in New York State
- . New Regulations for Deaf Infant Program
- . Family Court Update
- . Bimonthly Reporting Requirements and Concerns
- . Implementation of Evaluation Design
- . Determining Levels of Assistance
- . Coordination with SETRCs
- . Information Sharing
- . Time Management Strategies
- . Review of Regional Early Childhood Direction Center models and negotiation process

SIG staff developed bi-monthly reporting forms to collect data on the number of children and parents being served and the various types of services being performed through direction activities. These reporting forms also serve as a tool to assist project staff in managing their activities by objective.

Each bimonthly report was reviewed, clarified, and analyzed by SIG staff. The following information summarizes Regional Early Childhood Direction Center activities from September 1981 to August 1982 in linking handicapped infants to services.

3-MONTHLY
REPORTS

<u>Activity</u>	<u>9/81 through 8/82</u>
Number of infants matched to services	1,891
Number of services matched to infants	2,588
Number of parents of handicapped infants assisted	1,985
Number of professionals or agencies assisted	594
Number of children referred to COH	260
Number of referrals from Regional Perinatal Centers	3,080
Number of agencies assisted with Family Court process related to infants	53
Number of children from these agencies impacted upon	598
Number of follow up contacts to parents	2,815
Number of follow up to professionals/agencies	1,376

The results demonstrate a significant increase in the number of infants receiving services. For example during last year (9/1/80-8/30/81) projects linked 1,230 infants to services. This year, 1,891 infants were matched to services. This reflects an increase of 53%.

It should be noted that there were seven Regional Early Childhood Direction Center projects this year compared to five last year. A comparison of average per project data follows:

<u>Activity</u>	<u>Average 1980</u>	<u>Sept-Aug</u>	<u>Average 1981</u>
Number of infants matched to services	246		270
Number of services matched to infants	420		369.7
Number of parents of handicapped infants assisted	284.6		283.6
Number of professionals or agencies assisted	76.6		84.9
Number of children referred to COH	13		37
Number of referrals from Regional Perinatal Centers	235		440
Number of agencies assisted with Family Court process related to infants	14		7.6
Number of children from these agencies impacted upon	208.6		85.4
Number of follow up contacts to parents	244.6		402
Number of follow up to professionals/agencies	115.4		196.6

In analyzing these comparative averages, a crucial item to look at is the average number of infants matched to services. This year an average of 270 infants were matched to services compared to 246 last year, an increase of 10%. In addition, the average number of referrals from Perinatal Centers increased by 87%, indicating more children are being integrated into the service delivery system at an earlier age. Regional Early Childhood Direction Centers were also more intensely involved in follow up contacts to parents and professionals. The

PER PROJECT
COMPARISONS

average number of follow up contacts increased 64% and 74% respectively. Similarly, the average number of referrals to the Committee on the Handicapped rose by 185%. It is not surprising that less assistance was necessary with the Family Court process since agencies, as they become more proficient in using this system, require less assistance. Though the average number of services matched to children appears to decrease this may be a reflection of children being linked to a more comprehensive program which would be reported as one service matched to the child.

SIG staff analyzed data to determine the impact that cooperative agreements with Perinatal Clinics have on the number of handicapped infants being linked to services. Results indicate that agreements with Perinatal Clinics do in fact have an impact on accelerating services to handicapped infants. The following chart compares data averages between the Regional Early Childhood Direction Centers and the Early Childhood Direction Centers which do not have a cooperative agreement with a Perinatal Clinic.

	<u>Activity</u>	<u>RE CDC</u>	<u>ECDC</u>
<u>REGIONAL EARLY CHILDHOOD DIRECTION CENTERS VS. EARLY CHILDHOOD DIRECTION CENTERS</u>	Number of infants matched to services	270	54.7
	Number of services matched to infants	369.7	91.5
	Number of parents of handicapped infants assisted	283.6	79
	Number of professionals or agencies assisted	84.9	31.8
	Number of children referred to COH	37	22.7
	Number of referrals from Regional Perinatal Centers	440	14.7
	Number of agencies assisted with Family Court process related to infants	7.6	7
	Number of children from these agencies impacted upon	85.4	75.7
	Number of follow up contacts to parents	402	129.5
	Number of follow up contacts to professionals/agencies	196.6	59.8

From this analysis, it becomes clear that the establishment of Regional Early Childhood Direction Centers has continued to accelerate services to handicapped infants in New York State.

SIG staff had the opportunity to visit each Regional Early Childhood Direction Center at least twice during this project year. Some projects were visited more often when indicated. During each visit, introductions to the facility and support personnel were made. In addition, SIG staff became knowledgeable about the daily operation of the center, such as intake procedures and follow up systems. Discussions centered on progress on activities by objective and current issues, concerns and/or problems. Following each site visit, a field visit report was completed and a follow up letter, summarizing the visit and offering strategies was sent to each project coordinator (See Appendix U). Field visits provided the opportunity for staff to see first-hand how activities were being completed.

TECHNICAL ASSISTANCE

SIG staff provided the network of Regional Early Childhood Direction Centers with program support, information and technical assistance. The types of requests for assistance received from the projects involved information and assistance in the areas of:

- . Legislation
- . Family Court petitions
- . Federal and State programs, resources and funding
- . Strategies to increase number of referrals
- . Organization of follow-up system
- . Outreach strategies and publicity
- . Interagency collaboration and cooperation
- . Dealing with parental perceptions of handicapped children

Telephone contact between SIG staff and the Regional Early Childhood Direction Centers was the major vehicle in providing technical assistance and support between training sessions and site visits. SIG staff has also assisted in the development of a brochure to assist staff in publicizing Direction services.

EVALUATION DESIGN

In order to evaluate the efforts of Regional Early Childhood Direction Centers, SIG staff in conjunction with other department staff and consultants from the Center for Resource Management developed an evaluation design. Consultants were identified by Technical Assistance Development System (TADS), as having expertise in evaluation designs and interagency coordination. SIG staff was involved in meeting with consultants, describing projects and discussing design and form development. In addition to technical assistance for this design through TADS, funds were available to support this effort from other department resources. SIG staff reviewed the draft of the design and forms, and recommended that the formal evaluation design be implemented for a six month period, from February to July 1982. After the State Education Department approved the design, a training session was conducted by the Center for Resource Management for project staffs regarding implementing the evaluation design (See Appendix V). SIG staff provided technical assistance and clarification to project staff during implementation on specific items including forms, appropriate record keeping strategies and completion.

SIG staff assisted in the development and dissemination of parent and agency questionnaires to users of the Regional Early Childhood Direction Center in order to evaluate their effectiveness from their perspective.

Consultants are analyzing data, indicating significant items and preparing a final report. This will assist SIG staff in recommending modifications and making future decisions.

Summary

The State Implementation Grant continued to have a significant impact in the area of early childhood special education in New York State during the 1981-82 project year. Further efforts continued for development of a comprehensive State Plan for handicapped children ages three to five and accelerating services to handicapped infants through Regional Early Childhood Direction Centers.

Activities conducted by the SIG for support of legislation have increased the likelihood of legislation being enacted in the near future for three and four year old handicapped children. As a direct result of SIG efforts, a draft of early childhood regulations needed upon implementation of legislation has been completed for the first time in the state. SIG staff are looked to as an important source of information and expertise in this area. The State Plan continues to reflect the most current information about services to young handicapped children as a result of SIG staff working closely with the State Plan Officer. Parents and professionals have been accurately and comprehensively informed about current programs and procedures as a result of the SIG efforts in updating publications, the development of an early childhood guidebook entitled "Special Education for Handicapped Children Birth to Five", and cooperative efforts with the State Training Network (SETFC). As indicated earlier, SIG staff worked closely with Incentive Grant staff thereby maximizing both resources without duplication.

The SIG developed three new Regional Early Childhood Direction Centers during 1981-82, exceeding the goal of two, as proposed in the original application. As a result, more young handicapped children are being linked to services than ever before. Significant progress has been achieved in the development of state level agreements. Two state agencies have expressed an interest in the coordination of activities and/or resources with the network of Regional Early Childhood Direction Centers as a result of SIG efforts. For the first time, an agreement between the State Education Department and Head Start appears forthcoming.

SIG staff continued to provide technical assistance to Regional Early Childhood Direction Centers and is awaiting the results of the evaluation design measuring the effectiveness of these projects.

Overall, the SIG accomplished its goals for the 1981-82 project year and was an important resource in serving young handicapped children in the state.

Appendices were removed because of poor reproduction quality.